

State: Maryland **First Filing Company:** The Cincinnati Casualty Company, ...
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

Filing at a Glance

Companies: The Cincinnati Casualty Company
 The Cincinnati Indemnity Company
 The Cincinnati Insurance Company
Product Name: CQD-CA-12-5503-MD
State: Maryland
TOI: 20.0 Commercial Auto
Sub-TOI: 20.0001 Business Auto
Filing Type: Rate/Rule
Date Submitted: 05/18/2012
SERFF Tr Num: CNNA-128376139
SERFF Status: Closed-Received Under Competitive Rating
State Tr Num: 05212012
State Status: Complete
Co Tr Num: CQD-CA-12-5503-MD

Effective Date 01/01/2013
Requested (New):
Effective Date 01/01/2013
Requested (Renewal):
Author(s): Allison Timmers
Reviewer(s): Marsha Hall (PC) (primary), Linas Glemza (PC)
Disposition Date: 07/30/2012
Disposition Status: Received Under Competitive Rating
Effective Date (New): 01/01/2013
Effective Date (Renewal): 01/01/2013

State: Maryland
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

General Information

Project Name:
Project Number:
Reference Organization: N/A
Reference Title:
Filing Status Changed: 07/30/2012
State Status Changed: 07/30/2012
Created By: Allison Timmers
Corresponding Filing Tracking Number:

Status of Filing in Domicile: Authorized
Domicile Status Comments:
Reference Number: N/A
Advisory Org. Circular:

Deemer Date:
Submitted By: Allison Timmers

Filing Description:
NEW PAGE
CA-GR-11 (1/13)

REPLACED PAGE
CA-GR-11 (8/09)

DESCRIPTION OF CHANGE
RULE 28. WHO IS AN INSURED OMNIBUS CLAUSE
Adding new rule.

NEW PAGE
CA-90 (1/13)

REPLACED PAGE
CA-90 (4/08)

DESCRIPTION OF CHANGE
Rule 69. NONOWNERSHIP LIABILITY
B.1. and 2. the wording is revised to correspond with the changes in 69.C.3.

NEW PAGE
CA-91 (1/13)

REPLACED PAGE
CA-91 (9/11)

DESCRIPTION OF CHANGE
Rule 69. NONOWNERSHIP LIABILITY
C.1.a. is revised to add class codes 1024, 1025 and 1026 which represent ISO code 6601. Premiums are amended for class codes 6602 through 6605.

Removed dashes from the word Nonowned.

NEW PAGE
CA-92 thru

State: Maryland
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

CA-92.1 (1/13)

REPLACED PAGE

CA-92 (9/11)

DESCRIPTION OF CHANGE

Rule 69. NONOWNERSHIP LIABILITY

C.3. the rule is replaced to accommodate for Home Health Care Risks, Hospice Care Risks and Companion Care Risks. Twenty-eight new class codes have been added. These codes reflect the total number of employees, with or without transporting clients or patients and the percentage of employees using their own vehicles in the insured's business.

D. is revised to show new class codes 1024, 1025 and 1026 which represent ISO code 6601. Premiums are revised.

Removed dashes from the word Nonowned.

Moved Rule 69.C.4., D., E., F. and Rule 70.A.1.a. & b. to

CA-92.1.

Rule 70. HIRED AUTOS

A.1.a. (1) and (2) wording is revised to match more closely with ISO countrywide wording.

NEW PAGE

CA-93 (1/13)

REPLACED PAGE

CA-93 (4/08)

DESCRIPTION OF CHANGE

Rule 70. HIRED AUTOS

Headings are revised under A.1.b.(4) - contractual liability and A.1.b.(4) (c) - Example

NEW PAGE

CA-94 (1/13)

REPLACED PAGE

CA-94 (4/08)

DESCRIPTION OF CHANGE

Rule 70. HIRED AUTOS

B.3.d. (Bodily Injury and Property Damage, \$100,000 limit for "All Territories") is revised to reflect the selected loss cost based on current ISO loss cost times our company expense load. The minimum premium remains at \$75.00.

C.1. is reworded and C.2., for Premium Computation is revised to add premiums and new Limits of Coverage up to \$60,000.

NEW PAGE

CA-95 (1/13)

State: Maryland
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: CQD-CA-12-5503-MD
 Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

REPLACED PAGE
 CA-95 (4/08)

DESCRIPTION OF CHANGE

Rule 70. HIRED AUTOS
 C.2.c.(2) revised Rate Per Each \$100 Annual Cost of Hire for Comprehensive, Collision and Specified Causes of Loss to reflect the selected loss cost based on current ISO loss cost times our company expense load.

Company and Contact

Filing Contact Information

Allison Timmers, Filings Specialist allison_timmers@cinfin.com
 6200 S. Gilmore Road 513-870-2592 [Phone]
 Fairfield, OH 45014

Filing Company Information

The Cincinnati Casualty Company	CoCode: 28665	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-0826946	

The Cincinnati Indemnity Company	CoCode: 23280	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-1241230	

The Cincinnati Insurance Company	CoCode: 10677	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-0542366	

Filing Fees

Fee Required? Yes
 Fee Amount: \$375.00
 Retaliatory? No
 Fee Explanation: 1 rule/rate filing x \$125 x 3 companies = \$375.00
 Per Company: Yes

Company	Amount	Date Processed	Transaction #
The Cincinnati Casualty Company	\$125.00	05/18/2012	59278799
The Cincinnati Indemnity Company	\$125.00	05/18/2012	59278800
The Cincinnati Insurance Company	\$125.00	05/18/2012	59278801

State: Maryland **First Filing Company:** The Cincinnati Casualty Company, ...
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
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State Specific

Upon your submission of this filing, does this filing meet our filing requirements listed in the GENERAL INSTRUCTIONS?: YES

State: Maryland
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Received Under Competitive Rating	Marsha Hall (PC)	07/30/2012	07/30/2012

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Marsha Hall (PC)	07/09/2012	07/09/2012
Pending Industry Response	Marsha Hall (PC)	07/02/2012	07/02/2012

Response Letters

Responded By	Created On	Date Submitted
Allison Timmers	07/09/2012	07/09/2012
Allison Timmers	07/06/2012	07/06/2012

State: Maryland
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: CQD-CA-12-5503-MD
 Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Disposition

Disposition Date: 07/30/2012

Effective Date (New): 01/01/2013

Effective Date (Renewal): 01/01/2013

Status: Received Under Competitive Rating

Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
The Cincinnati Casualty Company	33.380%	0.740%	\$10	2	\$1,301	41.740%	0.000%
The Cincinnati Indemnity Company	33.380%	0.000%	\$0	0	\$0	0.000%	0.000%
The Cincinnati Insurance Company	33.380%	0.750%	\$44,129	1,667	\$5,883,802	77.370%	0.000%

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing

0.000%

Overall Percentage Rate Impact For This Filing

0.000%

Effect of Rate Filing-Written Premium Change For This Program

\$44,139

Effect of Rate Filing - Number of Policyholders Affected

1,669

SERFF Tracking #:

CNNA-128376139

State Tracking #:

05212012

Company Tracking #:

CQD-CA-12-5503-MD

State:

Maryland

First Filing Company:

The Cincinnati Casualty Company, ...

TOI/Sub-TOI:

20.0 Commercial Auto/20.0001 Business Auto

Product Name:

CQD-CA-12-5503-MD

Project Name/Number:

/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	P&C Actuarial Justification		Yes
Supporting Document	P&C Third Party Filing Authorization		Yes
Supporting Document	Memorandum		Yes
Rate	AUTOMOBILE MANUAL SECTION I GENERAL RULES		Yes
Rate	AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES		Yes
Rate	AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES		Yes
Rate	AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES		Yes

State: Maryland
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	07/09/2012
Submitted Date	07/09/2012
Respond By Date	07/09/2012

Dear Allison Timmers,

Introduction:

In follow up to our telephone conversation the language in question was what is shown in item 4. Earned Premium of concern is the statement "the advance premium is the earned premium" please explain.

Conclusion:

Sincerely,
Marsha Hall (PC)

State: Maryland
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	07/09/2012
Submitted Date	07/09/2012

Dear Marsha Hall (PC),

Introduction:

In response to your letter dated 7/9/2012.

Response 1

Comments:

This is not a "fully earned" premium. If we cancel it is subject to pro-rate.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

If you need anything further, please let me know.

Sincerely,

Allison Timmers

State: Maryland **First Filing Company:** The Cincinnati Casualty Company, ...
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	07/02/2012
Submitted Date	07/02/2012
Respond By Date	07/16/2012

Dear Allison Timmers,

Introduction:

The Maryland Insurance Administration ("MIA") has received and reviewed your submission. For further consideration of this filing please provide or modify the following:

Objection 1

- AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES, CA-92.1 (Rate)

Comments: Provide actuarial support and provide an example of rule 69. Nonownership Liability, 4. Earned Premium.

Conclusion:

Please provide the requested information by 7/16/12. Your prompt response is greatly appreciated.

Sincerely,

Marsha Hall (PC)

State: Maryland
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: CQD-CA-12-5503-MD
Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	07/06/2012
Submitted Date	07/06/2012

Dear Marsha Hall (PC),

Introduction:

The following is in response to your letter dated 7/2/2012.

Response 1

Comments:

We don't understand the question in regards to providing actuarial support.

The policy is rated using total # of employees and limit of liability. The rule simply states that if the exposure changes substantially it could be subject to audit. For example, if we rated using 11-25 employees and we find out it should have been rated 0-5 employees the premium could be amended to reflect the premium for 0-5 employees.

Related Objection 1

Applies To:

- AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES, CA-92.1 (Rate)

Comments: Provide actuarial support and provide an example of rule 69. Nonownership Liability, 4. Earned Premium.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

We hope this satisfies any concerns you may have regarding this submission.

Sincerely,

Allison Timmers

State: Maryland
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: CQD-CA-12-5503-MD
 Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Rate Information

Rate data applies to filing.

Filing Method: Prior Approval
 Rate Change Type: Increase
 Overall Percentage of Last Rate Revision: -9.500%
 Effective Date of Last Rate Revision: 05/01/2012
 Filing Method of Last Filing: Prior Approval

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
The Cincinnati Casualty Company	33.380%	0.740%	\$10	2	\$1,301	41.740%	0.000%
The Cincinnati Indemnity Company	33.380%	0.000%	\$0	0	\$0	0.000%	0.000%
The Cincinnati Insurance Company	33.380%	0.750%	\$44,129	1,667	\$5,883,802	77.370%	0.000%

Overall Rate Information for Multiple Company Filings

Overall % Rate Indicated:
 Overall Percentage Rate Impact For This Filing:
 Effect of Rate Filing - Written Premium Change For This Program: \$44,139
 Effect of Rate Filing - Number of Policyholders Affected: 1669

State: Maryland
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: CQD-CA-12-5503-MD
 Project Name/Number: /

First Filing Company: The Cincinnati Casualty Company, ...

Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		AUTOMOBILE MANUAL SECTION I GENERAL RULES	CA-GR-11	Replacement		MD CA 01-13 D - CHANGES (CA-GR-11).pdf MD CA 01-13 D - FINAL (CA-GR-11).pdf
2		AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES	CA-90 thru CA-92	Replacement		MD CA 01-13 D - CHANGES (CA-90 THRU CA-92).pdf MD CA 01-13 D - FINAL (CA-90 THRU CA-92).pdf
3		AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES	CA-92.1	New		MD CA 01-13 D - FINAL (CA-92.1).pdf
4		AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES	CA-93 thru CA-95	Replacement		MD CA 01-13 D - CHANGES (CA-93 THRU CA-95).pdf MD CA 01-13 D - FINAL (CA-93 THRU CA-95).pdf

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION I GENERAL RULES

20. INTERSTATE ACCOUNTS

A. Rules and Rates

1. Commercial and Business Rated Private Passenger Automobile

The rate development for all coverage(s) will use the filed rates for each state where the automobiles are garaged.

2. Garage Liability and Garagekeepers Coverage

The rate development for garage liability and garagekeepers coverage will use the rates filed for each state in which the address of the garage operations is declared.

B. Forms

1. Commercial automobile policies providing coverage for exposures in more than one state may be written on one policy subject to the basic coverage form(s) filed in the state where the:

a. Portion of the insured's operation that generates the largest exposure is located. For commercial rated or business private passenger automobiles this will be the number of automobiles. For garage liability or garagekeepers this will be the state where the largest garage operation is declared based on payroll, rating units and value; or

b. Insurance is negotiated.

2. When applicable, forms recognizing state amendatory changes such as, no-fault, uninsured, underinsured, PIP and medical payments coverages will be included for coverage(s) afforded for respective states.

21. INTERPOLATION

Compute the charges for limits not shown by interpolation. Refer to company for limits higher than those provided.

22. - 25. RESERVED FOR FUTURE USE

26. RESERVED

27.-29. RESERVED FOR FUTURE USE

28. WHO IS AN INSURED OMNIBUS CLAUSE

At the request of the insured, the business auto policy may be endorsed to exclude, from insured status, the owner, lessee, or anyone else from whom the insured has hired, rented or borrowed a covered auto, including any agent or employee of such owner or lessee. Use Form AA 4292.

29. RESERVED FOR FUTURE USE

30. OPTIONAL LAY-UP CREDIT

A. A credit is applicable to premiums for all coverages except Comprehensive, Fire, Theft or Specified Perils Coverage, if the insured intends non-use of specified owned auto(s) for a specified period of time.

The lay-up period must be for a minimum of 30 consecutive days. Use Endorsement **AA 4080**.

B. When this rule applies, the suspension of coverage rule can not be used.

C. Premium reduction will be figured on a pro-rata basis of the number of days of lay-up to the total number of days in the policy period.

Example: vehicle is put in storage Oct 1 to Dec 31.

- Pro-rata factor = .751

- \$1,000 annual premium x .751 = \$751 net annual Premium.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION I GENERAL RULES

20. INTERSTATE ACCOUNTS

A. Rules and Rates

1. Commercial and Business Rated Private Passenger Automobile

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a. Portion of the insured's operation that generates the largest exposure is located. For commercial rated or business private passenger automobiles this will be the number of automobiles. For garage liability or garagekeepers this will be the state where the largest garage operation is declared based on payroll, rating units and value; or

b. Insurance is negotiated.

2. When applicable, forms recognizing state amendatory changes such as, no-fault, uninsured, underinsured, PIP and medical payments coverages will be included for coverage(s) afforded for respective states.

21. INTERPOLATION

Compute the charges for limits not shown by interpolation. Refer to company for limits higher than those provided.

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27. RESERVED FOR FUTURE USE

28. WHO IS AN INSURED OMNIBUS CLAUSE

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The lay-up period must be for a minimum of 30 consecutive days. Use Endorsement **AA 4080**.

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C. Premium reduction will be figured on a pro-rata basis of the number of days of lay-up to the total number of days in the policy period.

Example: vehicle is put in storage Oct 1 to Dec 31.

- Pro-rata factor = .751

- \$1,000 annual premium x .751 = \$751 net annual Premium.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

68. DRIVE OTHER CAR COVERAGE (Class Code 9020)

- A. Drive other car coverage is provided for no additional charge in the following cases:
1. An individual named insured who is an auto dealer garage risk. Use Individual Named Insured - Dealers Only Endorsement **CA 99 18**.
 2. An individual named insured who owns a private passenger auto. Refer to the individual as named insured rule. Use Individual Named Insured Endorsement **AA 4041**.
- B. Except for an individual named insured who is an auto dealer garage risk or an individual named insured who owns a private passenger auto, use Drive Other Car Coverage - Broadened Coverage for Named Individuals Endorsement **AA 247**. For each named individual, apply the following charge:
1. **For Liability and Auto Medical Payments Coverages:**
 - a. Multiply the base private passenger type premium for the desired coverage in the rate pages by .10.
 - b. For increased limits, refer to the "All Other Risks" factors in Rule **80**.
 - c. Primary and secondary rating factors do not apply.
 2. **For Physical Damage Coverages:**
 - a. Multiply the desired physical damage coverage private passenger type premium on the rate page by .10.
 - b. Age, original cost new and deductible factors do not apply.
 - c. Primary and secondary factors do not apply.
 3. **For Uninsured and Underinsured Motorists Coverages:**

Multiply the rate provided in Rule **77**. for private passenger types by .10.
- C. In all cases, drive other car coverage includes coverage for the spouse at no additional charge.
- D. A 50% credit applies to the Medical Payments rate if the insured elects Limited (Excess) Medical Payments coverage.
Use Endorsement **AA 303** - Limited Medical Payments Endorsement.
- E. Except for expense modification, the premium for this coverage is not subject to further modification or rate plan.
- F. Use the highest rated territory for a private passenger auto on the policy. If there is no private passenger auto on the policy, use the highest rated territory in the state.

69. NONOWNERSHIP LIABILITY

- A. **Garage Risks**
Coverage for nonownership liability for garage dealer risks is included in the basic garage charges. The following rating methodology applies to other than garage dealer risks.
- B. **Eligibility**
1. For home health care agencies, hospice care agencies, or companion care agencies where 25% or more of the insured's employees regularly operate their vehicles in the insured's business, refer to Rule 69.C.3. for rating.
 2. Otherwise:
 - a. If more than 50% of the insured's employees regularly operate their vehicles in the insured's business, refer to Company for rating.
 - b. For all other risks, than provided for in B.1. and B.2.a. above, rate in accordance with Rules 69.C.1., 69.C.2., or 69.D. If more than 50% of the insured's employees regularly operate their autos in the insured's business, refer to Company for rating. Otherwise, rate in accordance with this rule.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

69. NONOWNERSHIP LIABILITY (Cont'd)

C. Premium Development

1. Application

- a. For all risks other than Social Service agency risks as defined in the public transportation section:

Determine the total number of employees of the insured at all locations. Select the advance premium from the table shown.

Class Code	Total Number of Employees	Bodily Injury and Property Damage \$100,000 Limit
1024	0 - 5	See Rule 69.D.
1025	6 - 10	See Rule 69.D.
1026	11 - 25	See Rule 69.D.
6601	0 - 25	See Rule 69.D.
6602	26 - 100	222.00 172.00
6603	101 - 500	528.00 377.00
6604	501 - 1,000	888.00 594.00
6605	over 1,000	1,138.00 1,330.00

See Rule 69.D. for rates when number of employees is 25 or less.

- b. To extend non-ownership liability coverage to cover the individual liability of employees (including employees of garage service operations) while using their autos and other covered non-owned autos in the employer's business, compute the additional premium by multiplying the premium determined in accordance with paragraph 1. above by .25. (Class Code 6671). Use Employees as Insureds Endorsement **CA 99 33**.
- c. For partnership as the Named Insured (Class Code 9736)
- (1) When non-ownership liability coverage is afforded, the coverage form provides coverage to a partnership for the use of autos owned by individual partners which are used in the business of the partnership.
 - (2) Multiply the private passenger type rates on the rate pages by .10 for each active or inactive partner for the territory in which the partnership is located. Apply this rating base regardless of the type of autos being used.

2. Social Service Agency Risks

- a. Determine the advance premium based on the number of employees in accordance with paragraph 1. above.
- b. For additional premium charges for volunteers, determine the total number of volunteers at all locations who regularly use their own autos to transport Social Service clients in connection with the agency's programs. (Class Code 6670).
Charge \$3.00 per volunteer for bodily injury and property damage liability at \$100,000 limit. The minimum premium for bodily injury and property damage liability is \$20.00 at \$100,000 limit.
- c. To extend non-ownership coverage to cover the individual liability of agency employees, charge an additional premium determined in accordance with paragraph 1.b. above. (Class Code 9738). Use Employees as Insureds Endorsement **CA 99 33**.
- d. Coverage may be extended to the blanket individual liability of volunteers who use their own autos in the agency's Social Service programs. (Class Code 6672). Use Social Service Agencies - Volunteers As Insureds Endorsement **CA 99 34**.
Charge an additional premium of \$0.66 for bodily injury and property damage liability at \$100,000 limit per volunteer donor.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

69. NONOWNERSHIP LIABILITY (Cont'd)

~~3. Home Health Care Agency Risks~~

- ~~a. Determine the advance premium based on the number of employees in accordance with paragraph 1. above.~~
- ~~b. For Home Health Agencies with greater than 50% of the insured's employees regularly operating their auto in the insured's business, multiply the premium developed in 3.a. above by a factor of 2.0.~~
- ~~c. To extended nonownership coverage to cover the individual liability of agency employees, charge an additional premium determined in accordance with paragraph 1.b. above. Use Employees as Insureds Endorsement CA 99 33.~~

3. Home Health Care Risks, Hospice Care Risks, Companion Care Risks

This rule is only applicable to home health care agencies, hospice care agencies, and companion care risks written under the Commercial Lines Home Health Care Program.

- a. Determine the total number of employees of the insured at all locations.
- b. For risks with 0-25 employees, select the base premium from the table below.

Class Code				Total Number of Employees	Bodily Injury and Property Damage \$100,000 Limit
w/transport		w/o transport			
<u>25% to 50%</u>	<u>51% to 100%</u>	<u>25% to 50%</u>	<u>51% to 100%</u>		
<u>1027</u>	<u>1028</u>	<u>1029</u>	<u>1030</u>	<u>0-5</u>	<u>\$ 32.00</u>
<u>1031</u>	<u>1032</u>	<u>1033</u>	<u>1034</u>	<u>6-10</u>	<u>52.00</u>
<u>1035</u>	<u>1036</u>	<u>1037</u>	<u>1038</u>	<u>11-25</u>	<u>71.00</u>

- c. For risks with over 25 employees, select the base premium from the table below.

Class Code				Total Number of Employees	Bodily Injury and Property Damage \$100,000 Limit
w/transport		w/o transport			
<u>25% to 50%</u>	<u>51% to 100%</u>	<u>25% to 50%</u>	<u>51% to 100%</u>		
<u>1039</u>	<u>1040</u>	<u>1041</u>	<u>1042</u>	<u>26-100</u>	<u>\$ 222.00</u>
<u>1043</u>	<u>1044</u>	<u>1045</u>	<u>1046</u>	<u>101-500</u>	<u>528.00</u>
<u>1047</u>	<u>1048</u>	<u>1049</u>	<u>1050</u>	<u>501-1,000</u>	<u>888.00</u>
<u>1051</u>	<u>1052</u>	<u>1053</u>	<u>1054</u>	<u>Over 1,000</u>	<u>1,138.00</u>

- d. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with 25% to 50% of the insured's employees regularly using their own vehicles in the insured's business, with no transportation of clients or patients, multiply the base premium determined from the table above by a factor of 1.50.
- e. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with 25% to 50% of the insured's employees regularly using their own vehicles in the insured's business that may transport clients or patients, multiply the base premium determined from the table above by a factor of 3.00.
- f. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with greater than 50% of the insured's employees regularly operating their own vehicles in the insured's business, with no transportation of clients or patients, multiply the base premium determined from the table above by a factor of 2.0.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

- g. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with greater than 50% of the insured's employees regularly operating their own vehicles in the insured's business that may transport clients or patients, multiply the base premium determined from the table above by a factor of **4.0**.
- h. To extend nonownership coverage to cover the individual liability of agency employees, charge an additional premium determined in accordance with tables **3.b.** or **3.c.** above. Use Employees as Insureds Endorsement **CA 99 33**.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

68. DRIVE OTHER CAR COVERAGE (Class Code 9020)

- A. Drive other car coverage is provided for no additional charge in the following cases:
1. An individual named insured who is an auto dealer garage risk. Use Individual Named Insured - Dealers Only Endorsement **CA 99 18**.
 2. An individual named insured who owns a private passenger auto. Refer to the individual as named insured rule. Use Individual Named Insured Endorsement **AA 4041**.
- B. Except for an individual named insured who is an auto dealer garage risk or an individual named insured who owns a private passenger auto, use Drive Other Car Coverage - Broadened Coverage for Named Individuals Endorsement **AA 247**. For each named individual, apply the following charge:
1. **For Liability and Auto Medical Payments Coverages:**
 - a. Multiply the base private passenger type premium for the desired coverage in the rate pages by .10.
 - b. For increased limits, refer to the "All Other Risks" factors in Rule **80**.
 - c. Primary and secondary rating factors do not apply.
 2. **For Physical Damage Coverages:**
 - a. Multiply the desired physical damage coverage private passenger type premium on the rate page by .10.
 - b. Age, original cost new and deductible factors do not apply.
 - c. Primary and secondary factors do not apply.
 3. **For Uninsured and Underinsured Motorists Coverages:**

Multiply the rate provided in Rule **77**. for private passenger types by .10.
- C. In all cases, drive other car coverage includes coverage for the spouse at no additional charge.
- D. A 50% credit applies to the Medical Payments rate if the insured elects Limited (Excess) Medical Payments coverage.
Use Endorsement **AA 303** - Limited Medical Payments Endorsement.
- E. Except for expense modification, the premium for this coverage is not subject to further modification or rate plan.
- F. Use the highest rated territory for a private passenger auto on the policy. If there is no private passenger auto on the policy, use the highest rated territory in the state.

69. NONOWNERSHIP LIABILITY

- A. **Garage Risks**
Coverage for nonownership liability for garage dealer risks is included in the basic garage charges. The following rating methodology applies to other than garage dealer risks.
- B. **Eligibility**
1. For home health care agencies, hospice care agencies, or companion care agencies where 25% or more of the insured's employees regularly operate their vehicles in the insured's business, refer to Rule **69.C.3.** for rating.
 2. Otherwise:
 - a. If more than 50% of the insured's employees regularly operate their vehicles in the insured's business, refer to Company for rating.
 - b. For all other risks, than provided for in **B.1.** and **B.2.a.** above, rate in accordance with Rules **69.C.1.**, **69.C.2.**, or **69.D.**

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

69. NONOWNERSHIP LIABILITY (Cont'd)

C. Premium Development

1. Application

- a. For all risks other than Social Service agency risks as defined in the public transportation section:

Determine the total number of employees of the insured at all locations. Select the advance premium from the table shown.

Class Code	Total Number of Employees	Bodily Injury and Property Damage \$100,000 Limit
1024	0 - 5	See Rule 69.D.
1025	6 - 10	See Rule 69.D.
1026	11 - 25	See Rule 69.D.
6602	26 - 100	222.00
6603	101 - 500	528.00
6604	501 - 1,000	888.00
6605	over 1,000	1,138.00

See Rule 69.D. for rates when number of employees is 25 or less.

- b. To extend nonownership liability coverage to cover the individual liability of employees (including employees of garage service operations) while using their autos and other covered nonowned autos in the employer's business, compute the additional premium by multiplying the premium determined in accordance with paragraph 1. above by .25. (Class Code 6671). Use Employees as Insureds Endorsement **CA 99 33**.
- c. For partnership as the Named Insured (Class Code 9736)
- (1) When nonownership liability coverage is afforded, the coverage form provides coverage to a partnership for the use of autos owned by individual partners which are used in the business of the partnership.
 - (2) Multiply the private passenger type rates on the rate pages by .10 for each active or inactive partner for the territory in which the partnership is located. Apply this rating base regardless of the type of autos being used.

2. Social Service Agency Risks

- a. Determine the advance premium based on the number of employees in accordance with paragraph 1. above.
- b. For additional premium charges for volunteers, determine the total number of volunteers at all locations who regularly use their own autos to transport Social Service clients in connection with the agency's programs. (Class Code 6670).
Charge \$3.00 per volunteer for bodily injury and property damage liability at \$100,000 limit. The minimum premium for bodily injury and property damage liability is \$20.00 at \$100,000 limit.
- c. To extend nonownership coverage to cover the individual liability of agency employees, charge an additional premium determined in accordance with paragraph 1.b. above. (Class Code 9738). Use Employees as Insureds Endorsement **CA 99 33**.
- d. Coverage may be extended to the blanket individual liability of volunteers who use their own autos in the agency's Social Service programs. (Class Code 6672). Use Social Service Agencies - Volunteers As Insureds Endorsement **CA 99 34**.
Charge an additional premium of \$0.66 for bodily injury and property damage liability at \$100,000 limit per volunteer donor.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

69. NONOWNERSHIP LIABILITY (Cont'd)

3. Home Health Care Risks, Hospice Care Risks, Companion Care Risks

This rule is only applicable to home health care agencies, hospice care agencies, and companion care risks written under the Commercial Lines Home Health Care Program.

- a. Determine the total number of employees of the insured at all locations.
- b. For risks with 0-25 employees, select the base premium from the table below.

Class Code				Total Number of Employees	Bodily Injury and Property Damage \$100,000 Limit
w/transport		w/o transport			
25% to 50%	51% to 100%	25% to 50%	51% to 100%		
1027	1028	1029	1030	0-5	\$ 32.00
1031	1032	1033	1034	6-10	52.00
1035	1036	1037	1038	11-25	71.00

- c. For risks with over 25 employees, select the base premium from the table below.

Class Code				Total Number of Employees	Bodily Injury and Property Damage \$100,000 Limit
w/transport		w/o transport			
25% to 50%	51% to 100%	25% to 50%	51% to 100%		
1039	1040	1041	1042	26-100	\$ 222.00
1043	1044	1045	1046	101-500	528.00
1047	1048	1049	1050	501-1,000	888.00
1051	1052	1053	1054	Over 1,000	1,138.00

- d. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with 25% to 50% of the insured's employees regularly using their own vehicles in the insured's business, with no transportation of clients or patients, multiply the base premium determined from the table above by a factor of **1.50**.
- e. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with 25% to 50% of the insured's employees regularly using their own vehicles in the insured's business that may transport clients or patients, multiply the base premium determined from the table above by a factor of **3.00**.
- f. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with greater than 50% of the insured's employees regularly operating their own vehicles in the insured's business, with no transportation of clients or patients, multiply the base premium determined from the table above by a factor of **2.0**.
- g. To determine the final premium for home health care agencies, hospice care agencies, or companion care agencies with greater than 50% of the insured's employees regularly operating their own vehicles in the insured's business that may transport clients or patients, multiply the base premium determined from the table above by a factor of **4.0**.
- h. To extend nonownership coverage to cover the individual liability of agency employees, charge an additional premium determined in accordance with tables **3.b.** or **3.c.** above. Use Employees as Insureds Endorsement **CA 99 33**.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

69. NONOWNERSHIP LIABILITY (Cont'd)

4. Earned Premium

Unless there is substantial change in exposures during the policy period, the advance premium is the earned premium.

- D. When Hired Automobile and Nonowned Automobile Liability are added to a General Liability Coverage Part in accordance with Rule 56. of Division Six - General Liability, or added to a Business Auto Coverage Part in accordance with Rules 69. and 70. of Division One Automobile the following rates apply:

Class Code	Total Number of Employees	Annual Premium (\$100,000 S/L)
1024	0 to 5	\$32.00
1025	6 to 10	52.00
1026	11 to 25	71.00

These rates are not applicable if:

- Any employee regularly uses their automobile in business for their employer;
 - There are 26 or more employees in the business.
- E. Hired Automobile and Nonowned Automobile Liability Endorsement (**GA 207**) shall be used to afford coverage under a General Liability Coverage Part.
- F. These rates are flat charges. Except for expense modification, the premium for this coverage is not subject to any further modifications or rate plan.

70. HIRED AUTOS

A. Autos Hired, Loaned, Leased or Furnished

- If an insured, lessee or renter is providing the primary insurance covering the auto and the term of the lease or agreement is:
 - 6 months or more -
 - Rate and classify each auto as though owned by the insured, lessee or renter, according to the applicable rules in this manual; and
 - If one of the following endorsements is used to extend the policy to cover the owner of the auto as an additional insured, multiply the otherwise applicable liability rate by 1.04:
 - Employee as Lessor Endorsement **CA 99 47**, if the lessor is an employee of the insured;
 - Lessor - Additional Insured and Loss Payee **AA 4177**; or
 - Hired Autos Specified as Covered Autos You Own Endorsement **CA 99 16**.
 - Less than 6 months (Class Code 6614) - Rate according to the provisions of paragraphs B. and C. except as follows:
 - For liability coverage, separately estimate the cost of hire for those autos for which the insured is providing the primary insurance.
 - Multiply the applicable hired car rate by 6.00.
 - Multiply the rate determined in paragraph b.(2) above times each \$100 cost of hire.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

70. HIRED AUTOS

(4) ~~For Contractual Liability Coverage~~ contractual liability coverage, the following procedures apply:

(a) The insured is covered on a primary basis for liability assumed by contract for the rental or lease of any auto by the insured or by any of his or her employees except for:

- 1) Any auto rented with a driver; or
- 2) Any truckers' hold harmless agreements.

(b) Make a charge for contractually assumed liability for these autos when the total number of auto rental days exceeds an aggregate of 30 days for all auto rental agreements.

(c) ~~Example:~~ The following is an example of the preceding paragraph:

Insured rents a private passenger auto for 25 days.

Insured rents a Pick-up Truck for 15 days.

Make a charge for 10 days (40 days - 30 days).

(d) Due to the variation in exposure from risk to risk, it is impractical to establish a uniform manual rate. The company should establish the appropriate rates according to the available underwriting information.

2. If the owner of the auto is providing the primary insurance, rate according to Paragraph B.
3. If a lessor is an employee of the insured, use Employee As Lessor Endorsement **CA 99 47**.
4. If an employee rents or hires an auto in his or her own name for the purposes of performing duties related to the insured's business, use Employee Hired Autos Endorsement **CA 20 54**.

B. Cost of Hire Basis - Liability Coverages

Class Code 6625 without hold harmless agreements and 6627 with hold harmless agreements.

Minimum Premium Class Code 9740.

1. Truckers

For truckers, refer to the Truckers / Motor Carriers Coverage Rule.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

70. HIRED AUTOS (Cont'd)

2. Public Transportation

For public transportation autos (other than Social Service agencies), moving van associations and freight forwarding operations, refer to Company for rating.

Due to the variation in exposure from risk to risk it is impractical to establish a uniform manual rate. The company should establish the appropriate rates according to the available underwriting information.

3. Premium Computation

- a. Estimate the total cost for the hire of autos for each state where the insured does business. Do not include charges for services performed by common or contract motor carriers subject to the insurance requirement of any public authority regulating motor carriers.
- b. To compute the advance premium, multiply the cost of hire rate under **B.3.d.** below times each \$100 cost of hire in each state. Add the total cost of hire premium for all states.
- c. Unless there is substantial change in exposures during the policy period, the advance premium is the earned premium.
- d. The minimum premium for bodily injury and property damage liability at \$100,000 limit is \$75.00.

BODILY INJURY AND PROPERTY DAMAGE

Subline Code (611)

Limits Identifier Code (1)

\$100,000 Limit - Limit Code (10)

All Territories \$10,8288

- e. The rates / minimum premiums in Rule 69. entitled Non-Ownership Liability include Hired Auto coverage:
 - (1) If no known exposure exists at policy inception, and
 - (2) Is subject to audit upon expiration.

C. Hired Auto Physical Damage (Class Code 9741)

~~1. Physical damage coverage may be provided on a primary basis for autos which are hired, leased, rented, or borrowed. (However, coverage is excluded if hired, leased, rented, or borrowed with a driver.)~~

1. Hired Auto Physical Damage Coverage may be provided on a primary basis for autos while hired, leased, rented, or borrowed by the insured. Coverage does not apply to autos which are leased, hired, rented or borrowed:

- a. With a driver, or
- b. From any of the insured's employees, partners, members (if the insured is a limited liability company) or members of their households.
- c. Use Employee Hired Autos Endorsement CA 20 54 for coverage if an employee rents or hires a vehicle in his or her own name for the purposes of performing duties related to the insured's business.

2. Premium Computation

~~a. The minimum premium for Hired Auto Physical Damage Coverage is as follows:~~

	Primary
Comprehensive	\$20.00
Collision	\$30.00

~~Premiums are not subject to further modification.~~

a. The deposit premium for Hired Auto Physical Damage Coverage is dependent on the limit of coverage desired by the insured. The deposit premiums are as follows:

<u>Limit of Coverage</u>	<u>Primary Comprehensive</u>	<u>Collision</u>
<u>\$25,000</u>	<u>\$34</u>	<u>\$ 51</u>
<u>30,000</u>	<u>40</u>	<u>60</u>
<u>35,000</u>	<u>48</u>	<u>72</u>

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

<u>40,000</u>	<u>54</u>	<u>81</u>
<u>45,000</u>	<u>62</u>	<u>93</u>
<u>50,000</u>	<u>68</u>	<u>102</u>
<u>55,000</u>	<u>74</u>	<u>111</u>
<u>60,000</u>	<u>79</u>	<u>119</u>
<u>Over 60,000</u>		<u>Refer to company.</u>

Premiums are not subject to further modification.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

70. HIRED AUTOS (Cont'd)

- b. Estimate the total cost for the hire of autos for each state where the insured does business. Do not include charges for any auto that is leased, hired, rented or borrowed with a driver.

To provide hired auto physical damage coverage for autos which are leased, hired, rented or borrowed with drivers, use Autos Leased, Hired, Rented or Borrowed with Drivers - Physical Damage Coverage Endorsement **AA 271**. In estimating the total cost for the hire of autos for each state where the insured does business, include the charges for autos leased, hired, rented or borrowed with drivers, as designated in Autos Leased, Hired, Rented or Borrowed with Drivers - Physical Damage Coverage Endorsement **AA 271**.

For information regarding premium computation, refer to paragraph **C.2.** of this rule in the Commercial Lines Manual - Division One - Automobile.

- c. To compute the advance premium for each state where the insured does business:
- (1) Determine the types of coverage desired; and
 - (2) Multiply each \$100 estimated annual cost of hire by the following rates for each coverage:

Comprehensive

	Full Coverage	(Coverage Code 001)
\$	50 Deductible	(Coverage Code 003)
	100 Deductible	(Coverage Code 010)

Rate Per Each \$100 Annual Cost of Hire

.589
.546
.532

Collision

\$	100 Deductible	(Coverage Code 074)
	250 Deductible	(Coverage Code 076)
	500 Deductible	(Coverage Code 077)
	1,000 Deductible	(Coverage Code 078)

Rate Per Each \$100 Annual Cost of Hire

.869
.836
.7880
.735

Specified Causes of Loss

	Full Coverage	(Coverage Code 020)
--	---------------	---------------------

Rate Per Each \$100 Annual Cost of Hire

.278

- d. Add the total cost of hire premium for all states.
- e. Unless there is substantial change in exposures during the policy period, the advance premium is the earned premium.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

70. HIRED AUTOS

(4) For contractual liability coverage, the following procedures apply:

(a) The insured is covered on a primary basis for liability assumed by contract for the rental or lease of any auto by the insured or by any of his or her employees except for:

- 1) Any auto rented with a driver; or
- 2) Any truckers' hold harmless agreements.

(b) Make a charge for contractually assumed liability for these autos when the total number of auto rental days exceeds an aggregate of 30 days for all auto rental agreements.

(c) The following is an example of the preceding paragraph:

Insured rents a private passenger auto for 25 days.

Insured rents a Pick-up Truck for 15 days.

Make a charge for 10 days (40 days - 30 days).

(d) Due to the variation in exposure from risk to risk, it is impractical to establish a uniform manual rate. The company should establish the appropriate rates according to the available underwriting information.

2. If the owner of the auto is providing the primary insurance, rate according to Paragraph B.
3. If a lessor is an employee of the insured, use Employee As Lessor Endorsement **CA 99 47**.
4. If an employee rents or hires an auto in his or her own name for the purposes of performing duties related to the insured's business, use Employee Hired Autos Endorsement **CA 20 54**.

B. Cost of Hire Basis - Liability Coverages

Class Code 6625 without hold harmless agreements and 6627 with hold harmless agreements.

Minimum Premium Class Code 9740.

1. Truckers

For truckers, refer to the Truckers / Motor Carriers Coverage Rule.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

70. HIRED AUTOS (Cont'd)

2. Public Transportation

For public transportation autos (other than Social Service agencies), moving van associations and freight forwarding operations, refer to Company for rating.

Due to the variation in exposure from risk to risk it is impractical to establish a uniform manual rate. The company should establish the appropriate rates according to the available underwriting information.

3. Premium Computation

- a. Estimate the total cost for the hire of autos for each state where the insured does business. Do not include charges for services performed by common or contract motor carriers subject to the insurance requirement of any public authority regulating motor carriers.
- b. To compute the advance premium, multiply the cost of hire rate under **B.3.d.** below times each \$100 cost of hire in each state. Add the total cost of hire premium for all states.
- c. Unless there is substantial change in exposures during the policy period, the advance premium is the earned premium.
- d. The minimum premium for bodily injury and property damage liability at \$100,000 limit is \$75.00.

BODILY INJURY AND PROPERTY DAMAGE

Subline Code (611)

Limits Identifier Code (1)

\$100,000 Limit - Limit Code (10)

All Territories \$0.88

- e. The rates / minimum premiums in Rule **69.** entitled Non-Ownership Liability include Hired Auto coverage:
 - (1) If no known exposure exists at policy inception, and
 - (2) Is subject to audit upon expiration.

C. Hired Auto Physical Damage (Class Code 9741)

1. Hired Auto Physical Damage Coverage may be provided on a primary basis for autos while hired, leased, rented, or borrowed by the insured. Coverage does not apply to autos which are leased, hired, rented or borrowed:
 - a. With a driver, or
 - b. From any of the insured's employees, partners, members (if the insured is a limited liability company) or members of their households.
 - c. Use Employee Hired Autos Endorsement **CA 20 54** for coverage if an employee rents or hires a vehicle in his or her own name for the purposes of performing duties related to the insured's business.
2. Premium Computation
 - a. The deposit premium for Hired Auto Physical Damage Coverage is dependent on the limit of coverage desired by the insured. The deposit premiums are as follows:

Limit of Coverage	Primary Comprehensive	Collision
\$25,000	\$34	\$ 51
30,000	40	60
35,000	48	72
40,000	54	81
45,000	62	93
50,000	68	102
55,000	74	111
60,000	79	119
Over 60,000	Refer to company.	

Premiums are not subject to further modification.

THE CINCINNATI INSURANCE COMPANIES

DIVISION ONE COMMERCIAL LINES AUTOMOBILE MANUAL SECTION VII COMMON COVERAGES

70. HIRED AUTOS (Cont'd)

- b. Estimate the total cost for the hire of autos for each state where the insured does business. Do not include charges for any auto that is leased, hired, rented or borrowed with a driver.

To provide hired auto physical damage coverage for autos which are leased, hired, rented or borrowed with drivers, use Autos Leased, Hired, Rented or Borrowed with Drivers - Physical Damage Coverage Endorsement **AA 271**. In estimating the total cost for the hire of autos for each state where the insured does business, include the charges for autos leased, hired, rented or borrowed with drivers, as designated in Autos Leased, Hired, Rented or Borrowed with Drivers - Physical Damage Coverage Endorsement **AA 271**.

For information regarding premium computation, refer to paragraph **C.2.** of this rule in the Commercial Lines Manual - Division One - Automobile.

- c. To compute the advance premium for each state where the insured does business:
- (1) Determine the types of coverage desired; and
 - (2) Multiply each \$100 estimated annual cost of hire by the following rates for each coverage:

Comprehensive		Rate Per Each \$100 Annual Cost of Hire
Full Coverage	(Coverage Code 001)	.58
\$ 50 Deductible	(Coverage Code 003)	.54
100 Deductible	(Coverage Code 010)	.53
Collision		Rate Per Each \$100 Annual Cost of Hire
\$ 100 Deductible	(Coverage Code 074)	.86
250 Deductible	(Coverage Code 076)	.83
500 Deductible	(Coverage Code 077)	.78
1,000 Deductible	(Coverage Code 078)	.73
Specified Causes of Loss		Rate Per Each \$100 Annual Cost of Hire
Full Coverage	(Coverage Code 020)	.27

- d. Add the total cost of hire premium for all states.
- e. Unless there is substantial change in exposures during the policy period, the advance premium is the earned premium.

SERFF Tracking #:

CNNA-128376139

State Tracking #:

05212012

Company Tracking #:

CQD-CA-12-5503-MD

State:

Maryland

First Filing Company:

The Cincinnati Casualty Company, ...

TOI/Sub-TOI:

20.0 Commercial Auto/20.0001 Business Auto

Product Name:

CQD-CA-12-5503-MD

Project Name/Number:

/

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	P&C Actuarial Justification		
Comments:			
Attachment(s):			
Rate development.pdf			
Net Effect Exhibit.pdf			
MD CA Liability PLR 2005 - 2010.pdf			
MD CA Phys Dmg PLR 2005 - 2010.pdf			
MD CA rate levels eff 20120501.pdf			

		Item Status:	Status Date:
Bypassed - Item:	P&C Third Party Filing Authorization		
Bypass Reason:	Not required.		
Comments:			

		Item Status:	Status Date:
Satisfied - Item:	Memorandum		
Comments:			
Attachment(s):			
FSMEMO1.pdf			

HCPD PREMIUM DEVELOPMENT

Limit

	comp	coll	relativity
25,000	34	51	1.00
30,000	40	60	1.17
35,000	48	72	1.42
40,000	54	81	1.58
45,000	62	93	1.83
50,000	68	102	2.00
55,000	74	111	2.17
60,000	79	119	2.33

Maryland Commercial Auto - Hired & Nonowned Coverage Revision

	Cincinnati Insurance Company			Cincinnati Indemnity Company			Cincinnati Casualty Company		
	Premium In Force	Proposed Premium	Change	Premium In Force	Proposed Premium	Change	Premium In Force	Proposed Premium	Change
Revised coverage premium	83,132	127,260	53.08%	-	-	0.00%	21	31	44.88%
All other program premium	5,800,670	5,800,670	0.00%	-	-	0.00%	1,280	1,280	0.00%
Total	5,883,802	5,927,931	0.75%	-	-	0.00%	1,301	1,311	0.74%

A. Direct Earned Premium	23,414,156	(4)
B. Average Direct Unearned Premium Reserve	12,027,873	[(1)+(2)]/2
C. Commissions Expenses	19.46%	(5) / (3)
D. Taxes, Licenses, & Fees	2.00%	(6) / (3)
E. 50% of Other Acquisition Expenses	1.76%	[(0.5) X (7)] / (3)
F. 50% of General Expenses	1.99%	[(0.5) X (8)] / (4)
G. Total Expenses	25.21%	(C) + (D) + (E) + (F)
H. Total Prepaid Expenses	3,032,522	(B) X (G)
I. Subject to Investment	8,995,350	(B) - (H)
J. Delayed Remission of Premium	2,414,141	[(23) X (3)] / (29)
Expected Loss & LAE Ratio	68.51%	Permissible Loss Ratio
K. Direct Earned Premium	23,414,156	(A)
L. Expected Loss Ratio	68.51%	Permissible Loss Ratio
M. Expected Incurred Loss & LAE	16,040,904	(K) X (L)
N. Reserve to Incurred Ratio	1.7207	$\Sigma(9 \text{ to } 13) / \Sigma(14 \text{ to } 21)$
O. Estimated Loss & LAE Reserve	27,601,603	(M) X (N)
P. Net Subject to Investment	34,182,813	(I) - (J) + (O)
Q. Policy Surplus	N/A	
R. Total	34,182,813	(P) + (Q)
S. Average Rate of Return on Invested Assets	3.89%	(26) / (22)
T. Invested Earnings Subject to Investment	1,330,533	(R) X (S)
U. Ratio of Investment Earnings to Direct Earned Premiums	5.68%	(T) / (A)
V. Investment Income Factor	1.0568	1.000 + (U)
W. Return on Equity (with Policy Surplus & Realized Capital Gains)	15.00%	(30)
X. Return on Policy Surplus	5.65%	[(24) X (S)] / (29)
Y. Return on Realized Capital Gains	3.66%	{[(27)+(28)]/2}/(29)
Z. Return on Equity	5.68%	(W) - (X) - (Y)
AA. Premium to Surplus	0.6919	(29)/{[(24)+(25)]/2}
BB. Return on Premium	0.0821	(Z) / (AA)
CC. Before Tax Return on Premium	0.0568	(U)
DD. Before Tax Return needed from Underwriting Profit	0.0253	(BB) - (CC)
EE. Commissions Expenses	19.46%	
FF. Other Acquisition Expenses	3.52%	
GG. General Expenses	3.97%	
HH. Taxes, Licenses, & Fees	2.00%	
II. Profit & Contingencies	2.53%	
JJ. Total Expenses	31.49%	
KK. Permissible Loss Ratio	68.51%	

Line: Commercial Auto Liability
 Company: Cincinnati Insurance Group
 Based on Year-End 2005-2007 Statistics

	CIC 2007	CCC 2007	CID 2007	CIC 2006	CCC 2006	CID 2006	CIC 2005	CCC 2005	CID 2005	Countrywide
	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide
1. Direct Unearned Premium Reserve (Page 14, Column 5, Current)	144,985,026	0	0	150,239,964	3	181	151,609,818	122	107	446,835,221
2. Direct Unearned Premium Reserve (Page 14, Column 5, Prior)	150,239,964	3	181	151,609,818	122	107	155,020,185	0	0	456,870,380
3. Direct Written Premium (IEE, Page 6, Column 1)	315,591,370	(21)	0	324,701,125	(606)	544	323,495,570	1,277	338	963,789,597
4. Direct Earned Premium (IEE, Page 6, Column 2)	320,846,308	(18)	0	326,070,985	(487)	471	326,905,938	1,155	470	973,824,822
5. Direct Commission (IEE, Page 7, Column 12)	60,663,419	2	89	53,597,675	(255)	75	63,454,466	0	86	177,715,557
6. Direct Taxes, License, & Fee (IEE, Page 7, Column 13)	7,323,204	0	0	8,038,885	0	13	6,789,358	0	(7)	22,151,453
7. Direct Other Acquisition (IEE, Page 7, Column 14)	13,822,845	0	13	12,622,326	0	17	11,759,292	0	1,040	38,205,532
8. Direct General (IEE, Page 7, Column 15)	13,794,360	0	15	15,081,558	0	20	12,700,835	0	113	41,576,900
9. Schedule P, Part 1, Total, Column 13	270,745	0	0	270,108	0	0	264,330	0	0	805,183
10. Schedule P, Part 1, Total, Column 15	48,024	0	0	49,990	0	0	52,368	0	0	150,382
11. Schedule P, Part 1, Total, Column 17	182	0	0	204	0	0	184	0	0	570
12. Schedule P, Part 1, Total, Column 19	43,568	0	0	42,343	0	0	41,605	0	0	127,516
13. Schedule P, Part 1, Total, Column 23	3,300	0	0	3,400	0	0	2,764	0	0	9,464
14. Schedule P, Part 1, Last Year, Column 4	52,599	0	0	51,603	0	0	51,846	0	0	156,048
15. Schedule P, Part 1, Last Year, Column 6	814	0	0	763	0	0	840	0	0	2,417
16. Schedule P, Part 1, Last Year, Column 10	838	0	0	739	0	0	882	0	0	2,459
17. Schedule P, Part 1, Last Year, Column 13	105,408	0	0	101,541	0	0	101,671	0	0	308,620
18. Schedule P, Part 1, Last Year, Column 15	38,442	0	0	39,563	0	0	38,292	0	0	116,297
19. Schedule P, Part 1, Last Year, Column 17	45	0	0	55	0	0	51	0	0	151
20. Schedule P, Part 1, Last Year, Column 19	16,120	0	0	14,821	0	0	14,147	0	0	45,088
21. Schedule P, Part 1, Last Year, Column 23	1,354	0	0	1,584	0	0	1,255	0	0	4,193
22. Cash & Invested Assets (AS, Page 2, Line 9)	9,292,179,878	311,055,210	70,113,950	9,671,983,332	329,622,861	67,067,619	8,701,469,796	304,341,650	70,647,185	28,818,481,481
23. Premium & Agents Balance (AS, Page 2, Line 10)	296,314,299	0	0	331,529,504	46,060	0	349,962,641	(44,911)	0	977,807,593
24. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Current)	4,307,150,009	278,481,824	65,857,586	4,723,368,807	281,463,027	61,925,302	4,219,838,692	262,897,192	62,721,754	14,263,704,193
25. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Prior)	4,723,368,807	281,463,027	61,925,302	4,219,838,692	262,897,192	62,721,754	4,191,158,948	259,323,276	60,170,312	14,122,867,310
26. Net Investment Income Earned (AS, Page 4, Line 8, Col. 1, Current)	374,593,841	13,345,131	2,584,404	377,786,144	12,898,633	2,619,977	323,078,153	11,900,904	2,924,656	1,121,731,843
27. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Current)	153,969,725	3,945,542	14,149	142,669,695	3,831,770	24,678	35,196,362	2,226,615	(183,955)	341,694,581
28. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Prior)	142,669,695	3,831,770	24,678	35,196,362	2,226,615	(183,955)	195,081,967	(739,056)	(16,391)	378,091,685
29. Total Premium Written (AS, Page 9, Part 2B, Line 32, Column 1)	2,998,349,123	188,385,016	85,259,482	3,034,850,569	189,403,017	90,132,986	2,970,441,955	177,721,011	85,472,299	9,820,015,458

30. Return on Equity (Surplus)

15.0%

	CIC 2007	CCC 2007	CID 2007	CIC 2006	CCC 2006	CID 2006	CIC 2005	CCC 2005	CID 2005	State
	State	State	State	State	State	State	State	State	State	State
1. Direct Unearned Premium Reserve Current (Page 14, Column 5)	4,306,724	0	0	4,212,543	0	0	3,924,004	0	0	12,443,271
2. Direct Unearned Premium Reserve Prior (Page 14, Column 5)	4,212,543	0	0	3,924,004	0	0	3,475,927	0	0	11,612,474
3. Direct Written Premium (IEE, Page 6, Column 1)	8,435,944	0	0	8,364,829	0	0	7,444,180	0	0	24,244,953
4. Direct Earned Premium (IEE, Page 6, Column 2)	8,341,764	0	0	8,076,290	0	0	6,996,102	0	0	23,414,156
5. Direct Commission (IEE, Page 7, Column 12)	1,641,827	0	0	1,612,368	0	0	1,463,767	0	0	4,717,962
6. Direct Taxes, License, Fee (IEE, Page 7, Column 13)	169,708	0	0	196,302	0	0	119,776	0	0	485,786
7. Direct Other Acquisition (IEE, Page 7, Column 14)	357,975	0	0	287,083	0	0	209,541	0	0	854,598
8. Direct General (IEE, Page 7, Column 15)	355,765	0	0	336,544	0	0	238,083	0	0	930,392

A. Direct Earned Premium	25,514,228	(4)
B. Average Direct Unearned Premium Reserve	12,518,889	[(1)+(2)]/2
C. Commissions Expenses	19.63%	(5) / (3)
D. Taxes, Licenses, & Fees	2.01%	(6) / (3)
E. 50% of Other Acquisition Expenses	2.57%	[(0.5) X (7)] / (3)
F. 50% of General Expenses	2.84%	[(0.5) X (8)] / (4)
G. Total Expenses	27.05%	(C) + (D) + (E) + (F)
H. Total Prepaid Expenses	3,386,082	(B) X (G)
I. Subject to Investment	9,132,807	(B) - (H)
J. Delayed Remission of Premium	2,078,026	[(23) X (3)] / (29)
Expected Loss & LAE Ratio	63.64%	Permissible Loss Ratio
K. Direct Earned Premium	25,514,228	(A)
L. Expected Loss Ratio	63.64%	Permissible Loss Ratio
M. Expected Incurred Loss & LAE	16,237,730	(K) X (L)
N. Reserve to Incurred Ratio	1.8296	$\Sigma(9 \text{ to } 13) / \Sigma(14 \text{ to } 21)$
O. Estimated Loss & LAE Reserve	29,708,961	(M) X (N)
P. Net Subject to Investment	36,763,742	(I) - (J) + (O)
Q. Policy Surplus	N/A	
R. Total	36,763,742	(P) + (Q)
S. Average Rate of Return on Invested Assets	5.69%	[(26) + [(27) + (28)]/2] / (22)
T. Invested Earnings Subject to Investment	2,093,507	(R) X (S)
U. Ratio of Investment Earnings to Direct Earned Premiums	8.21%	(T) / (A)
V. Investment Income Factor	1.0821	1.000 + (U)
W. Total Required Return on Equity (with Policy Surplus & Realized Capital Gains)	15.00%	(30)
X. Return on Surplus from Investment Income Earned	4.30%	(26) / (22)
Y. Return on Surplus from Realized Capital Gains	1.40%	{[(27)+(28)]/2}/(22)
Z. Required Remaining Return on Surplus	9.31%	(W) - (X) - (Y)
AA. Premium to Surplus	0.7686	(29)/{[(24)+(25)]/2}
BB. Required Return on Premium	0.1211	(Z) / (AA)
CC. Before Tax Return on Premium (from operations)	0.0821	(U)
DD. Before Tax Return needed from Underwriting Profit	0.0390	(BB) - (CC)
EE. Commissions Expenses	19.63%	
FF. Other Acquisition Expenses	5.14%	
GG. General Expenses	5.67%	
HH. Taxes, Licenses, & Fees	2.01%	
II. Profit & Contingencies	3.90%	
JJ. Total Expenses	36.36%	
KK. Permissible Loss Ratio	63.64%	

Line: Commercial Auto Liability
 Company: Cincinnati Insurance Group
 Based on Year-End 2008-2010 Statistics

	CIC 2010	CCC 2010	CID 2010	CIC 2009	CCC 2009	CID 2009	CIC 2008	CCC 2008	CID 2008	
	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide
1. Direct Unearned Premium Reserve (Page 14, Column 5, Current)	135,627,950	668,241	631,910	135,338,602	309,391	90,494	139,691,353	0	147	412,358,088
2. Direct Unearned Premium Reserve (Page 14, Column 5, Prior)	135,338,602	309,391	90,494	139,691,353	0	147	144,985,026	0	0	420,415,012
3. Direct Written Premium (IEE, Page 6, Column 1)	286,379,121	1,305,578	1,335,136	290,796,848	636,943	214,387	302,987,514	0	116	883,655,643
4. Direct Earned Premium (IEE, Page 6, Column 2)	286,089,772	946,728	793,720	295,149,599	327,552	124,040	308,281,187	0	250	891,712,849
5. Direct Commission (IEE, Page 7, Column 12)	46,019,318	164,645	163,323	47,384,517	81,312	26,267	49,321,384	0	32	143,160,797
6. Direct Taxes, License, & Fee (IEE, Page 7, Column 13)	5,991,661	21,011	62,190	6,208,322	18,055	2,480	6,681,875	0	5	18,985,599
7. Direct Other Acquisition (IEE, Page 7, Column 14)	16,443,889	45,613	47,522	14,746,476	12,356	6,700	15,478,921	0	13	46,781,489
8. Direct General (IEE, Page 7, Column 15)	19,230,323	51,728	60,051	17,651,416	13,245	20,292	15,598,706	0	24	52,625,785
9. Schedule P, Part 1, Total, Column 13	253,402	176	181	261,067	82	0	270,752	0	0	785,660
10. Schedule P, Part 1, Total, Column 15	40,124	0	0	45,367	0	0	47,162	0	0	132,653
11. Schedule P, Part 1, Total, Column 17	71	0	0	125	0	0	150	0	0	346
12. Schedule P, Part 1, Total, Column 19	39,951	0	0	43,784	0	0	44,389	0	0	128,124
13. Schedule P, Part 1, Total, Column 23	3,200	0	0	3,400	0	0	3,500	0	0	10,100
14. Schedule P, Part 1, Last Year, Column 4	47,731	349	99	43,534	68	0	50,274	0	0	142,055
15. Schedule P, Part 1, Last Year, Column 6	750	1	13	698	0	0	914	0	0	2,376
16. Schedule P, Part 1, Last Year, Column 10	662	0	0	687	0	0	786	0	0	2,135
17. Schedule P, Part 1, Last Year, Column 13	79,235	156	164	90,783	82	0	107,632	0	0	278,052
18. Schedule P, Part 1, Last Year, Column 15	36,187	0	0	34,346	0	0	32,524	0	0	103,057
19. Schedule P, Part 1, Last Year, Column 17	10	0	0	23	0	0	34	0	0	67
20. Schedule P, Part 1, Last Year, Column 19	14,252	0	0	15,306	0	0	15,618	0	0	45,176
21. Schedule P, Part 1, Last Year, Column 23	1,518	0	0	1,599	0	0	1,615	0	0	4,732
22. Cash & Invested Assets (AS, Page 2, Line 9)	8,036,443,920	274,539,390	70,056,627	7,864,656,569	257,853,928	67,495,102	7,208,409,931	278,548,550	69,218,076	24,127,222,093
23. Premium & Agents Balance (AS, Page 2, Line 10)	247,230,964	0	0	241,722,481	0	0	264,524,740	0	0	753,478,185
24. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Current)	3,777,232,534	268,542,982	70,109,253	3,647,791,505	253,907,295	66,956,782	3,360,297,707	262,683,341	65,533,692	11,773,055,091
25. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Prior)	3,647,791,505	253,907,295	66,956,782	3,360,297,707	262,683,341	65,533,692	4,307,150,009	278,481,824	65,857,586	12,308,659,741
26. Net Investment Income Earned (AS, Page 4, Line 8, Col. 1, Current)	330,018,756	11,459,605	2,929,826	337,483,785	11,443,053	2,695,205	326,104,878	12,121,984	2,589,555	1,036,846,647
27. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Current)	88,009,839	90,227	30,263	120,024,325	19,516,141	5,613,083	60,515,480	8,110,190	266,041	302,175,589
28. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Prior)	120,024,325	19,516,141	5,613,083	60,515,480	8,110,190	266,041	153,969,725	3,945,542	14,149	371,974,676
29. Total Premium Written (AS, Page 9, Part 2B, Line 32, Column 1)	2,827,456,810	159,139,196	72,369,550	2,803,622,332	158,081,543	68,012,275	2,904,103,474	184,635,180	77,334,379	9,254,754,739

30. Return on Equity (Surplus)

15.0%

	CIC 2010	CCC 2010	CID 2010	CIC 2009	CCC 2009	CID 2009	CIC 2008	CCC 2008	CID 2008	
	State	State	State	State	State	State	State	State	State	State
MARYLAND										
1. Direct Unearned Premium Reserve Current (Page 14, Column 5)	4,316,293	0	0	4,229,395	0	0	3,977,985	0	0	12,523,674
2. Direct Unearned Premium Reserve Prior (Page 14, Column 5)	4,229,395	0	0	3,977,985	0	0	4,306,724	0	0	12,514,105
3. Direct Written Premium (IEE, Page 6, Column 1)	8,620,649	0	0	8,756,114	0	0	8,147,034	0	0	25,523,797
4. Direct Earned Premium (IEE, Page 6, Column 2)	8,533,751	0	0	8,504,704	0	0	8,475,773	0	0	25,514,228
5. Direct Commission (IEE, Page 7, Column 12)	1,674,872	0	0	1,696,816	0	0	1,638,561	0	0	5,010,248
6. Direct Taxes, License, Fee (IEE, Page 7, Column 13)	167,691	0	0	145,087	0	0	200,086	0	0	512,864
7. Direct Other Acquisition (IEE, Page 7, Column 14)	481,535	0	0	430,375	0	0	400,672	0	0	1,312,582
8. Direct General (IEE, Page 7, Column 15)	563,439	0	0	484,501	0	0	399,952	0	0	1,447,892

A. Direct Earned Premium	6,694,470	(4)
B. Average Direct Unearned Premium Reserve	3,308,349	[(1)+(2)]/2
C. Commissions Expenses	19.99%	(5) / (3)
D. Taxes, Licenses, & Fees	2.06%	(6) / (3)
E. 50% of Other Acquisition Expenses	1.66%	[(0.5) X (7)] / (3)
F. 50% of General Expenses	1.94%	[(0.5) X (8)] / (4)
G. Total Expenses	25.65%	(C) + (D) + (E) + (F)
H. Total Prepaid Expenses	848,571	(B) X (G)
I. Subject to Investment	2,459,778	(B) - (H)
J. Delayed Remission of Premium	674,508	[(23) X (3)] / (29)
Expected Loss & LAE Ratio	63.85%	Permissible Loss Ratio
K. Direct Earned Premium	6,694,470	(A)
L. Expected Loss Ratio	63.85%	Permissible Loss Ratio
M. Expected Incurred Loss & LAE	4,274,088	(K) X (L)
N. Reserve to Incurred Ratio	0.1095	$\Sigma(9 \text{ to } 13) / \Sigma(14 \text{ to } 21)$
O. Estimated Loss & LAE Reserve	467,806	(M) X (N)
P. Net Subject to Investment	2,253,076	(I) - (J) + (O)
Q. Policy Surplus	N/A	
R. Total	2,253,076	(P) + (Q)
S. Average Rate of Return on Invested Assets	3.89%	(26) / (22)
T. Invested Earnings Subject to Investment	87,699	(R) X (S)
U. Ratio of Investment Earnings to Direct Earned Premiums	1.31%	(T) / (A)
V. Investment Income Factor	1.0131	1.000 + (U)
W. Return on Equity (with Policy Surplus & Realized Capital Gains)	15.00%	(30)
X. Return on Policy Surplus	5.65%	[(24) X (S)] / (29)
Y. Return on Realized Capital Gains	3.66%	{[(27)+(28)]/2}/(29)
Z. Return on Equity	5.68%	(W) - (X) - (Y)
AA. Premium to Surplus	0.6919	(29)/{[(24)+(25)]/2}
BB. Return on Premium	0.0821	(Z) / (AA)
CC. Before Tax Return on Premium	0.0131	(U)
DD. Before Tax Return needed from Underwriting Profit	0.0690	(BB) - (CC)
EE. Commissions Expenses	19.99%	
FF. Other Acquisition Expenses	3.32%	
GG. General Expenses	3.89%	
HH. Taxes, Licenses, & Fees	2.06%	
II. Profit & Contingencies	6.90%	
JJ. Total Expenses	36.15%	
KK. Permissible Loss Ratio	63.85%	

Line: Commercial Auto Physical Damage
 Company: Cincinnati Insurance Group
 Based on Year-End 2005-2007 Statistics

	CIC 2007	CCC 2007	CID 2007	CIC 2006	CCC 2006	CID 2006	CIC 2005	CCC 2005	CID 2005	Countrywide
	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide
1. Direct Unearned Premium Reserve (Page 14, Column 5, Current)	49,141,920	0	0	55,737,167	0	0	57,751,395	0	0	162,630,482
2. Direct Unearned Premium Reserve (Page 14, Column 5, Prior)	55,737,167	0	0	57,751,395	0	0	62,922,676	0	0	176,411,238
3. Direct Written Premium (IEE, Page 6, Column 1)	109,056,184	0	0	123,489,251	0	0	124,524,491	0	0	357,069,926
4. Direct Earned Premium (IEE, Page 6, Column 2)	115,651,430	0	0	125,503,473	0	0	129,695,772	0	0	370,850,675
5. Direct Commission (IEE, Page 7, Column 12)	18,702,804	0	0	20,777,843	0	0	25,213,520	0	0	64,694,168
6. Direct Taxes, License, & Fee (IEE, Page 7, Column 13)	2,457,013	0	0	2,985,029	0	0	2,650,674	0	0	8,092,716
7. Direct Other Acquisition (IEE, Page 7, Column 14)	4,714,577	0	0	4,629,886	0	0	4,435,478	0	0	13,779,941
8. Direct General (IEE, Page 7, Column 15)	4,410,722	0	0	5,789,314	0	0	5,214,835	0	0	15,414,872
9. Schedule P, Part 1, Total, Column 13	2,131	(200)	1	3,518	(200)	1	589	(707)	(9)	5,124
10. Schedule P, Part 1, Total, Column 15	372	20	0	6,584	20	0	5,012	105	1	12,114
11. Schedule P, Part 1, Total, Column 17	0	0	0	0	0	0	0	0	0	0
12. Schedule P, Part 1, Total, Column 19	2,611	79	0	3,033	79	0	2,613	100	0	8,515
13. Schedule P, Part 1, Total, Column 23	16,000	0	0	17,200	0	0	18,577	0	0	51,777
14. Schedule P, Part 1, Last Year, Column 4	283,868	2,026	5	142,918	2,026	5	147,786	2,913	13	581,560
15. Schedule P, Part 1, Last Year, Column 6	1,949	0	0	586	0	0	506	7	0	3,048
16. Schedule P, Part 1, Last Year, Column 10	33,629	0	0	10,847	0	0	9,862	0	0	54,338
17. Schedule P, Part 1, Last Year, Column 13	7,098	(46)	0	8,211	(46)	0	7,989	(316)	0	22,890
18. Schedule P, Part 1, Last Year, Column 15	246	20	0	6,548	20	0	5,016	105	1	11,956
19. Schedule P, Part 1, Last Year, Column 17	0	0	0	0	0	0	0	0	0	0
20. Schedule P, Part 1, Last Year, Column 19	1,059	9	0	1,183	9	0	1,004	21	0	3,285
21. Schedule P, Part 1, Last Year, Column 23	9,651	0	0	10,003	0	0	11,618	0	0	31,272
22. Cash & Invested Assets (AS, Page 2, Line 9)	9,292,179,878	311,055,210	70,113,950	9,671,983,332	329,622,861	67,067,619	8,701,469,796	304,341,650	70,647,185	28,818,481,481
23. Premium & Agents Balance (AS, Page 2, Line 10)	296,314,299	0	0	331,529,504	46,060	0	349,962,641	(44,911)	0	977,807,593
24. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Current)	4,307,150,009	278,481,824	65,857,586	4,723,368,807	281,463,027	61,925,302	4,219,838,692	262,897,192	62,721,754	14,263,704,193
25. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Prior)	4,723,368,807	281,463,027	61,925,302	4,219,838,692	262,897,192	62,721,754	4,191,158,948	259,323,276	60,170,312	14,122,867,310
26. Net Investment Income Earned (AS, Page 4, Line 8, Col. 1, Current)	374,593,841	13,345,131	2,584,404	377,786,144	12,898,633	2,619,977	323,078,153	11,900,904	2,924,656	1,121,731,843
27. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Current)	153,969,725	3,945,542	14,149	142,669,695	3,831,770	24,678	35,196,362	2,226,615	(183,955)	341,694,581
28. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Prior)	142,669,695	3,831,770	24,678	35,196,362	2,226,615	(183,955)	195,081,967	(739,056)	(16,391)	378,091,685
29. Total Premium Written (AS, Page 9, Part 2B, Line 32, Column 1)	2,998,349,123	188,385,016	85,259,482	3,034,850,569	189,403,017	90,132,986	2,970,441,955	177,721,011	85,472,299	9,820,015,458
30. Return on Equity (Surplus)										15.0%

	CIC 2007	CCC 2007	CID 2007	CIC 2006	CCC 2006	CID 2006	CIC 2005	CCC 2005	CID 2005	State
Maryland	State	State	State	State	State	State	State	State	State	State
1. Direct Unearned Premium Reserve Current (Page 14, Column 5)	1,042,004	0	0	1,211,545	0	0	1,094,572	0	0	3,348,121
2. Direct Unearned Premium Reserve Prior (Page 14, Column 5)	1,211,545	0	0	1,094,572	0	0	962,461	0	0	3,268,577
3. Direct Written Premium (IEE, Page 6, Column 1)	2,173,152	0	0	2,484,979	0	0	2,115,882	0	0	6,774,013
4. Direct Earned Premium (IEE, Page 6, Column 2)	2,342,693	0	0	2,368,006	0	0	1,983,771	0	0	6,694,470
5. Direct Commission (IEE, Page 7, Column 12)	449,088	0	0	477,442	0	0	427,504	0	0	1,354,034
6. Direct Taxes, License, Fee (IEE, Page 7, Column 13)	43,990	0	0	59,993	0	0	35,335	0	0	139,318
7. Direct Other Acquisition (IEE, Page 7, Column 14)	84,018	0	0	82,672	0	0	58,097	0	0	224,786
8. Direct General (IEE, Page 7, Column 15)	89,945	0	0	101,478	0	0	68,980	0	0	260,403

A. Direct Earned Premium	6,334,919	(4)
B. Average Direct Unearned Premium Reserve	3,132,216	[(1)+(2)]/2
C. Commissions Expenses	19.35%	(5) / (3)
D. Taxes, Licenses, & Fees	2.00%	(6) / (3)
E. 50% of Other Acquisition Expenses	2.26%	[(0.5) X (7)] / (3)
F. 50% of General Expenses	2.49%	[(0.5) X (8)] / (4)
G. Total Expenses	26.11%	(C) + (D) + (E) + (F)
H. Total Prepaid Expenses	817,837	(B) X (G)
I. Subject to Investment	2,314,379	(B) - (H)
J. Delayed Remission of Premium	522,666	[(23) X (3)] / (29)
Expected Loss & LAE Ratio	59.06%	Permissible Loss Ratio
K. Direct Earned Premium	6,334,919	(A)
L. Expected Loss Ratio	59.06%	Permissible Loss Ratio
M. Expected Incurred Loss & LAE	3,741,710	(K) X (L)
N. Reserve to Incurred Ratio	0.1276	$\Sigma(9 \text{ to } 13) / \Sigma(14 \text{ to } 21)$
O. Estimated Loss & LAE Reserve	477,476	(M) X (N)
P. Net Subject to Investment	2,269,189	(I) - (J) + (O)
Q. Policy Surplus	N/A	
R. Total	2,269,189	(P) + (Q)
S. Average Rate of Return on Invested Assets	5.69%	[(26) + [(27) + (28)]/2] / (22)
T. Invested Earnings Subject to Investment	129,219	(R) X (S)
U. Ratio of Investment Earnings to Direct Earned Premiums	2.04%	(T) / (A)
V. Investment Income Factor	1.0204	1.000 + (U)
W. Total Required Return on Equity (with Policy Surplus & Realized Capital Gains)	15.00%	(30)
X. Return on Surplus from Investment Income Earned	4.30%	(26) / (22)
Y. Return on Surplus from Realized Capital Gains	1.40%	{[(27)+(28)]/2}/(22)
Z. Required Remaining Return on Surplus	9.31%	(W) - (X) - (Y)
AA. Premium to Surplus	0.7686	(29)/{[(24)+(25)]/2}
BB. Required Return on Premium	0.1211	(Z) / (AA)
CC. Before Tax Return on Premium (from operations)	0.0204	(U)
DD. Before Tax Return needed from Underwriting Profit	0.1007	(BB) - (CC)
EE. Commissions Expenses	19.35%	
FF. Other Acquisition Expenses	4.53%	
GG. General Expenses	4.99%	
HH. Taxes, Licenses, & Fees	2.00%	
II. Profit & Contingencies	10.07%	
JJ. Total Expenses	40.94%	
KK. Permissible Loss Ratio	59.06%	

	CIC 2010	CCC 2010	CID 2010	CIC 2009	CCC 2009	CID 2009	CIC 2008	CCC 2008	CID 2008	
	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide	Countrywide
1. Direct Unearned Premium Reserve (Page 14, Column 5, Current)	44,813,208	190,442	205,934	44,932,067	80,538	20,336	46,453,094	0	0	136,695,619
2. Direct Unearned Premium Reserve (Page 14, Column 5, Prior)	44,932,067	80,538	20,336	46,453,094	0	0	0	136,695,619	0	228,181,653
3. Direct Written Premium (IEE, Page 6, Column 1)	95,750,655	376,601	400,815	97,082,090	171,716	46,952	101,563,329	0	0	295,392,158
4. Direct Earned Premium (IEE, Page 6, Column 2)	95,869,513	266,696	215,217	98,603,117	91,178	26,616	104,252,156	0	0	299,324,494
5. Direct Commission (IEE, Page 7, Column 12)	15,573,179	46,861	46,843	15,943,233	0	6,018	16,738,742	0	0	48,354,876
6. Direct Taxes, License, & Fee (IEE, Page 7, Column 13)	1,937,017	6,593	40,685	1,968,604	0	714	2,175,808	0	0	6,129,421
7. Direct Other Acquisition (IEE, Page 7, Column 14)	4,544,816	12,929	12,803	4,526,076	0	1,643	4,770,786	0	0	13,869,053
8. Direct General (IEE, Page 7, Column 15)	4,957,785	14,606	31,458	5,324,220	0	6,297	5,109,762	0	0	15,444,128
9. Schedule P, Part 1, Total, Column 13	3,420	25	38	1,693	(19)	0	3,745	(78)	1	8,825
10. Schedule P, Part 1, Total, Column 15	1,524	0	0	2,338	0	0	1,122	0	0	4,984
11. Schedule P, Part 1, Total, Column 17	0	0	0	0	0	0	0	0	0	0
12. Schedule P, Part 1, Total, Column 19	2,292	8	0	2,395	19	0	2,463	27	0	7,204
13. Schedule P, Part 1, Total, Column 23	15,600	0	0	14,700	0	0	15,300	0	0	45,600
14. Schedule P, Part 1, Last Year, Column 4	147,683	291	157	135,023	61	1	142,133	0	0	425,349
15. Schedule P, Part 1, Last Year, Column 6	1,096	9	1	942	0	0	813	0	0	2,861
16. Schedule P, Part 1, Last Year, Column 10	12,579	0	0	10,250	0	0	11,489	0	0	34,318
17. Schedule P, Part 1, Last Year, Column 13	7,277	38	38	5,480	24	0	8,298	0	0	21,155
18. Schedule P, Part 1, Last Year, Column 15	1,467	0	0	2,244	0	0	1,356	0	0	5,067
19. Schedule P, Part 1, Last Year, Column 17	0	0	0	0	0	0	0	0	0	0
20. Schedule P, Part 1, Last Year, Column 19	1,060	0	0	1,063	0	0	970	0	0	3,093
21. Schedule P, Part 1, Last Year, Column 23	10,869	0	0	9,781	0	0	9,515	0	0	30,165
22. Cash & Invested Assets (AS, Page 2, Line 9)	8,036,443,920	274,539,390	70,056,627	7,864,656,569	257,853,928	67,495,102	7,208,409,931	278,548,550	69,218,076	24,127,222,093
23. Premium & Agents Balance (AS, Page 2, Line 10)	247,230,964	0	0	241,722,481	0	0	264,524,740	0	0	753,478,185
24. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Current)	3,777,232,534	268,542,982	70,109,253	3,647,791,505	253,907,295	66,956,782	3,360,297,707	262,683,341	65,533,692	11,773,055,091
25. Surplus as Regards to Policyholders (Page 3, Line 25, Col. 1, Prior)	3,647,791,505	253,907,295	66,956,782	3,360,297,707	262,683,341	65,533,692	4,307,150,009	278,481,824	65,857,586	12,308,659,741
26. Net Investment Income Earned (AS, Page 4, Line 8, Col. 1, Current)	330,018,756	11,459,605	2,929,826	337,483,785	11,443,053	2,695,205	326,104,878	12,121,984	2,589,555	1,036,846,647
27. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Current)	88,009,839	90,227	30,263	120,024,325	19,516,141	5,613,083	60,515,480	8,110,190	266,041	302,175,589
28. Net Realized Capital Gain (AS, Page 4, Line 9, Column 1, Prior)	120,024,325	19,516,141	5,613,083	60,515,480	8,110,190	266,041	153,969,725	3,945,542	14,149	371,974,676
29. Total Premium Written (AS, Page 9, Part 2B, Line 32, Column 1)	2,827,456,810	159,139,196	72,369,550	2,803,622,332	158,081,543	68,012,275	2,904,103,474	184,635,180	77,334,379	9,254,754,739

30. Return on Equity (Surplus)

15.0%

	CIC 2010	CCC 2010	CID 2010	CIC 2009	CCC 2009	CID 2009	CIC 2008	CCC 2008	CID 2008	
MARYLAND	State	State	State	State	State	State	State	State	State	State
1. Direct Unearned Premium Reserve Current (Page 14, Column 5)	1,126,839	0	0	1,050,834	0	0	946,524	0	0	3,124,196
2. Direct Unearned Premium Reserve Prior (Page 14, Column 5)	1,050,834	0	0	946,524	80,538	20,336	1,042,004	0	0	3,140,235
3. Direct Written Premium (IEE, Page 6, Column 1)	2,264,535	0	0	2,159,345	0	0	1,995,874	0	0	6,419,754
4. Direct Earned Premium (IEE, Page 6, Column 2)	2,188,530	0	0	2,055,035	0	0	2,091,355	0	0	6,334,919
5. Direct Commission (IEE, Page 7, Column 12)	431,452	0	0	408,315	0	0	402,337	0	0	1,242,104
6. Direct Taxes, License, Fee (IEE, Page 7, Column 13)	44,294	0	0	35,196	0	0	49,212	0	0	128,702
7. Direct Other Acquisition (IEE, Page 7, Column 14)	104,591	0	0	95,585	0	0	90,478	0	0	290,654
8. Direct General (IEE, Page 7, Column 15)	115,182	0	0	104,330	0	0	96,449	0	0	315,962

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Total: CIG, MD, COM'L AUTO-LIABILITY

Exhibit A

AY DEVELOPMENT	ALL YEARS	2010	2009	2008	2007	2006
1. Earned Premium	41,807,870	8,504,998	8,507,570	8,432,507	8,369,347	7,993,448
1b. Premium Growth	1.4%	0.0%	0.9%	0.8%	4.7%	
2. Current Level Factors		0.986	0.921	0.898	0.915	0.928
3. EP @ Current Level	38,871,759	8,384,415	7,835,026	7,575,676	7,656,971	7,419,671
3b. Premium Growth @ CL	2.7%	7.0%	3.4%	-1.1%	3.2%	
4. Premium Trend Factor		1.000	1.000	1.000	1.000	1.000
5. Trended EP @ CL	38,871,759	8,384,415	7,835,026	7,575,676	7,656,971	7,419,671
6. Actual Inc Loss & ALAE	22,834,767	3,955,175	5,313,353	4,734,333	4,679,729	4,152,177
7. Inc L&ALAE Dev Factor	1.149	1.521	1.069	1.070	1.148	0.990
8. Ultimate Inc Loss & ALAE	26,241,498	6,014,498	5,679,770	5,067,357	5,370,406	4,109,468
9. ULAE Factor		10.2%	10.2%	10.2%	10.2%	10.2%
10. Excess Wind+Water Factor		0.0%	0.0%	0.0%	0.0%	0.0%
11. Ultimate Inc Loss & LAE	28,916,808	6,627,673	6,258,820	5,583,972	5,917,916	4,528,426
12. Loss Trend Factor		1.042	1.057	1.072	1.088	1.104
13. Trended Ult Loss & LAE	30,943,559	6,904,497	6,615,098	5,987,698	6,438,110	4,998,155
14. Proj Loss & LAE Ratio		82.3%	84.4%	79.0%	84.1%	67.4%
15. Accident Year Weights	100%	21.6%	20.2%	19.5%	19.7%	19.1%
16. Ultimate Claim Count	4,708	1,263	1,051	1,067	680	647

PROJECTED LOSSES AND OTHER COSTS

17. Projected Loss Ratio	79.6%
18a. Expected Non-Normal Losses	0
18b. Other Fixed Costs (e.g. Reinsurance)	0
19. Other Costs Loss Ratio	0.0%
20. Combined Projected Loss Ratio	79.6%

PLR AND INDICATION

21. Permissible Loss Ratio	63.6%
22. Full-Credibility Indication	25.1%
23. Claim Count Credibility	100.0%
24.	
25. Net Trend	1.9%
26. Complement of Credibility	1.9%
27. Credibility-Weighted Indication	25.1%

TRENDS

	Up-to-Date	Projected
28. Annual Premium Trend	0.0%	0.0%
29. Annual Loss Trend	1.5%	1.5%
30. Effective Date		5/1/2012
31. Trend Period		2.833
32a. Organic Premium Growth	2.7%	
32b. Rate Level Growth	-1.3%	
32c. Total Premium Growth	1.4%	

Calculations:

1b = premium growth (growth of row 1, exponential trend for ALL YEARS column)
 $3 = 1 \times 2$
 3b = organic premium growth (growth of row 3, exponential trend for ALL YEARS column)
 $5 = 3 \times 4$
 $8 = 6 \times 7$
 $11 = 8 \times (1 + 9) \times (1 + 10)$
 $11 = 9 \times 10$
 $13 = 11 \times 12$
 $14 = 13 / 5$
 $15 = 5 / \text{Sum of } 5$
 $17 = \text{Sumproduct of } 14 \text{ and } 15$
 $19 = (18a + 18b) / \text{Latest AY of } 5$
 $20 = 17 + 19$
 $22 = 20 / 21 - 1$
 $23 = \text{SQRT}(\text{Sum of } 16 / 1082.41) \dots \text{ up to } 100\%$
 24 intentionally left blank
 $25 = ((1 + 29) / (1 + 28))^{(\text{diff b/w Prop Eff Date \& Date Last Rate Change} / 365.25)} - 1$
 if there is no rate history in experience period, default to Net Trend
 $27 = (23 \times 17 + (1.00 - 23) \times (21 - 19) \times (1 - 26) + 19) / 21 - 1.00$
 $32a = 3b$
 $32b = (1 + 32c) / (1 + 32a) - 1$
 $32c = 1b$

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Total: CIG, MD, COM'L AUTO-LIABILITY

Exhibit B

Paid Loss

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	613,005	1,054,391	1,145,366	1,213,366	1,338,365	1,335,966	1,335,966	1,335,966	1,335,966	1,335,966
2002	626,330	1,123,390	1,232,800	1,308,800	1,573,800	1,701,796	1,701,796	1,701,796	1,701,796	1,701,796
2003	1,013,902	2,099,712	2,851,921	5,280,965	6,167,465	6,707,080	6,707,080	6,707,080		
2004	1,137,411	1,736,103	2,304,763	2,352,052	2,424,052	2,524,052	2,524,052			
2005	1,519,387	2,220,053	3,481,591	5,147,446	5,957,447	6,800,577				
2006	1,576,987	2,463,870	2,840,235	3,050,735	3,523,735					
2007	1,549,823	2,601,983	4,029,542	4,151,142						
2008	1,820,062	2,628,521	3,104,635							
2009	1,433,244	2,479,448								
2010	2,215,828									

Paid Loss Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.720	1.086	1.059	1.103	0.998	1.000	1.000	1.000	1.000
2002	1.794	1.097	1.062	1.202	1.081	1.000	1.000	1.000	
2003	2.071	1.358	1.852	1.168	1.087	1.000	1.000		
2004	1.526	1.328	1.021	1.031	1.041	1.000			
2005	1.461	1.568	1.478	1.157	1.142				
2006	1.562	1.153	1.074	1.155					
2007	1.679	1.549	1.030						
2008	1.444	1.181							
2009	1.730								

											Weights
Average	1.665	1.290	1.225	1.136	1.070	1.000	1.000	1.000	1.000	1.000	
Truncated	1.639	1.278	1.141	1.146	1.070	1.000	1.000	1.000	1.000	1.000	20%
Inverse	1.646	1.266	1.170	1.133	1.068	1.000	1.000	1.000	1.000	1.000	
\$ Weighted	1.630	1.318	1.258	1.143	1.092	1.000	1.000	1.000	1.000	1.000	20%
5 Year \$ Wtd	1.569	1.353	1.289	1.146	1.092	1.000	1.000	1.000	1.000	1.000	
5 Year Truncated	1.567	1.352	1.194	1.160	1.070	1.000	1.000	1.000	1.000	1.000	40%
3 Year \$ Wtd	1.605	1.296	1.193	1.128	1.102	1.000	1.000	1.000	1.000	1.000	20%
											100%
Selected	1.602	1.319	1.196	1.148	1.081	1.000	1.000	1.000	1.000	1.000	
Cumulative	3.135	1.957	1.484	1.240	1.081	1.000	1.000	1.000	1.000	1.000	

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Total: CIG, MD, COM'L AUTO-LIABILITY

Exhibit C

Case Reserve

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	733,635	565,688	190,002	100,000	0	0	0	0	0	0
2002	756,410	428,760	332,947	314,176	89,771	0	0	0	0	0
2003	3,543,477	3,845,563	3,016,202	879,026	591,863	960	0	0	0	0
2004	1,009,379	811,662	148,454	408,654	278,374	59,216	53,547	0	0	0
2005	4,442,669	3,641,505	1,594,918	1,662,476	1,214,945	2,220	0	0	0	0
2006	1,950,893	1,198,439	708,997	700,668	371,866	0	0	0	0	0
2007	2,725,827	1,769,146	484,064	379,356	0	0	0	0	0	0
2008	2,943,082	1,583,994	1,538,350	0	0	0	0	0	0	0
2009	3,061,318	2,775,874	0	0	0	0	0	0	0	0
2010	1,729,557	0	0	0	0	0	0	0	0	0

Incurred Loss

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	1,346,640	1,620,079	1,335,368	1,313,366	1,338,365	1,335,966	1,335,966	1,335,966	1,335,966	1,335,966
2002	1,382,740	1,552,150	1,565,747	1,622,976	1,663,571	1,701,796	1,701,796	1,701,796	1,701,796	1,701,796
2003	4,557,379	5,945,275	5,868,123	6,159,991	6,759,328	6,708,040	6,707,080	6,707,080	6,707,080	6,707,080
2004	2,146,790	2,547,765	2,453,217	2,760,706	2,702,426	2,583,268	2,577,599	0	0	0
2005	5,962,056	5,861,558	5,076,509	6,809,922	7,172,392	6,802,797	0	0	0	0
2006	3,527,880	3,662,309	3,549,232	3,751,403	3,895,601	0	0	0	0	0
2007	4,275,650	4,371,129	4,513,606	4,530,498	0	0	0	0	0	0
2008	4,763,144	4,212,515	4,642,985	0	0	0	0	0	0	0
2009	4,494,562	5,255,322	0	0	0	0	0	0	0	0
2010	3,945,385	0	0	0	0	0	0	0	0	0

Incurred Loss Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.203	0.824	0.984	1.019	0.998	1.000	1.000	1.000	1.000
2002	1.123	1.009	1.037	1.025	1.023	1.000	1.000	1.000	1.000
2003	1.305	0.987	1.050	1.097	0.992	1.000	1.000	1.000	1.000
2004	1.187	0.963	1.125	0.979	0.956	0.998	1.000	1.000	1.000
2005	0.983	0.866	1.341	1.053	0.948	1.000	1.000	1.000	1.000
2006	1.038	0.969	1.057	1.038	1.000	1.000	1.000	1.000	1.000
2007	1.022	1.033	1.004	1.000	1.000	1.000	1.000	1.000	1.000
2008	0.884	1.102	1.000	1.000	1.000	1.000	1.000	1.000	1.000
2009	1.169	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

Weights

Average	1.102	0.969	1.085	1.035	0.984	0.999	1.000	1.000	1.000	1.000
Truncated	1.104	0.971	1.054	1.034	0.982	1.000	1.000	1.000	1.000	20%
Inverse	1.088	0.962	1.075	1.034	0.983	0.999	1.000	1.000	1.000	1.000
\$ Weighted	1.079	0.974	1.106	1.050	0.974	0.999	1.000	1.000	1.000	20%
5 Year \$ Wtd	1.015	0.980	1.119	1.052	0.974	1.000	1.000	1.000	1.000	1.000
5 Year Truncated	1.015	0.988	1.077	1.039	0.982	1.000	1.000	1.000	1.000	40%
3 Year \$ Wtd	1.023	1.038	1.149	1.034	0.968	0.999	1.000	1.000	1.000	20%
										100%
Selected	1.047	0.992	1.093	1.039	0.978	1.000	1.000	1.000	1.000	1.000
Cumulative	1.152	1.101	1.110	1.016	0.977	1.000	1.000	1.000	1.000	1.000

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Total: CIG, MD, COM'L AUTO-LIABILITY

Exhibit D

Paid ALAE

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	22,928	40,184	65,341	66,162	72,023	72,023	72,023	72,023	72,023	72,023
2002	15,909	28,426	47,943	68,829	151,633	176,564	180,089	180,089	180,089	
2003	14,468	104,633	189,044	402,685	541,702	613,853	623,896	623,896		
2004	5,122	29,694	52,439	81,423	119,124	136,100	141,858			
2005	11,739	46,967	138,850	216,573	353,686	444,451				
2006	14,180	35,749	59,908	145,865	256,576					
2007	24,691	65,732	94,275	149,231						
2008	36,477	67,635	91,348							
2009	23,769	58,031								
2010	9,790									

Paid ALAE to Paid Loss

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	0.037	0.038	0.057	0.055	0.054	0.054	0.054	0.054	0.054	0.054
2002	0.025	0.025	0.039	0.053	0.096	0.104	0.106	0.106	0.106	0.106
2003	0.014	0.050	0.066	0.076	0.088	0.092	0.093	0.093		
2004	0.005	0.017	0.023	0.035	0.049	0.054	0.056			
2005	0.008	0.021	0.040	0.042	0.059	0.065				
2006	0.009	0.015	0.021	0.048	0.073					
2007	0.016	0.025	0.023	0.036						
2008	0.020	0.026	0.029							
2009	0.017	0.023								
2010	0.004									

Paid ALAE to Paid Loss Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.019	1.497	0.956	0.987	1.002	1.000	1.000	1.000	1.000
2002	0.996	1.537	1.352	1.832	1.077	1.020	1.000	1.000	
2003	3.492	1.330	1.150	1.152	1.042	1.016	1.000		
2004	3.798	1.330	1.522	1.420	1.097	1.042			
2005	2.738	1.885	1.055	1.411	1.101				
2006	1.614	1.454	2.267	1.523					
2007	1.586	0.926	1.537						
2008	1.284	1.143							
2009	1.411								

Weights

Average	1.993	1.388	1.405	1.387	1.064	1.020	1.000	1.000	1.000	100%
Truncated	1.878	1.382	1.323	1.376	1.072	1.018	1.000	1.000	1.000	20%
Inverse	1.596	1.334	1.308	1.334	1.062	1.019	1.000	1.000	1.000	20%
\$ Weighted	1.728	1.339	1.387	1.332	1.067	1.019	1.000	1.000	1.000	50%
5 Year \$ Wtd	1.576	1.314	1.446	1.356	1.067	1.000	1.000	1.000	1.000	10%
5 Year Truncated	1.537	1.309	1.403	1.451	1.072	1.000	1.000	1.000	1.000	
3 Year \$ Wtd	1.404	1.120	1.464	1.456	1.068	1.021	1.000	1.000	1.000	
Selected	1.717	1.344	1.364	1.344	1.067	1.017	1.000	1.000	1.000	
Cumulative	4.591	2.675	1.990	1.459	1.086	1.017	1.000	1.000	1.000	

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Total: CIG, MD, COM'L AUTO-LIABILITY

Exhibit E

Claim Count

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	409	464	467	467	467	467	467	467	467	467
2002	422	466	470	471	474	474	474	474	474	474
2003	543	599	603	614	615	615	615	615		
2004	488	522	523	525	527	528	528			
2005	583	617	622	631	632	632				
2006	613	639	644	644	647					
2007	596	671	677	678						
2008	1,017	1,054	1,057							
2009	955	1,035								
2010	1,160									

Claim Count Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.134	1.006	1.000	1.000	1.000	1.000	1.000	1.000	1.000
2002	1.104	1.009	1.002	1.006	1.000	1.000	1.000	1.000	
2003	1.103	1.007	1.018	1.002	1.000	1.000	1.000		
2004	1.070	1.002	1.004	1.004	1.002	1.000			
2005	1.058	1.008	1.014	1.002	1.000				
2006	1.042	1.008	1.000	1.005					
2007	1.126	1.009	1.001						
2008	1.036	1.003							
2009	1.084								

	Weights										
Average	1.084	1.006	1.006	1.003	1.000	1.000	1.000	1.000	1.000	1.000	
Truncated	1.084	1.007	1.004	1.003	1.000	1.000	1.000	1.000	1.000	1.000	20%
Inverse	1.083	1.006	1.006	1.003	1.000	1.000	1.000	1.000	1.000	1.000	20%
\$ Weighted	1.078	1.006	1.006	1.003	1.000	1.000	1.000	1.000	1.000	1.000	20%
5 Year \$ Wtd	1.067	1.006	1.007	1.003	1.000	1.000	1.000	1.000	1.000	1.000	40%
5 Year Truncated	1.062	1.006	1.007	1.003	1.000	1.000	1.000	1.000	1.000	1.000	20%
3 Year \$ Wtd	1.075	1.006	1.005	1.003	1.001	1.000	1.000	1.000	1.000	1.000	100%
Selected	1.072	1.006	1.006	1.003	1.000	1.000	1.000	1.000	1.000	1.000	
Cumulative	1.089	1.015	1.009	1.003	1.000	1.000	1.000	1.000	1.000	1.000	

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Total: CIG, MD, COM'L AUTO-LIABILITY

Supplement: Calculation of Selected Ultimate Loss, ALAE and Claim Count by AY

AY	PAID LOSS			INCURRED LOSS				SELECTED LOSS		
	Paid Loss To Date	Paid LDF to Ult	Estimated Ult Losses	Inc Loss To Date	Incurred LDF to Ult	Estimated Ult Losses	% Paid TD of % Inc TD	% Paid Weight	Ultimate Losses	Implied Inc LDF
2001	1,335,966	1.000	1,335,966	1,335,966	1.000	1,335,966	100.0%	100.0%	1,335,966	1.000
2002	1,701,796	1.000	1,701,796	1,701,796	1.000	1,701,796	100.0%	100.0%	1,701,796	1.000
2003	6,707,080	1.000	6,707,080	6,707,080	1.000	6,707,080	100.0%	100.0%	6,707,080	1.000
2004	2,524,052	1.000	2,524,052	2,577,599	1.000	2,577,599	97.9%	97.9%	2,525,164	0.980
2005	6,800,577	1.000	6,800,577	6,802,797	1.000	6,801,148	100.0%	100.0%	6,800,577	1.000
2006	3,523,735	1.081	3,808,523	3,895,601	0.977	3,807,715	90.5%	90.5%	3,808,446	0.978
2007	4,151,142	1.240	5,148,700	4,530,498	1.016	4,601,020	91.6%	91.6%	5,102,841	1.126
2008	3,104,635	1.484	4,605,820	4,642,985	1.110	5,152,788	66.9%	66.9%	4,787,046	1.031
2009	2,479,448	1.957	4,852,966	5,255,322	1.101	5,784,815	47.2%	47.2%	5,345,171	1.017
2010	2,215,828	3.135	6,947,389	3,945,385	1.152	4,546,539	56.2%	56.2%	5,894,917	1.494

AY	ALAE					COMBINED LOSS & ALAE			CLAIM COUNT		
	Paid ALAE to Paid Loss	Dev Factor to Ult	Estimated Ult Paid to Paid	Selected Ult Paid to Paid	Selected Ultimate ALAE	Actual Inc Loss & Paid ALAE	Selected Ult Loss & ALAE	Implied Inc Loss & ALAE DF	Claim Count To Date	Claim Count Dev Factor	Selected Ult Claim Count
2001	0.054	1.000	0.054	0.054	72,023	1,407,989	1,407,989	1.000	467	1.000	467
2002	0.106	1.000	0.106	0.106	180,089	1,881,885	1,881,885	1.000	474	1.000	474
2003	0.093	1.000	0.093	0.093	623,896	7,330,976	7,330,976	1.000	615	1.000	615
2004	0.056	1.000	0.056	0.056	141,921	2,719,457	2,667,085	0.981	528	1.000	528
2005	0.065	1.017	0.066	0.066	452,094	7,247,248	7,252,671	1.001	632	1.000	632
2006	0.073	1.086	0.079	0.079	301,022	4,152,177	4,109,468	0.990	647	1.000	647
2007	0.036	1.459	0.052	0.052	267,564	4,679,729	5,370,406	1.148	678	1.003	680
2008	0.029	1.990	0.059	0.059	280,311	4,734,333	5,067,357	1.070	1,057	1.009	1,067
2009	0.023	2.675	0.063	0.063	334,599	5,313,353	5,679,770	1.069	1,035	1.015	1,051
2010	0.004	4.591	0.020	0.020	119,581	3,955,175	6,014,498	1.521	1,160	1.089	1,263

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Total: CIG, MD, COM'L AUTO-LIABILITY

Supplement: Rate History and Current Level Factors

SUMMARY	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001
Avg Rate Level	1.051	1.125	1.153	1.133	1.116	1.100	1.080	1.008	1.000	1.000
Current Level Factor	0.986	0.921	0.898	0.915	0.928	0.942	0.960	1.028	1.036	1.036

RATE HISTORY	date	% change	date	% change	date	% change	date	% change	date	% change
	7/1/2003	0.00%								
	8/1/2003	9.15%								
	12/1/2003	0.56%								
	8/1/2005	2.04%								
	6/15/2006	0.05%								
	4/1/2007	3.81%								
	4/1/2008	-2.62%								
	8/1/2009	-8.68%								
	1/1/2011	0.17%								

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Exhibit A

AY DEVELOPMENT	ALL YEARS	2010	2009	2008	2007	2006
1. Earned Premium	11,070,597	2,185,525	2,051,031	2,088,351	2,359,688	2,386,002
1b. Premium Growth	-3.1%	6.6%	-1.8%	-11.5%	-1.1%	
2. Current Level Factors		1.001	1.004	0.965	0.882	0.865
3. EP @ Current Level	10,406,503	2,187,740	2,058,814	2,014,702	2,081,975	2,063,271
3b. Premium Growth @ CL	1.1%	6.3%	2.2%	-3.2%	0.9%	
4. Premium Trend Factor		1.000	1.000	1.000	1.000	1.000
5. Trended EP @ CL	10,406,503	2,187,740	2,058,814	2,014,702	2,081,975	2,063,271
6. Actual Inc Loss & ALAE	9,244,101	2,220,114	1,792,684	1,827,723	1,836,986	1,566,594
7. Inc L&ALAE Dev Factor	0.999	0.988	1.005	1.003	1.002	1.002
8. Ultimate Inc Loss & ALAE	9,239,086	2,193,432	1,802,447	1,832,422	1,840,517	1,570,269
9. ULAE Factor		12.4%	12.4%	12.4%	12.4%	12.4%
10. Excess Wind+Water Factor		0.0%	0.0%	0.0%	0.0%	0.0%
11. Ultimate Inc Loss & LAE	10,380,242	2,464,351	2,025,074	2,058,752	2,067,846	1,764,219
12. Loss Trend Factor		1.025	1.034	1.042	1.051	1.061
13. Trended Ult Loss & LAE	10,809,526	2,525,145	2,092,958	2,146,147	2,174,251	1,871,026
14. Proj Loss & LAE Ratio		115.4%	101.7%	106.5%	104.4%	90.7%
15. Accident Year Weights	100%	21.0%	19.8%	19.4%	20.0%	19.8%
16. Ultimate Claim Count	1,808	489	397	417	260	245

PROJECTED LOSSES AND OTHER COSTS

17. Projected Loss Ratio	103.9%
18a. Expected Non-Normal Losses	0
18b. Other Fixed Costs (e.g. Reinsurance)	0
19. Other Costs Loss Ratio	0.0%
20. Combined Projected Loss Ratio	103.9%

PLR AND INDICATION

21. Permissible Loss Ratio	59.1%
22. Full-Credibility Indication	75.9%
23. Claim Count Credibility	100.0%
24.	
25. Net Trend	2.4%
26. Complement of Credibility	2.4%
27. Credibility-Weighted Indication	75.9%

TRENDS

	Up-to-Date	Projected
28. Annual Premium Trend	0.0%	0.0%
29. Annual Loss Trend	0.9%	0.9%
30. Effective Date		5/1/2012
31. Trend Period		2.833
32a. Organic Premium Growth	1.1%	
32b. Rate Level Growth	-4.1%	
32c. Total Premium Growth	-3.1%	

Calculations:

1b = premium growth (growth of row 1, exponential trend for ALL YEARS column)
 $3 = 1 \times 2$
 3b = organic premium growth (growth of row 3, exponential trend for ALL YEARS column)
 $5 = 3 \times 4$
 $8 = 6 \times 7$
 $11 = 8 \times (1 + 9) \times (1 + 10)$
 $11 = 9 \times 10$
 $13 = 11 \times 12$
 $14 = 13 / 5$
 $15 = 5 / \text{Sum of } 5$
 $17 = \text{Sumproduct of } 14 \text{ and } 15$
 $19 = (18a + 18b) / \text{Latest AY of } 5$
 $20 = 17 + 19$
 $22 = 20 / 21 - 1$
 $23 = \text{SQRT}(\text{Sum of } 16 / 1082.41) \dots \text{ up to } 100\%$
 24 intentionally left blank
 $25 = ((1 + 29)/(1 + 28))^{(\text{diff b/w Prop Eff Date \& Date Last Rate Change}/365.25)} - 1$
 if there is no rate history in experience period, default to Net Trend
 $27 = (23 \times 17 + (1.00 - 23) \times (21 - 19) \times (1 - 26) + 19) / 21 - 1.00$
 $32a = 3b$
 $32b = (1 + 32c) / (1 + 32a) - 1$
 $32c = 1b$

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Exhibit B

Paid Loss

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	581,820	615,446	614,143	614,143	614,356	615,953	615,569	615,569	615,569	615,530
2002	698,932	769,731	767,726	767,437	767,437	767,437	767,437	767,437	767,437	
2003	1,014,818	1,123,733	1,125,497	1,123,603	1,123,603	1,123,603	1,123,603	1,123,603		
2004	939,462	1,011,145	1,026,606	1,026,606	1,026,606	1,029,606	1,029,606			
2005	1,239,794	1,405,949	1,415,129	1,415,549	1,417,384	1,417,384				
2006	1,362,559	1,520,285	1,528,974	1,531,304	1,531,304					
2007	1,596,975	1,809,333	1,813,179	1,813,179						
2008	1,647,882	1,799,233	1,799,233							
2009	1,620,844	1,764,686								
2010	1,941,324									

Paid Loss Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.058	0.998	1.000	1.000	1.003	0.999	1.000	1.000	1.000
2002	1.101	0.997	1.000	1.000	1.000	1.000	1.000	1.000	
2003	1.107	1.002	0.998	1.000	1.000	1.000	1.000		
2004	1.076	1.015	1.000	1.000	1.003	1.000			
2005	1.134	1.007	1.000	1.001	1.000				
2006	1.116	1.006	1.002	1.000					
2007	1.133	1.002	1.000						
2008	1.092	1.000							
2009	1.089								

Weights

Average	1.101	1.003	1.000	1.000	1.001	1.000	1.000	1.000	1.000	
Truncated	1.102	1.002	1.000	1.000	1.001	1.000	1.000	1.000	1.000	20%
Inverse	1.100	1.003	1.000	1.000	1.001	1.000	1.000	1.000	1.000	
\$ Weighted	1.104	1.004	1.000	1.000	1.001	1.000	1.000	1.000	1.000	20%
5 Year \$ Wtd	1.111	1.005	1.000	1.000	1.001	1.000	1.000	1.000	1.000	
5 Year Truncated	1.114	1.005	1.000	1.000	1.001	1.000	1.000	1.000	1.000	40%
3 Year \$ Wtd	1.104	1.002	1.001	1.000	1.001	1.000	1.000	1.000	1.000	20%
										100%
Selected	1.108	1.004	1.000	1.000	1.001	1.000	1.000	1.000	1.000	
Cumulative	1.113	1.005	1.001	1.001	1.001	1.000	1.000	1.000	1.000	

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Exhibit C

Case Reserve

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	32,666	4,087	0	0	0	0	0	0	0	0
2002	60,002	13,500	500	500	0	0	0	0	0	0
2003	195,152	269	0	0	0	0	0	0	0	0
2004	124,117	-10,186	13,916	11,100	11,100	11,100	11,100			
2005	162,737	22,895	0	100	100	0				
2006	151,423	3,063	25	0	0					
2007	204,308	4,257	0	0						
2008	125,324	-400	-400							
2009	136,417	1,650								
2010	261,370									

Incurred Loss

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	614,486	619,533	614,143	614,143	614,356	615,953	615,569	615,569	615,569	615,530
2002	758,934	783,231	768,226	767,937	767,437	767,437	767,437	767,437	767,437	
2003	1,209,970	1,124,002	1,125,497	1,123,603	1,123,603	1,123,603	1,123,603	1,123,603		
2004	1,063,579	1,000,959	1,040,522	1,037,706	1,037,706	1,040,706	1,040,706			
2005	1,402,531	1,428,844	1,415,129	1,415,649	1,417,484	1,417,384				
2006	1,513,982	1,523,348	1,528,999	1,531,304	1,531,304					
2007	1,801,283	1,813,590	1,813,179	1,813,179						
2008	1,773,206	1,798,833	1,798,833							
2009	1,757,261	1,766,336								
2010	2,202,694									

Incurred Loss Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.008	0.991	1.000	1.000	1.003	0.999	1.000	1.000	1.000
2002	1.032	0.981	1.000	0.999	1.000	1.000	1.000	1.000	
2003	0.929	1.001	0.998	1.000	1.000	1.000	1.000		
2004	0.941	1.040	0.997	1.000	1.003	1.000			
2005	1.019	0.990	1.000	1.001	1.000				
2006	1.006	1.004	1.002	1.000					
2007	1.007	1.000	1.000						
2008	1.014	1.000							
2009	1.005								

Weights

Average	0.996	1.001	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
Truncated	1.000	0.998	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	20%
Inverse	0.995	1.001	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
\$ Weighted	0.997	1.001	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	20%
5 Year \$ Wtd	1.010	1.004	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
5 Year Truncated	1.009	1.001	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	40%
3 Year \$ Wtd	1.009	1.001	1.001	1.000	1.001	1.000	1.000	1.000	1.000	1.000	20%
											100%
Selected	1.005	1.000	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
Cumulative	1.006	1.001	1.001	1.001	1.001	1.000	1.000	1.000	1.000	1.000	

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Exhibit D

Paid ALAE

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	2,299	6,367	6,467	6,467	6,831	6,831	6,831	8,072	8,962	8,962
2002	7,080	8,965	8,965	8,931	8,931	8,931	8,931	8,931	8,931	
2003	11,530	21,776	24,598	24,598	24,598	24,598	24,598	24,598		
2004	10,542	11,828	11,875	11,875	11,875	11,875	11,875			
2005	19,216	26,922	30,317	30,382	30,382	30,813				
2006	27,432	34,554	34,602	35,290	35,290					
2007	17,932	23,412	23,807	23,807						
2008	23,237	28,882	28,890							
2009	20,922	26,348								
2010	17,420									

Paid ALAE to Paid Loss

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	0.004	0.010	0.011	0.011	0.011	0.011	0.011	0.013	0.015	0.015
2002	0.010	0.012	0.012	0.012	0.012	0.012	0.012	0.012	0.012	
2003	0.011	0.019	0.022	0.022	0.022	0.022	0.022	0.022		
2004	0.011	0.012	0.012	0.012	0.012	0.012	0.012			
2005	0.015	0.019	0.021	0.021	0.021	0.022				
2006	0.020	0.023	0.023	0.023	0.023					
2007	0.011	0.013	0.013	0.013						
2008	0.014	0.016	0.016							
2009	0.013	0.015								
2010	0.009									

Paid ALAE to Paid Loss Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	2.618	1.018	1.000	1.056	0.997	1.001	1.182	1.110	1.000
2002	1.150	1.003	0.997	1.000	1.000	1.000	1.000	1.000	
2003	1.706	1.128	1.002	1.000	1.000	1.000	1.000		
2004	1.042	0.989	1.000	1.000	0.997	1.000			
2005	1.235	1.119	1.002	0.999	1.014				
2006	1.129	0.996	1.018	1.000					
2007	1.152	1.015	1.000						
2008	1.138	1.000							
2009	1.157								

Weights

Average	1.370	1.033	1.003	1.009	1.002	1.000	1.061	1.055	1.000	20%
Truncated	1.238	1.025	1.001	1.000	0.999	1.000	1.000	1.000	1.000	20%
Inverse	1.267	1.031	1.003	1.009	1.002	1.000	1.054	1.052	1.000	50%
\$ Weighted	1.221	1.038	1.005	1.003	1.004	1.000	1.031	1.052	1.000	10%
5 Year \$ Wtd	1.159	1.026	1.006	1.000	1.004	1.000	1.000	1.000	1.000	
5 Year Truncated	1.149	1.004	1.001	1.000	0.999	1.000	1.000	1.000	1.000	
3 Year \$ Wtd	1.147	1.003	1.008	1.000	1.006	1.000	1.031	1.000	1.000	100%
Selected	1.228	1.033	1.004	1.003	1.003	1.000	1.026	1.037	1.000	
Cumulative	1.362	1.109	1.074	1.070	1.067	1.064	1.064	1.037	1.000	

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Exhibit E

Claim Count

AY	m12	m24	m36	m48	m60	m72	m84	m96	m108	m120
2001	301	332	334	334	334	335	335	335	335	335
2002	314	340	340	340	340	340	340	340	340	
2003	321	334	334	334	334	334	334	334		
2004	223	231	231	231	231	231	231			
2005	232	241	242	242	242	242				
2006	238	245	245	245	245					
2007	253	260	260	260						
2008	410	416	417							
2009	396	397								
2010	475									

Claim Count Development

AY	m12-m24	m24-m36	m36-m48	m48-m60	m60-m72	m72-m84	m84-m96	m96-m108	m108-m120
2001	1.103	1.006	1.000	1.000	1.003	1.000	1.000	1.000	1.000
2002	1.083	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
2003	1.040	1.000	1.000	1.000	1.000	1.000	1.000		
2004	1.036	1.000	1.000	1.000	1.000	1.000			
2005	1.039	1.004	1.000	1.000	1.000				
2006	1.029	1.000	1.000	1.000					
2007	1.028	1.000	1.000						
2008	1.015	1.002							
2009	1.003								

	Weights										
Average	1.042	1.002	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
Truncated	1.039	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	20%
Inverse	1.041	1.002	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
\$ Weighted	1.040	1.002	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	20%
5 Year \$ Wtd	1.020	1.001	1.000	1.000	1.001	1.000	1.000	1.000	1.000	1.000	
5 Year Truncated	1.024	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	40%
3 Year \$ Wtd	1.013	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	20%
											100%
Selected	1.028	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
Cumulative	1.029	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Supplement: Calculation of Selected Ultimate Loss, ALAE and Claim Count by AY

AY	PAID LOSS			INCURRED LOSS				SELECTED LOSS		
	Paid Loss To Date	Paid LDF to Ult	Estimated Ult Losses	Inc Loss To Date	Incurred LDF to Ult	Estimated Ult Losses	% Paid TD of % Inc TD	% Paid Weight	Ultimate Losses	Implied Inc LDF
2001	615,530	1.000	615,530	615,530	1.000	615,530	100.0%	100.0%	615,530	1.000
2002	767,437	1.000	767,427	767,437	1.000	767,427	100.0%	100.0%	767,427	1.000
2003	1,123,603	1.000	1,123,589	1,123,603	1.000	1,123,589	100.0%	100.0%	1,123,589	1.000
2004	1,029,606	1.000	1,029,593	1,040,706	1.000	1,040,693	98.9%	98.9%	1,029,711	0.989
2005	1,417,384	1.000	1,417,335	1,417,384	1.000	1,417,335	100.0%	100.0%	1,417,335	1.000
2006	1,531,304	1.001	1,532,589	1,531,304	1.001	1,532,573	100.0%	100.0%	1,532,589	1.001
2007	1,813,179	1.001	1,815,015	1,813,179	1.001	1,814,967	100.0%	100.0%	1,815,015	1.001
2008	1,799,233	1.001	1,801,353	1,798,833	1.001	1,800,289	100.0%	100.0%	1,801,353	1.001
2009	1,764,686	1.005	1,773,080	1,766,336	1.001	1,768,580	99.9%	99.9%	1,773,076	1.004
2010	1,941,324	1.113	2,160,326	2,202,694	1.006	2,216,150	88.1%	88.1%	2,166,950	0.984

AY	ALAE					COMBINED LOSS & ALAE			CLAIM COUNT		
	Paid ALAE to Paid Loss	Dev Factor to Ult	Estimated Ult Paid to Paid	Selected Ult Paid to Paid	Selected Ultimate ALAE	Actual Inc Loss & Paid ALAE	Selected Ult Loss & ALAE	Implied Inc Loss & ALAE DF	Claim Count To Date	Claim Count Dev Factor	Selected Ult Claim Count
2001	0.015	1.000	0.015	0.015	8,962	624,492	624,492	1.000	335	1.000	335
2002	0.012	1.000	0.012	0.012	8,931	776,368	776,359	1.000	340	1.000	340
2003	0.022	1.037	0.023	0.023	25,500	1,148,201	1,149,088	1.001	334	1.000	334
2004	0.012	1.064	0.012	0.012	12,634	1,052,581	1,042,345	0.990	231	1.000	231
2005	0.022	1.064	0.023	0.023	32,781	1,448,197	1,450,116	1.001	242	1.000	242
2006	0.023	1.067	0.025	0.025	37,679	1,566,594	1,570,269	1.002	245	1.000	245
2007	0.013	1.070	0.014	0.014	25,502	1,836,986	1,840,517	1.002	260	1.000	260
2008	0.016	1.074	0.017	0.017	31,069	1,827,723	1,832,422	1.003	417	1.000	417
2009	0.015	1.109	0.017	0.017	29,370	1,792,684	1,802,447	1.005	397	1.001	397
2010	0.009	1.362	0.012	0.012	26,482	2,220,114	2,193,432	0.988	475	1.029	489

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Total: CIG, MD, COM'L AUTO - PHYSICAL DAMAGE

Supplement: Rate History and Current Level Factors

SUMMARY	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001
Avg Rate Level	1.065	1.062	1.105	1.208	1.233	1.175	1.138	1.014	1.000	1.000
Current Level Factor	1.001	1.004	0.965	0.882	0.865	0.907	0.937	1.051	1.066	1.066

RATE HISTORY	date	% change	date	% change	date	% change	date	% change	date	% change
	7/1/2003	0.00%								
	8/1/2003	16.16%								
	12/1/2003	0.56%								
	8/1/2005	6.73%								
	6/15/2006	-0.23%								
	4/1/2007	-10.15%								
	4/1/2008	-5.17%								
	8/1/2009	0.60%								

**MARYLAND
DIVISION ONE – COMMERCIAL AUTOMOBILE
RULES AND RATES MEMORANDUM**

NEW PAGE	REPLACED PAGE	DESCRIPTION OF CHANGE
CA-GR-11 (1/13)	CA-GR-11 (8/09)	RULE 28. WHO IS AN INSURED OMNIBUS CLAUSE Adding new rule.
CA-90 (1/13)	CA-90 (4/08)	Rule 69. NONOWNERSHIP LIABILITY B.1. and 2. the wording is revised to correspond with the changes in 69.C.3.
CA-91 (1/13)	CA-91 (9/11)	Rule 69. NONOWNERSHIP LIABILITY C.1.a. is revised to add class codes 1024, 1025 and 1026 which represent ISO code 6601. Premiums are amended for class codes 6602 through 6605. Removed dashes from the word Nonowned.
CA-92 thru CA-92.1 (1/13)	CA-92 (9/11)	Rule 69. NONOWNERSHIP LIABILITY C.3. the rule is replaced to accommodate for Home Health Care Risks, Hospice Care Risks and Companion Care Risks. Twenty-eight new class codes have been added. These codes reflect the total number of employees, with or without transporting clients or patients and the percentage of employees using their own vehicles in the insured's business. D. is revised to show new class codes 1024, 1025 and 1026 which represent ISO code 6601. Premiums are revised. Removed dashes from the word Nonowned. Moved Rule 69.C.4., D., E., F. and Rule 70.A.1.a. & b. to CA-92.1. Rule 70. HIRED AUTOS A.1.a. (1) and (2) wording is revised to match more closely with ISO countrywide wording.
CA-93 (1/13)	CA-93 (4/08)	Rule 70. HIRED AUTOS Headings are revised under A.1.b.(4) - contractual liability and A.1.b.(4) (c) - Example
CA-94 (1/13)	CA-94 (4/08)	Rule 70. HIRED AUTOS B.3.d. (Bodily Injury and Property Damage, \$100,000 limit for "All Territories") is revised to reflect the selected loss cost based on current ISO loss cost times our company expense load. The minimum premium remains at \$75.00. C.1. is reworded and C.2., for Premium Computation is revised to add premiums and new Limits of Coverage up to \$60,000.

NEW PAGE**REPLACED PAGE****DESCRIPTION OF CHANGE**

CA-95 (1/13)

CA-95 (4/08)

Rule 70. HIRED AUTOS
C.2.c.(2) revised Rate Per Each \$100 Annual Cost of Hire for Comprehensive, Collision and Specified Causes of Loss to reflect the selected loss cost based on current ISO loss cost times our company expense load.