

# **Massachusetts Commercial Automobile Statistical Plan Part III - General Reporting Requirements**

## **Section A – Premiums**

### **1. REPORTING OF PREMIUMS**

A separate premium record must be reported for each unique set of data elements contained in this Plan. Premiums are reported on statistical records by coverage (liability, personal injury protection (PIP) or no-fault, and physical damage). All bodily injury liability premium records must contain the combined premium of each separately developed bodily injury liability premium (i.e. compulsory bodily injury, optional bodily injury, medical payments, underinsured motorists and uninsured motorists). All other premium records (property damage liability, PIP (no-fault), other than collision and collision) should contain the individually developed premium.

Companies have the option to report combined bodily injury liability premiums apart from property damage liability premiums, on separate statistical records. Similarly, other than collision and collision premiums may be reported on separate statistical records if desired.

Premium adjustments due to the application of Retrospective Rating Plan D must be reported on separate statistical records using the applicable Classification Code and Coverage Code. Retrospective Rating Plans are available for use on voluntary policies only.

### **2. SINGLE LIMIT POLICIES**

Single limit policies with separate premiums for bodily injury and property damage shall be reported using the appropriate Limits Identifier Code.

★ When reporting the bodily injury and property damage premium on one record, the combined single limit code shall be reported in the Bodily Injury Limits Code field with spaces or zeros in the Property Damage Limits Code field. Note also that if a property damage deductible has been offered, Property Damage Limits Code 08 may also be reported in the Property Damage Limits Code field. The corresponding bodily injury and property damage portions of the premium as determined by the single limit calculation shall then be reported in the appropriate Bodily Injury Premium Amount or Property Damage Premium Amount field.

When reporting bodily injury and property damage premium on two separate records, the records shall be reported in the following manner:

a. For the bodily injury record, the limit code shall be reported in the Bodily Injury Limits Code field with spaces or zeros in the Property Damage Limits field. The bodily injury portion of the premium as determined by the single limit calculation, shall be reported in the Bodily Injury Premium field with spaces or zeros in the Property Damage Premium field.

★ b. For the property damage record, the combined single limit code shall be reported in the Bodily Injury Limits field with spaces or zeros or Property Damage Limits Code 08 (indicating the existence of a property damage deductible) in the Property Damage Limits field. The Property Damage portion of the premium as determined by the single limit calculation, shall be reported in the Property Damage Premium field with spaces or zeros in the Bodily Injury Premium field.

For additional information relative to the single limit calculation, refer to the Massachusetts Commercial Automobile Insurance Manual.

**Massachusetts Commercial Automobile  
Statistical Plan  
Part VI - Coding Section**

**CAR IDENTIFICATION CODE**

| ★ | <b>Description (Policy Effective Years 2006 and subsequent)</b>                                                                                                                                                  | <b>Code</b> |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
|   | Voluntary Business (retained) from Voluntary Agents or written directly by the company (Representative Producers)                                                                                                | 0           |
| ★ | Voluntary Business (retained) from Exclusive Representative Producers (No Voluntary Contract) or from Voluntary Agents assigned to a Servicing Carrier, with whom the carrier does not have a voluntary contract | 1           |
|   | Ceded Business from Voluntary Agents or written directly by the company (Representative Producers)                                                                                                               | 4           |
| ★ | Ceded Business from Exclusive Representative Producers (No Voluntary Contract) or from Voluntary Agents assigned to a Servicing Carrier, with whom the carrier does not have a voluntary contract                | 5           |

| ★ | <b>Description (Policy Effective Years 1995 through 2005)</b>                                                     | <b>Code</b> |
|---|-------------------------------------------------------------------------------------------------------------------|-------------|
|   | Voluntary Business (retained) from Voluntary Agents or written directly by the company (Representative Producers) | 0           |
|   | Voluntary Business (retained) from Exclusive Representative Producers (No Voluntary Contract)                     | 1           |
|   | Ceded Business from Voluntary Agents or written directly by the company (Representative Producers)                | 4           |
|   | Ceded Business from Exclusive Representative Producers (No Voluntary Contract)                                    | 5           |

# Massachusetts Commercial Automobile Statistical Plan Part VI - Coding Section

## LIABILITY LIMITS CODE

| BODILY INJURY              |              |      |
|----------------------------|--------------|------|
| Limits of Liability        |              | Code |
| Per Claim                  | Per Accident |      |
| \$ 20,000                  | \$ 40,000    | 01   |
| 20,000                     | 40,000       | 04 * |
| 20,000                     | 50,000       | 11   |
| 25,000                     | 60,000       | 05   |
| 25,000                     | 50,000       | 06   |
| 30,000                     | 70,000       | 12   |
| 35,000                     | 80,000       | 13   |
| 50,000                     | 100,000      | 07   |
| 100,000                    | 300,000      | 08   |
| 250,000                    | 500,000      | 09   |
| 500,000                    | 1,000,000    | 10   |
| 1,000,000                  | 1,000,000    | 14   |
| All Other Limits Not Above |              | 49   |
| No Bodily Injury           |              | 00   |

| MEDICAL PAYMENTS           |         |
|----------------------------|---------|
| Limits of Liability        | Code    |
| \$ 500                     | 01      |
| 750                        | 02      |
| 1,000                      | 03      |
| 2,000                      | 04      |
| 5,000                      | 05      |
| 10,000                     | 06      |
| 15,000                     | 07      |
| 20,000                     | 08      |
| 25,000                     | 09      |
| 50,000                     | 10 ***  |
| 100,000                    | 11 ***  |
| All Other Limits Not Above | 49 **** |
| No Medical Payments        | 00      |

★

| UNINSURED MOTORIST         |              |        |
|----------------------------|--------------|--------|
| Limits of Liability        |              | Code   |
| Per Claim                  | Per Accident |        |
| \$ 20,000                  | \$ 40,000    | 04     |
| 20,000                     | 50,000       | 11     |
| 25,000                     | 60,000       | 05     |
| 25,000                     | 50,000       | 06     |
| 30,000                     | 70,000       | 12     |
| 35,000                     | 80,000       | 13     |
| 50,000                     | 100,000      | 07     |
| 100,000                    | 300,000      | 08     |
| 250,000                    | 500,000      | 09     |
| 500,000                    | 1,000,000    | 10 *** |
| 1,000,000                  | 1,000,000    | 14 *** |
| All Other Limits Not Above |              | 49     |
| No Uninsured Auto          |              | 00     |

| UNDERINSURED MOTORIST      |              |        |
|----------------------------|--------------|--------|
| Limits of Liability        |              | Code   |
| Per Claim                  | Per Accident |        |
| \$ 20,000                  | \$ 40,000    | 04 **  |
| 20,000                     | 50,000       | 11     |
| 25,000                     | 60,000       | 05     |
| 25,000                     | 50,000       | 06     |
| 30,000                     | 70,000       | 12     |
| 35,000                     | 80,000       | 13     |
| 50,000                     | 100,000      | 07     |
| 100,000                    | 300,000      | 08     |
| 250,000                    | 500,000      | 09     |
| 500,000                    | 1,000,000    | 10 *** |
| 1,000,000                  | 1,000,000    | 14 *** |
| All Other Limits Not Above |              | 49     |
| No Underinsured Auto       |              | 00     |

| PROPERTY DAMAGE            |        |
|----------------------------|--------|
| Limits of Liability        | Code   |
| \$ 5,000                   | 01     |
| 10,000                     | 02     |
| 15,000                     | 03     |
| 25,000                     | 04     |
| 35,000                     | 05     |
| 50,000                     | 06     |
| 100,000                    | 07     |
| 250,000                    | 11     |
| 500,000                    | 10     |
| 750,000                    | 12 *** |
| 1,000,000                  | 13 *** |
| Property Damage Deductible | 08     |
| All Other Limits Not Above | 09     |
| No Property Damage         | 00     |

\* If both mandatory (code 01) and optional (code 04) Bodily Injury coverage are purchased, Limits Code 04 must be reported.

\*\* If the 20/40 limit of Underinsured Motorists coverage is purchased, although there is no associated cost, Limits Code 04 must be reported.

\*\*\* This limit is available for voluntary business only.

★ \*\*\*\* Optional for policies effective 1/1/05 – 12/31/05 and mandatory for policies effective 1/1/06 and subsequent.