

RATE SECTION

Memorandum

The rates shown on the rate sheets are the liability and physical damage rates filed by the Commonwealth Automobile Reinsurers for the Massachusetts private passenger automobile residual market.

The same rates apply under a Personal Auto Policy on a risk for which compulsory coverage is not required. For bodily injury charge the total of the Parts 1, 2 and 5 premiums for risks subject to the compulsory law.

The bodily injury increased limits factors shown in this manual are to be applied against the Part 1 and Part 5, basic limits, premium in determining the increased limits premium. Increased limits factors are not applicable to Part 2.

The basic limits rates shown on the rate pages are for \$20,000/\$40,000 bodily injury (Parts 1 and 5) and \$5,000 property damage (Part 4). The charge for bodily injury increased limits is determined by applying the factors shown on the Increased Limits Tables to the total of the adjusted Part 1 premium and Part 5 basic limits premium and then subtracting the adjusted Part 1 premium as follows:

$$\text{Part 5} = (\text{Part 1} + \text{Part 5 } (\$20/40)) \times \text{Increased Limits Factor} - \text{Part 1}$$

The private passenger rate pages display liability rates for various classes at selected limits. For most risks, the liability premium can be determined directly from the rate pages.

As of 6/1/2020:

- Base rates by coverage have been modified to reflect current loss experience. Medical Payment rates remain unchanged.
- Rating territories are unchanged.
- BI, PDL, U-1 and U-2 increased limit factors have been updated for vehicles other than Motorcycles.
- Deductible relativities are unchanged.
- Model year/VRG relativities are shifted by year, but the relativity factors are unchanged.
- The VRG Assignment By Price Table is unchanged.
- The Stated Amount Divisor Table is unchanged.
- The Stated Amount Rates have been updated.
- Miscellaneous rating factors are unchanged (RS-1).
- Towing and Labor and Substitute Transportation are unchanged for vehicles other than Motorcycles.
- The commission schedule for assigned risk business is unchanged.
- A footnote that was inadvertently dropped from prior years rate pages was added relating to the Stated Amount Comprehensive rate factor for C.A.C. with M.M.&V. (Page R-43)
- The motorcycle rates have been updated. Changes include base rates, ILF's, deductible buy-back charges, age/rate factors, towing and labor, and substitute transportation.
- The approved motorcycle training sites have been updated.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 1

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	233	347	280	601	407	541	366	242
PART 2	PERSONAL INJURY PROTECTION							
	75	98	89	156	119	140	107	73
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	360	534	447	1008	691	907	622
	10,000	496	736	616	1389	952	1250	857
	15,000	503	747	625	1409	966	1268	870
	25,000	510	757	633	1428	979	1285	881
	35,000	514	763	639	1440	987	1296	889
	50,000	519	770	645	1454	996	1308	897
	100,000	528	784	656	1480	1014	1331	913
	250,000	532	789	661	1490	1021	1341	919
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	40	58	47	101	68	91	61
	20/50	43	62	50	108	73	97	65
	25/50	59	86	70	150	101	135	91
	25/60	62	90	73	157	106	142	95
	35/80	92	135	109	234	158	211	142
	50/100	125	184	148	319	215	287	193
	100/300	217	321	260	557	377	502	339
	250/500	381	564	456	979	662	881	595

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	986	1637	1175	2595	1767	2336	1590	1005
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	148	148	148	148	148	148	148	148
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$1								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
118	196	141	311	212	280	191	121	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 2

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	278	417	343	724	485	652	437	289
PART 2	PERSONAL INJURY PROTECTION							
	81	115	94	169	123	152	111	82
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	431	608	522	1163	753	1047	678
	10,000	594	838	719	1603	1038	1443	934
	15,000	603	850	730	1626	1053	1464	948
	25,000	611	862	740	1648	1067	1484	961
	35,000	616	869	746	1662	1076	1496	969
	50,000	622	877	753	1677	1086	1510	978
	100,000	633	893	766	1707	1105	1537	995
	250,000	637	899	772	1719	1113	1547	1002
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	47	70	58	122	81	110	73
	20/50	50	75	62	130	87	118	78
	25/50	70	104	86	181	121	163	109
	25/60	73	109	90	190	126	171	114
	35/80	109	163	134	283	189	255	170
	50/100	148	221	182	384	256	346	231
	100/300	258	387	319	672	449	605	405
	250/500	453	679	559	1180	789	1063	711

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	942	1638	1235	2644	1525	2380	1373	976
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	139	139	139	139	139	139	139	139
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$1								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
113	197	148	317	183	286	165	117	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 3

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	272	433	319	776	486	698	437	274
PART 2	PERSONAL INJURY PROTECTION							
	92	132	104	215	132	194	119	89
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	408	633	481	1117	766	1005	689
	10,000	562	872	663	1539	1056	1385	949
	15,000	570	885	672	1562	1071	1405	963
	25,000	578	897	682	1583	1085	1424	976
	35,000	583	905	687	1596	1095	1436	985
	50,000	588	913	694	1611	1105	1449	994
	100,000	599	929	706	1640	1124	1475	1011
	250,000	603	936	711	1651	1132	1485	1018
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	46	72	54	130	82	117	74
	20/50	49	77	58	139	88	125	79
	25/50	68	107	80	193	122	174	110
	25/60	71	112	84	202	127	182	115
	35/80	106	168	125	302	190	272	171
	50/100	145	229	170	411	258	370	232
	100/300	253	400	296	719	451	647	406
	250/500	444	703	520	1263	792	1136	713

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	979	1657	1158	2696	1651	2426	1486	987
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	160	160	160	160	160	160	160	160
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
117	199	139	324	198	291	178	118	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 4

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	336	520	376	887	565	798	509	312
PART 2	PERSONAL INJURY PROTECTION							
	101	139	104	209	156	188	140	90
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	457	722	502	1189	880	1070	792
	10,000	630	995	692	1638	1213	1474	1091
	15,000	639	1009	702	1662	1230	1496	1107
	25,000	648	1023	711	1685	1247	1516	1122
	35,000	653	1032	717	1699	1258	1529	1132
	50,000	659	1041	724	1715	1269	1543	1142
	100,000	671	1060	737	1745	1292	1571	1163
	250,000	675	1067	742	1757	1301	1581	1171
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	57	88	64	149	95	134	86
	20/50	61	94	68	159	102	143	92
	25/50	85	131	95	222	141	199	128
	25/60	88	137	99	232	148	209	134
	35/80	132	204	148	346	220	311	199
	50/100	179	276	200	470	300	423	270
	100/300	312	483	350	822	524	740	473
	250/500	548	848	614	1444	920	1299	830
								509

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1075	1790	1291	2725	1833	2453	1650	1061
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	154	154	154	154	154	154	154	154
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
129	215	155	327	220	294	198	127	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 5

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	328	451	398	818	592	736	533	337
PART 2	PERSONAL INJURY PROTECTION							
	102	144	107	199	155	179	140	93
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	439	622	514	1153	888	1038	799
	10,000	605	857	708	1589	1224	1430	1101
	15,000	614	870	719	1612	1241	1451	1117
	25,000	622	881	728	1634	1258	1471	1132
	35,000	627	889	735	1648	1269	1483	1142
	50,000	633	897	741	1663	1280	1497	1152
	100,000	644	913	755	1693	1304	1524	1173
	250,000	649	919	760	1704	1312	1534	1181
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	55	76	66	137	99	123	89
	20/50	59	81	71	147	106	132	95
	25/50	82	113	98	204	147	183	133
	25/60	86	118	103	213	154	192	139
	35/80	128	176	154	318	230	286	207
	50/100	174	239	210	433	313	389	282
	100/300	304	419	368	758	548	681	493
	250/500	534	735	646	1331	963	1197	867

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		27		35/80	
	20/50		28		50/100	
	25/50		29		100/300	
	25/60		30		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1028	1591	1298	2714	1875	2443	1688	1064
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	162	162	162	162	162	162	162	162
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
123	191	156	326	225	293	203	128	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

TERRITORY 6

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1098	1718	1312	2928	1886	2635	1697	1116
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	157	157	157	157	157	157	157	157
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Commonwealth Automobile Reinsurers - June 1, 2020

TERRITORY 7

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	PART 12
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1140	1822	1356	3036	2026	2732	1823	1163
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	172	172	172	172	172	172	172	172
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Commonwealth Automobile Reinsurers - June 1, 2020

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 8

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	389	582	445	1023	703	921	633	379
PART 2	PERSONAL INJURY PROTECTION							
	135	186	162	278	237	250	213	122
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	500	713	603	1262	960	1136	864
	10,000	689	983	831	1739	1323	1565	1191
	15,000	699	997	843	1764	1342	1588	1208
	25,000	709	1010	854	1788	1360	1610	1224
	35,000	715	1019	862	1803	1372	1623	1235
	50,000	721	1028	870	1820	1384	1638	1246
	100,000	734	1047	885	1853	1409	1668	1268
	250,000	739	1054	891	1865	1419	1679	1277
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	66	98	75	172	119	155	107
	20/50	71	105	80	184	127	166	114
	25/50	98	146	111	256	177	230	159
	25/60	102	152	117	268	185	241	166
	35/80	152	227	174	399	275	359	248
	50/100	207	309	236	542	374	489	336
	100/300	362	540	413	949	653	854	588
	250/500	635	948	725	1666	1147	1500	1032
								618

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1183	2033	1827	3051	2241	2746	2017	1142
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	196	196	196	196	196	196	196	196
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
142	244	219	366	269	330	242	137	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

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MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 9

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	420	595	547	1119	770	1007	693	438
PART 2	PERSONAL INJURY PROTECTION							
	167	216	182	340	239	306	215	152
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	548	776	625	1344	982	1210	884
	10,000	755	1069	861	1852	1353	1667	1218
	15,000	766	1085	874	1879	1373	1692	1236
	25,000	777	1100	886	1904	1391	1715	1253
	35,000	783	1109	893	1921	1403	1729	1263
	50,000	790	1119	901	1938	1416	1745	1275
	100,000	804	1139	918	1973	1442	1776	1298
	250,000	810	1147	924	1986	1451	1788	1307
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	71	100	92	189	130	170	117
	20/50	76	107	98	202	139	182	125
	25/50	105	149	137	281	193	252	174
	25/60	110	156	143	294	202	264	182
	35/80	164	232	213	438	301	394	271
	50/100	223	315	290	594	409	535	368
	100/300	390	552	507	1039	715	935	644
	250/500	685	969	891	1824	1255	1641	1130

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		27		35/80	
	20/50		28		50/100	
	25/50		29		100/300	
	25/60		30		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1200	1961	1414	3031	2101	2728	1891	1357
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	183	183	183	183	183	183	183	183
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
144	235	170	364	252	327	227	163	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 10

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	401	595	515	1036	749	932	674	420
PART 2	PERSONAL INJURY PROTECTION							
	145	210	175	293	225	264	203	136
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	473	670	566	1248	963	1123	867
	10,000	652	923	780	1720	1327	1547	1195
	15,000	661	937	791	1745	1346	1570	1212
	25,000	670	949	802	1768	1365	1591	1229
	35,000	676	957	809	1783	1376	1605	1239
	50,000	682	966	816	1800	1389	1619	1250
	100,000	694	984	831	1832	1414	1649	1273
	250,000	699	990	837	1845	1423	1660	1281
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	68	101	87	175	126	158	113
	20/50	73	108	93	187	135	169	121
	25/50	101	150	129	260	187	234	168
	25/60	106	157	135	272	196	245	176
	35/80	157	233	201	405	292	365	263
	50/100	213	317	274	550	397	496	357
	100/300	373	553	478	962	695	867	625
	250/500	654	971	840	1689	1220	1521	1097

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1170	1926	1421	3053	2372	2748	2135	1231
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	175	175	175	175	175	175	175	175
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
140	231	171	366	285	330	256	148	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

TERRITORY 11

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	PART 12
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1229	2108	1525	3214	2078	2893	1870	1199
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	196	196	196	196	196	196	196	196
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Commonwealth Automobile Reinsurers - June 1, 2020

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 12

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	454	654	539	1189	774	1070	697	475
PART 2	PERSONAL INJURY PROTECTION							
	173	234	201	342	255	308	230	157
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	558	821	636	1496	1030	1346	927
	10,000	769	1131	876	2061	1419	1855	1277
	15,000	780	1148	889	2091	1440	1882	1296
	25,000	791	1163	901	2120	1460	1907	1314
	35,000	797	1173	909	2138	1472	1923	1325
	50,000	805	1184	917	2157	1485	1941	1337
	100,000	819	1205	934	2196	1512	1976	1361
	250,000	825	1213	940	2211	1522	1989	1370
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	76	110	91	200	130	180	117
	20/50	81	118	97	214	139	193	125
	25/50	113	163	135	297	193	268	174
	25/60	118	171	141	311	202	280	182
	35/80	177	255	211	464	302	418	272
	50/100	240	347	286	631	410	568	369
	100/300	421	607	501	1103	718	993	646
	250/500	739	1065	879	1936	1260	1743	1135

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1364	2200	1685	3546	2372	3191	2135	1330
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	209	209	209	209	209	209	209	209
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
164	264	202	426	285	383	256	160	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 13

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	493	703	581	1208	819	1087	737	498
PART 2	PERSONAL INJURY PROTECTION							
	233	317	242	465	335	419	302	210
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	541	757	602	1349	976	1214	878
	10,000	745	1043	830	1859	1345	1673	1210
	15,000	756	1058	842	1886	1364	1697	1227
	25,000	767	1073	853	1912	1383	1720	1244
	35,000	773	1082	860	1928	1395	1735	1255
	50,000	780	1092	868	1945	1407	1751	1266
	100,000	794	1111	884	1980	1433	1782	1289
	250,000	800	1119	890	1994	1443	1794	1298
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	82	119	97	203	138	183	124
	20/50	88	127	104	217	148	196	133
	25/50	122	177	144	302	205	272	184
	25/60	128	185	151	316	215	285	193
	35/80	191	275	226	471	320	424	288
	50/100	260	374	307	640	435	577	391
	100/300	456	653	538	1120	760	1009	684
	250/500	801	1147	945	1967	1334	1771	1200

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1341	1974	1562	3348	2271	3013	2044	1381
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	227	227	227	227	227	227	227	227
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
161	237	187	402	273	362	245	166	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

TERRITORY 14

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1560	2412	1889	4042	2620	3638	2358	1571
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	203	203	203	203	203	203	203	203
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Commonwealth Automobile Reinsurers - June 1, 2020

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 15

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	590	865	711	1331	1000	1198	900	681
PART 2	PERSONAL INJURY PROTECTION							
	231	324	258	446	354	401	319	210
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	629	921	693	1486	1082	1337	974
	10,000	867	1269	955	2048	1491	1842	1342
	15,000	879	1288	969	2077	1513	1869	1362
	25,000	891	1305	982	2106	1533	1895	1380
	35,000	899	1316	990	2123	1546	1911	1392
	50,000	907	1328	999	2143	1560	1928	1405
	100,000	923	1352	1017	2181	1588	1963	1430
	250,000	930	1361	1024	2196	1599	1976	1440
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	99	145	119	223	168	201	151
	20/50	106	155	127	239	180	215	162
	25/50	147	216	177	332	250	299	225
	25/60	154	226	185	347	261	313	235
	35/80	230	337	277	518	390	467	351
	50/100	313	458	376	705	530	635	477
	100/300	547	802	659	1233	927	1110	834
	250/500	960	1408	1157	2166	1628	1950	1465

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1985	3268	2361	4934	3580	4441	3222	2156
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	260	260	260	260	260	260	260	260
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
238	392	283	592	430	533	387	259	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 16

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	571	862	711	1377	899	1239	809	588
PART 2	PERSONAL INJURY PROTECTION							
	295	424	324	570	425	513	383	267
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	579	842	677	1356	961	1220	865
	10,000	798	1160	933	1869	1324	1681	1192
	15,000	809	1177	946	1896	1343	1706	1209
	25,000	820	1193	959	1921	1362	1729	1226
	35,000	827	1203	967	1938	1373	1743	1236
	50,000	835	1214	976	1955	1386	1759	1247
	100,000	850	1236	994	1991	1411	1791	1270
	250,000	856	1244	1001	2004	1420	1803	1278
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	96	145	120	232	151	209	136
	20/50	103	155	128	248	162	223	145
	25/50	143	215	178	345	225	310	202
	25/60	149	226	186	361	235	325	212
	35/80	223	336	278	538	351	484	316
	50/100	303	457	378	731	477	658	429
	100/300	530	800	660	1278	834	1150	750
	250/500	930	1404	1159	2243	1464	2019	1317

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1625	2657	1926	4120	2823	3708	2541	1711
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	314	314	314	314	314	314	314	314
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
195	319	231	494	339	445	305	205	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

TERRITORY 17

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1588	2764	2349	3715	2835	3344	2552	1601
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	199	199	199	199	199	199	199	199
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11		
Cost to Reduce Deductible from \$500 to \$300	All Classes.....	\$16
Cost to Reduce Deductible from \$500 to \$0	All Classes.....	\$29

Commonwealth Automobile Reinsurers - June 1, 2020

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 18

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	660	1020	738	1653	1125	1488	1013	744	
PART 2	PERSONAL INJURY PROTECTION								
	312	444	318	610	450	549	405	309	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	597	888	653	1502	1116	1352	1004	642
	10,000	823	1224	900	2070	1538	1863	1384	885
	15,000	835	1241	913	2100	1560	1890	1404	898
	25,000	846	1258	925	2128	1581	1916	1423	910
	35,000	853	1269	933	2146	1595	1932	1435	917
	50,000	861	1280	942	2166	1609	1950	1448	926
	100,000	876	1304	959	2205	1638	1985	1474	942
	250,000	882	1312	965	2220	1649	1998	1484	949
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	111	171	124	278	190	250	171	125
	20/50	119	183	133	297	203	267	183	134
	25/50	165	254	184	413	282	372	254	186
	25/60	173	266	193	432	295	389	266	195
	35/80	257	397	288	645	440	580	396	290
	50/100	350	540	391	877	598	789	538	394
	100/300	612	945	684	1533	1045	1380	941	690
	250/500	1075	1660	1202	2692	1834	2423	1651	1211

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		27		35/80	
	20/50		28		50/100	
	25/50		29		100/300	
	25/60		30		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1443	2817	1780	4049	2623	3644	2361	1622
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	271	271	271	271	271	271	271	271
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
173	338	214	486	315	437	283	195	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 19

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	597	861	842	1547	1052	1392	947	575
PART 2	PERSONAL INJURY PROTECTION							
	251	336	295	505	418	455	376	225
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	547	739	738	1343	952	1209	857
	10,000	754	1018	1017	1851	1312	1666	1181
	15,000	765	1033	1032	1878	1331	1690	1198
	25,000	775	1047	1046	1903	1349	1713	1214
	35,000	782	1056	1055	1919	1360	1728	1225
	50,000	789	1066	1064	1937	1373	1743	1236
	100,000	803	1085	1083	1972	1398	1775	1258
	250,000	808	1092	1091	1985	1407	1787	1267
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	101	145	141	260	177	234	159
	20/50	108	155	151	278	189	250	170
	25/50	150	215	210	386	263	348	236
	25/60	157	225	220	405	275	364	247
	35/80	234	336	328	603	411	543	369
	50/100	317	457	446	820	558	738	502
	100/300	555	799	780	1435	976	1291	878
	250/500	974	1403	1370	2519	1713	2267	1542

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1531	2362	2267	3833	2471	3450	2224	1493
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	268	268	268	268	268	268	268	268
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
184	283	272	460	297	414	267	179	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 20

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	692	1037	867	1471	1155	1324	1040	812
PART 2	PERSONAL INJURY PROTECTION							
	332	480	399	675	547	608	492	301
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	600	879	731	1560	1048	1404	652
	10,000	827	1211	1007	2150	1444	1935	898
	15,000	839	1229	1022	2181	1465	1963	911
	25,000	850	1246	1036	2211	1485	1989	924
	35,000	857	1256	1045	2229	1498	2006	932
	50,000	865	1268	1054	2250	1511	2025	940
	100,000	881	1290	1073	2290	1538	2061	957
	250,000	887	1299	1080	2306	1549	2075	964
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	117	174	146	247	194	222	136
	20/50	125	186	156	264	207	237	145
	25/50	174	259	217	367	288	330	202
	25/60	182	271	227	384	302	346	212
	35/80	271	404	338	573	450	516	316
	50/100	368	549	460	780	612	701	430
	100/300	643	961	804	1364	1071	1227	752
	250/500	1128	1688	1412	2395	1880	2155	1321

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1647	2651	1945	3909	2620	3518	2358	2286
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	256	256	256	256	256	256	256	256
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
198	318	233	469	314	422	283	274	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 21

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	877	1365	1081	1179	1293	1061	1164	870	
PART 2	PERSONAL INJURY PROTECTION								
	384	547	444	790	546	711	491	334	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	679	948	793	1661	1266	1495	1139	674
	10,000	936	1306	1093	2289	1745	2060	1570	929
	15,000	949	1325	1109	2322	1770	2090	1592	942
	25,000	962	1343	1124	2354	1794	2118	1614	955
	35,000	970	1355	1133	2374	1809	2136	1628	963
	50,000	979	1367	1144	2395	1826	2156	1642	972
	100,000	997	1392	1164	2438	1858	2195	1672	989
	250,000	1004	1401	1172	2455	1871	2210	1683	996
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	147	229	182	198	218	178	196	147
	20/50	157	245	195	212	233	190	210	157
	25/50	219	341	270	294	324	265	291	218
	25/60	229	357	283	308	339	277	305	228
	35/80	342	532	422	460	505	413	454	340
	50/100	464	723	574	625	686	562	618	462
	100/300	813	1265	1003	1093	1200	983	1080	808
	250/500	1427	2222	1761	1919	2107	1727	1896	1418

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	PART 12
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1910	2898	2247	4671	3414	4204	3073	1768
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	281	281	281	281	281	281	281	281
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3							

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
229	348	270	561	410	504	369	212	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 22

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	862	1258	976	1156	1027	1040	924	885	
PART 2	PERSONAL INJURY PROTECTION								
	377	528	393	731	658	658	592	336	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	672	901	855	1628	1258	1465	1132	728
	10,000	926	1242	1178	2243	1734	2019	1560	1003
	15,000	939	1260	1195	2276	1759	2048	1583	1018
	25,000	952	1277	1212	2307	1783	2076	1604	1032
	35,000	960	1288	1222	2326	1798	2093	1618	1040
	50,000	969	1299	1233	2348	1814	2113	1632	1050
	100,000	986	1323	1255	2390	1847	2151	1662	1069
	250,000	993	1332	1264	2406	1859	2165	1673	1076
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	145	212	165	194	173	175	156	150
	20/50	155	227	176	208	185	187	167	160
	25/50	215	315	245	289	257	260	232	222
	25/60	226	330	256	302	269	272	242	233
	35/80	336	491	382	451	401	406	361	347
	50/100	457	668	519	613	545	552	491	471
	100/300	800	1168	907	1072	953	965	858	823
	250/500	1404	2050	1591	1882	1673	1694	1506	1444

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1742	2733	2072	4181	2919	3763	2627	1718
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	285	285	285	285	285	285	285	285
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
209	328	249	502	350	452	315	206	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 23

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	695	1009	845	1685	1106	1517	995	695
PART 2	PERSONAL INJURY PROTECTION							
	286	374	316	556	396	500	356	264
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	585	795	712	1451	1061	1306	955
	10,000	806	1096	981	1999	1462	1800	1316
	15,000	818	1111	995	2028	1483	1826	1335
	25,000	829	1127	1009	2056	1503	1851	1353
	35,000	836	1136	1017	2073	1516	1866	1365
	50,000	844	1146	1027	2092	1530	1883	1377
	100,000	859	1167	1045	2130	1558	1917	1402
	250,000	865	1175	1052	2145	1568	1930	1411
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	117	170	143	282	185	254	167
	20/50	125	182	153	302	198	272	179
	25/50	174	253	212	420	275	378	248
	25/60	182	264	222	439	288	396	260
	35/80	271	394	331	656	430	590	388
	50/100	369	535	449	892	585	803	527
	100/300	645	936	785	1561	1024	1405	922
	250/500	1132	1644	1378	2741	1799	2468	1620

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1666	2548	2081	4003	2711	3603	2440	1620
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	249	249	249	249	249	249	249	249
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
200	306	250	480	325	432	293	194	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 24

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	474	681	663	1353	785	1218	707	506
PART 2	PERSONAL INJURY PROTECTION							
	187	255	213	385	282	347	254	187
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	582	822	782	1540	1041	1386	937
	10,000	802	1133	1078	2122	1434	1910	1291
	15,000	814	1149	1093	2153	1455	1938	1310
	25,000	825	1165	1108	2182	1475	1964	1328
	35,000	832	1175	1117	2201	1488	1981	1339
	50,000	839	1185	1128	2221	1501	1999	1351
	100,000	854	1207	1148	2261	1528	2035	1376
	250,000	860	1215	1156	2276	1539	2049	1385
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	79	114	112	228	132	205	119
	20/50	85	122	120	244	141	219	127
	25/50	118	170	166	339	196	305	177
	25/60	123	178	174	354	205	319	185
	35/80	184	265	259	528	306	475	276
	50/100	250	360	352	718	416	646	375
	100/300	438	631	616	1256	728	1130	656
	250/500	770	1108	1081	2204	1278	1984	1152

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1524	2427	1850	3997	2728	3597	2455	1588
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	168	168	168	168	168	168	168	168
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
183	291	222	480	327	432	295	191	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 25

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	519	813	620	1370	875	1233	788	641
PART 2	PERSONAL INJURY PROTECTION							
	232	335	308	509	333	458	300	245
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	611	871	665	1555	1151	1400	1036
	10,000	842	1200	916	2143	1586	1929	1428
	15,000	854	1218	930	2174	1609	1957	1448
	25,000	866	1234	942	2203	1631	1984	1468
	35,000	873	1245	950	2222	1645	2001	1480
	50,000	881	1256	959	2242	1660	2019	1494
	100,000	897	1279	976	2283	1690	2055	1521
	250,000	903	1287	983	2298	1701	2069	1531
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	88	136	104	230	147	207	132
	20/50	94	145	111	246	157	221	141
	25/50	130	202	155	342	219	308	196
	25/60	137	212	162	358	229	322	206
	35/80	203	316	242	534	341	481	307
	50/100	276	430	328	726	464	653	417
	100/300	483	753	575	1270	811	1143	730
	250/500	847	1322	1009	2230	1425	2007	1282

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1446	2371	1859	3523	2339	3171	2105	1491
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	251	251	251	251	251	251	251	251
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
174	285	223	423	281	381	253	179	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 26

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	564	898	664	1178	996	1060	896	620
PART 2	PERSONAL INJURY PROTECTION							
	246	343	274	472	358	425	322	236
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	615	906	715	1665	1090	1499	590
	10,000	847	1248	985	2294	1502	2066	813
	15,000	860	1267	1000	2328	1524	2096	825
	25,000	871	1284	1013	2359	1545	2124	836
	35,000	879	1295	1022	2379	1558	2142	843
	50,000	887	1306	1031	2401	1572	2162	851
	100,000	903	1330	1050	2444	1600	2201	866
	250,000	909	1339	1057	2461	1611	2216	872
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	95	151	112	198	167	178	105
	20/50	102	161	120	212	179	190	112
	25/50	141	224	166	294	248	265	156
	25/60	148	235	174	308	260	277	163
	35/80	220	350	259	459	388	413	243
	50/100	299	476	353	625	528	562	330
	100/300	523	833	616	1092	923	983	576
	250/500	919	1462	1082	1918	1621	1726	1011

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1932	3159	2523	4737	3171	4263	2854	2007
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	363	363	363	363	363	363	363	363
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
232	379	303	568	381	512	342	241	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 27

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	225	331	298	556	396	500	356	230
PART 2	PERSONAL INJURY PROTECTION							
	66	102	91	141	99	127	89	77
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	360	506	446	919	688	827	619
	10,000	496	697	615	1266	948	1140	853
	15,000	503	707	624	1285	962	1156	865
	25,000	510	717	632	1302	975	1172	877
	35,000	514	723	637	1313	983	1182	885
	50,000	519	730	643	1325	992	1193	893
	100,000	528	743	655	1349	1010	1214	909
	250,000	532	748	659	1358	1017	1222	915
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	38	55	50	94	67	85	60
	20/50	41	59	53	101	72	91	64
	25/50	56	82	74	140	99	126	89
	25/60	59	86	78	146	104	132	93
	35/80	88	128	116	218	155	196	139
	50/100	120	175	158	296	211	266	189
	100/300	209	306	276	517	368	465	330
	250/500	367	538	485	907	646	816	580

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		27		33	
	20/50		28		37	
	25/50		29		45	
	25/60		30		53	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	894	1555	1073	2393	1603	2154	1443	902
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	142	142	142	142	142	142	142	142
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$1								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
107	187	129	287	192	258	173	108	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 40

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	628	826	780	1474	1112	1327	1001	531
PART 2	PERSONAL INJURY PROTECTION							
	315	385	444	630	524	567	472	249
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	433	561	537	1083	788	975	709
	10,000	597	773	740	1492	1086	1344	977
	15,000	605	784	751	1514	1102	1363	991
	25,000	614	795	761	1535	1117	1382	1005
	35,000	619	802	767	1548	1126	1393	1013
	50,000	624	809	774	1562	1136	1406	1022
	100,000	636	824	788	1590	1157	1431	1041
	250,000	640	829	794	1601	1165	1441	1048
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	105	139	132	248	187	223	168
	20/50	112	149	141	265	200	239	180
	25/50	156	207	196	369	278	332	250
	25/60	164	216	205	386	291	347	262
	35/80	244	322	305	575	434	518	390
	50/100	332	438	415	782	590	704	530
	100/300	581	766	725	1367	1031	1231	928
	250/500	1021	1345	1272	2401	1811	2161	1629
								864

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		27		35/80	
	20/50		28		50/100	
	25/50		29		100/300	
25/60		30		250/500		81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1101	1696	1405	2691	2337	2422	2103	1047
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	257	257	257	257	257	257	257	257
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
132	204	169	323	280	291	252	126	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 41

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	463	692	573	1156	833	1040	750	520
PART 2	PERSONAL INJURY PROTECTION							
	218	312	230	426	318	383	286	227
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	453	678	532	1142	828	1028	745
	10,000	624	934	733	1574	1141	1417	1027
	15,000	633	948	744	1597	1158	1437	1042
	25,000	642	961	754	1618	1173	1457	1056
	35,000	647	969	760	1632	1183	1469	1065
	50,000	653	978	767	1647	1194	1482	1074
	100,000	665	995	781	1676	1216	1509	1094
	250,000	670	1002	786	1688	1224	1519	1101
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	77	117	97	194	140	175	126
	20/50	82	125	104	208	150	187	135
	25/50	115	174	144	289	208	260	187
	25/60	120	182	151	302	218	272	196
	35/80	180	271	224	451	325	406	292
	50/100	244	368	305	613	442	552	398
	100/300	428	643	533	1072	772	965	695
	250/500	752	1128	935	1882	1356	1694	1221
	846							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1088	1718	1391	2668	2020	2401	1818	1145
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	165	165	165	165	165	165	165	165
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
131	206	167	320	242	288	218	137	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 42

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	748	1054	884	1350	1226	1215	1103	736
PART 2	PERSONAL INJURY PROTECTION							
	379	489	427	771	490	694	441	330
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	471	642	535	1187	815	1068	734
	10,000	649	885	737	1636	1123	1472	1011
	15,000	658	898	748	1659	1139	1493	1026
	25,000	667	910	758	1682	1155	1513	1040
	35,000	673	917	765	1696	1165	1526	1049
	50,000	679	926	771	1712	1175	1540	1058
	100,000	691	942	785	1743	1196	1568	1078
	250,000	696	949	791	1754	1205	1579	1085
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	125	178	149	227	206	204	185
	20/50	134	190	159	243	220	218	198
	25/50	186	264	221	337	306	303	275
	25/60	195	277	232	353	321	318	288
	35/80	291	412	345	527	478	474	430
	50/100	396	560	469	716	650	644	584
	100/300	692	979	820	1252	1137	1126	1022
	250/500	1216	1718	1440	2198	1996	1978	1795

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1134	1741	1371	3169	1823	2852	1641	1109
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	235	235	235	235	235	235	235	235
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
136	209	165	380	219	342	197	133	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

TERRITORY 43

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1507	2391	1830	3809	3070	3428	2763	1449
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	297	297	297	297	297	297	297	297
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Commonwealth Automobile Reinsurers - June 1, 2020

TERRITORY 44

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	27	0	35/80	33	4
	20/50	28	0	50/100	37	7
	25/50	29	1	100/300	45	21
	25/60	30	1	250/500	53	81

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1188	1917	1485	2853	1988	2568	1789	1215
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	238	238	238	238	238	238	238	238
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11		
Cost to Reduce Deductible from \$500 to \$300	All Classes.....	\$16
Cost to Reduce Deductible from \$500 to \$0	All Classes.....	\$29

Commonwealth Automobile Reinsurers - June 1, 2020

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 45

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	823	1212	948	1113	1169	1002	1052	870
PART 2	PERSONAL INJURY PROTECTION							
	426	595	460	917	639	825	575	382
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	638	862	724	1620	1301	1458	1171
	10,000	879	1188	998	2232	1793	2009	1614
	15,000	892	1205	1012	2265	1819	2038	1637
	25,000	904	1221	1026	2296	1844	2066	1659
	35,000	912	1232	1035	2315	1859	2083	1673
	50,000	920	1243	1044	2336	1876	2102	1689
	100,000	937	1265	1063	2378	1910	2140	1719
	250,000	943	1274	1070	2394	1923	2155	1731
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	139	204	159	187	197	168	177
	20/50	149	218	170	200	211	180	189
	25/50	206	303	236	278	293	250	263
	25/60	216	317	248	291	306	262	275
	35/80	322	473	369	434	457	390	411
	50/100	437	643	502	590	620	531	558
	100/300	764	1124	879	1032	1085	929	976
	250/500	1342	1974	1543	1812	1905	1631	1713
	1418							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	37	56	72	79	88

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		27		35/80	
	20/50		28		50/100	
	25/50		29		100/300	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1643	2772	1976	4122	3064	3710	2758	1807
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	317	317	317	317	317	317	317	317
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
197	333	237	495	368	445	331	217	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

Model Year/VRG Relativities

COLLISION

	Model Year															2006 & Prior
VRG	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010	2009	2008	2007	
11	0.746	0.710	0.675	0.639	0.604	0.568	0.533	0.497	0.462	0.426	0.391	0.355	0.332	0.310	0.289	0.270
12	0.771	0.734	0.697	0.661	0.624	0.587	0.551	0.514	0.477	0.440	0.404	0.367	0.343	0.320	0.299	0.279
13	0.797	0.759	0.721	0.683	0.645	0.607	0.569	0.531	0.493	0.455	0.417	0.380	0.354	0.331	0.309	0.288
14	0.825	0.786	0.747	0.707	0.668	0.629	0.590	0.550	0.511	0.472	0.432	0.393	0.367	0.343	0.320	0.299
15	0.855	0.814	0.773	0.733	0.692	0.651	0.611	0.570	0.529	0.488	0.448	0.407	0.380	0.355	0.331	0.309
16	0.884	0.842	0.800	0.758	0.716	0.674	0.632	0.589	0.547	0.505	0.463	0.421	0.393	0.367	0.343	0.320
17	0.915	0.871	0.827	0.784	0.740	0.697	0.653	0.610	0.566	0.523	0.479	0.436	0.407	0.380	0.354	0.331
18	0.947	0.902	0.857	0.812	0.767	0.722	0.677	0.631	0.586	0.541	0.496	0.451	0.421	0.393	0.367	0.343
19	0.981	0.934	0.887	0.841	0.794	0.747	0.701	0.654	0.607	0.560	0.514	0.467	0.436	0.407	0.380	0.355
20	1.014	0.966	0.918	0.869	0.821	0.773	0.725	0.676	0.628	0.580	0.531	0.483	0.451	0.421	0.393	0.367
21	1.050	1.000	0.950	0.900	0.850	0.800	0.750	0.700	0.650	0.600	0.550	0.500	0.467	0.436	0.407	0.380
22	1.087	1.035	0.983	0.932	0.880	0.828	0.776	0.725	0.673	0.621	0.569	0.518	0.483	0.451	0.421	0.393
23	1.125	1.071	1.017	0.964	0.910	0.857	0.803	0.750	0.696	0.643	0.589	0.536	0.500	0.467	0.436	0.407
24	1.164	1.109	1.054	0.998	0.943	0.887	0.832	0.776	0.721	0.665	0.610	0.555	0.518	0.484	0.451	0.421
25	1.205	1.148	1.091	1.033	0.976	0.918	0.861	0.804	0.746	0.689	0.631	0.574	0.536	0.501	0.467	0.436
26	1.247	1.188	1.129	1.069	1.010	0.950	0.891	0.832	0.772	0.713	0.653	0.594	0.555	0.518	0.484	0.451
27	1.292	1.230	1.169	1.107	1.046	0.984	0.923	0.861	0.800	0.738	0.677	0.615	0.574	0.536	0.501	0.467
28	1.337	1.273	1.209	1.146	1.082	1.018	0.955	0.891	0.827	0.764	0.700	0.637	0.594	0.555	0.518	0.484
29	1.383	1.317	1.251	1.185	1.119	1.054	0.988	0.922	0.856	0.790	0.724	0.659	0.615	0.574	0.536	0.500
30	1.431	1.363	1.295	1.227	1.159	1.090	1.022	0.954	0.886	0.818	0.750	0.682	0.637	0.594	0.555	0.518
31	1.481	1.410	1.340	1.269	1.199	1.128	1.058	0.987	0.917	0.846	0.776	0.705	0.658	0.615	0.574	0.536
32	1.534	1.461	1.388	1.315	1.242	1.169	1.096	1.023	0.950	0.877	0.804	0.731	0.682	0.637	0.595	0.555
33	1.587	1.511	1.435	1.360	1.284	1.209	1.133	1.058	0.982	0.907	0.831	0.756	0.706	0.659	0.615	0.574
34	1.642	1.564	1.486	1.408	1.329	1.251	1.173	1.095	1.017	0.938	0.860	0.782	0.730	0.682	0.637	0.594
35	1.700	1.619	1.538	1.457	1.376	1.295	1.214	1.133	1.052	0.971	0.890	0.810	0.756	0.706	0.659	0.615
36	1.760	1.676	1.592	1.508	1.425	1.341	1.257	1.173	1.089	1.006	0.922	0.838	0.783	0.731	0.682	0.637
37	1.821	1.734	1.647	1.561	1.474	1.387	1.301	1.214	1.127	1.040	0.954	0.867	0.810	0.756	0.706	0.659
38	1.886	1.796	1.706	1.616	1.527	1.437	1.347	1.257	1.167	1.078	0.988	0.898	0.839	0.783	0.731	0.682
39	1.952	1.859	1.766	1.673	1.580	1.487	1.394	1.301	1.208	1.115	1.022	0.930	0.868	0.811	0.757	0.706
40	2.019	1.923	1.827	1.731	1.635	1.538	1.442	1.346	1.250	1.154	1.058	0.962	0.898	0.838	0.783	0.731
41	2.090	1.990	1.891	1.791	1.692	1.592	1.493	1.393	1.294	1.194	1.095	0.995	0.929	0.868	0.810	0.756
42	2.163	2.060	1.957	1.854	1.751	1.648	1.545	1.442	1.339	1.236	1.133	1.030	0.962	0.898	0.838	0.783
43	2.239	2.132	2.025	1.919	1.812	1.706	1.599	1.492	1.386	1.279	1.173	1.066	0.996	0.930	0.868	0.810
44	2.317	2.207	2.097	1.986	1.876	1.766	1.655	1.545	1.435	1.324	1.214	1.104	1.031	0.962	0.898	0.839
45	2.398	2.284	2.170	2.056	1.941	1.827	1.713	1.599	1.485	1.370	1.256	1.142	1.067	0.996	0.930	0.868
46	2.482	2.364	2.246	2.128	2.009	1.891	1.773	1.655	1.537	1.418	1.300	1.182	1.104	1.031	0.962	0.898
47	2.569	2.447	2.325	2.202	2.080	1.958	1.835	1.713	1.591	1.468	1.346	1.224	1.143	1.067	0.996	0.930
48	2.659	2.532	2.405	2.279	2.152	2.026	1.899	1.772	1.646	1.519	1.393	1.266	1.182	1.104	1.031	0.962
49	2.751	2.620	2.489	2.358	2.227	2.096	1.965	1.834	1.703	1.572	1.441	1.310	1.224	1.142	1.066	0.996
50	2.847	2.711	2.575	2.440	2.304	2.169	2.033	1.898	1.762	1.627	1.491	1.356	1.266	1.182	1.103	1.030

For the calculation of Rate Relativities for VRG 50, refer to Rule 22 E.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

Model Year/VRG Relativities

COMPREHENSIVE

VRG	Model Year															2006 & Prior
	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010	2009	2008	2007	
11	0.636	0.620	0.599	0.578	0.559	0.540	0.522	0.505	0.487	0.471	0.454	0.439	0.424	0.410	0.396	0.383
12	0.667	0.651	0.629	0.607	0.587	0.567	0.548	0.530	0.512	0.494	0.477	0.461	0.445	0.430	0.416	0.402
13	0.699	0.682	0.659	0.636	0.614	0.594	0.574	0.555	0.536	0.518	0.500	0.483	0.466	0.451	0.436	0.421
14	0.734	0.716	0.692	0.668	0.645	0.624	0.603	0.583	0.563	0.543	0.525	0.507	0.490	0.473	0.458	0.442
15	0.770	0.751	0.725	0.701	0.677	0.654	0.632	0.611	0.590	0.570	0.550	0.532	0.514	0.496	0.480	0.463
16	0.808	0.788	0.761	0.735	0.710	0.686	0.663	0.641	0.619	0.598	0.578	0.558	0.539	0.521	0.504	0.486
17	0.847	0.826	0.798	0.771	0.744	0.719	0.695	0.672	0.649	0.627	0.605	0.585	0.565	0.546	0.528	0.510
18	0.889	0.867	0.838	0.809	0.781	0.755	0.730	0.706	0.681	0.658	0.636	0.614	0.593	0.573	0.554	0.535
19	0.931	0.908	0.877	0.847	0.818	0.791	0.765	0.739	0.714	0.689	0.666	0.643	0.621	0.600	0.580	0.560
20	0.978	0.954	0.922	0.890	0.860	0.831	0.803	0.777	0.750	0.724	0.699	0.675	0.653	0.631	0.610	0.589
21	1.025	1.000	0.966	0.933	0.901	0.871	0.842	0.814	0.786	0.759	0.733	0.708	0.684	0.661	0.639	0.617
22	1.075	1.049	1.013	0.979	0.945	0.914	0.883	0.854	0.825	0.796	0.769	0.743	0.718	0.693	0.670	0.647
23	1.129	1.101	1.064	1.027	0.992	0.959	0.927	0.896	0.865	0.836	0.807	0.780	0.753	0.728	0.704	0.679
24	1.183	1.154	1.115	1.077	1.040	1.005	0.972	0.939	0.907	0.876	0.846	0.817	0.789	0.763	0.737	0.712
25	1.240	1.210	1.169	1.129	1.090	1.054	1.019	0.985	0.951	0.918	0.887	0.857	0.828	0.800	0.773	0.747
26	1.301	1.269	1.226	1.184	1.143	1.105	1.068	1.033	0.997	0.963	0.930	0.898	0.868	0.839	0.811	0.783
27	1.364	1.331	1.286	1.242	1.199	1.159	1.121	1.083	1.046	1.010	0.976	0.942	0.910	0.880	0.851	0.821
28	1.430	1.395	1.348	1.302	1.257	1.215	1.175	1.136	1.096	1.059	1.023	0.988	0.954	0.922	0.891	0.861
29	1.500	1.463	1.413	1.365	1.318	1.274	1.232	1.191	1.150	1.110	1.072	1.036	1.001	0.967	0.935	0.903
30	1.574	1.536	1.484	1.433	1.384	1.338	1.293	1.250	1.207	1.166	1.126	1.087	1.051	1.015	0.982	0.948
31	1.650	1.610	1.555	1.502	1.451	1.402	1.356	1.311	1.265	1.222	1.180	1.140	1.101	1.064	1.029	0.993
32	1.731	1.689	1.632	1.576	1.522	1.471	1.422	1.375	1.328	1.282	1.238	1.196	1.155	1.116	1.079	1.042
33	1.815	1.771	1.711	1.652	1.596	1.543	1.491	1.442	1.392	1.344	1.298	1.254	1.211	1.171	1.132	1.093
34	1.904	1.858	1.795	1.734	1.674	1.618	1.564	1.512	1.460	1.410	1.362	1.315	1.271	1.228	1.187	1.146
35	1.997	1.948	1.882	1.817	1.755	1.697	1.640	1.586	1.531	1.479	1.428	1.379	1.332	1.288	1.245	1.202
36	2.094	2.043	1.974	1.906	1.841	1.779	1.720	1.663	1.606	1.551	1.498	1.446	1.397	1.350	1.305	1.261
37	2.198	2.144	2.071	2.000	1.932	1.867	1.805	1.745	1.685	1.627	1.572	1.518	1.466	1.417	1.370	1.323
38	2.303	2.247	2.171	2.096	2.025	1.957	1.892	1.829	1.766	1.705	1.647	1.591	1.537	1.485	1.436	1.386
39	2.416	2.357	2.277	2.199	2.124	2.053	1.985	1.919	1.853	1.789	1.728	1.669	1.612	1.558	1.506	1.454
40	2.533	2.471	2.387	2.305	2.226	2.152	2.081	2.011	1.942	1.875	1.811	1.749	1.690	1.633	1.579	1.525
41	2.657	2.592	2.504	2.418	2.335	2.258	2.182	2.110	2.037	1.967	1.900	1.835	1.773	1.713	1.656	1.599
42	2.787	2.719	2.627	2.537	2.450	2.368	2.289	2.213	2.137	2.064	1.993	1.925	1.860	1.797	1.737	1.678
43	2.922	2.851	2.754	2.660	2.569	2.483	2.401	2.321	2.241	2.164	2.090	2.019	1.950	1.885	1.822	1.759
44	3.065	2.990	2.888	2.790	2.694	2.604	2.518	2.434	2.350	2.269	2.192	2.117	2.045	1.976	1.911	1.845
45	3.214	3.136	3.029	2.926	2.826	2.731	2.641	2.553	2.465	2.380	2.299	2.220	2.145	2.073	2.004	1.935
46	3.371	3.289	3.177	3.069	2.963	2.865	2.769	2.677	2.585	2.496	2.411	2.329	2.250	2.174	2.102	2.029
47	3.536	3.450	3.333	3.219	3.108	3.005	2.905	2.808	2.712	2.619	2.529	2.443	2.360	2.280	2.205	2.129
48	3.708	3.618	3.495	3.376	3.260	3.151	3.046	2.945	2.844	2.746	2.652	2.562	2.475	2.391	2.312	2.232
49	3.889	3.794	3.665	3.540	3.418	3.305	3.195	3.088	2.982	2.880	2.781	2.686	2.595	2.508	2.424	2.341
50	4.080	3.980	3.845	3.713	3.586	3.467	3.351	3.240	3.128	3.021	2.917	2.818	2.722	2.631	2.543	2.456

For the calculation of Rate Relativities for VRG 50, refer to Rule 22 E.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

VRG ASSIGNMENT BY PRICE LIST (RULE 22)

RULE 22	COLLISION				COMPREHENSIVE	
	Vans/Wagons/Pickups		All Other Vehicles		All Vehicles	
	VRG	Base List Price	VRG	Base List Price	VRG	Base List Price
	11	\$0 - \$8,000	11	\$0 - \$7,000	11	\$0 - \$7,000
	12	\$8,001 - \$9,000	12	\$7,001 - \$7,500	12	\$7,001 - \$8,000
	13	\$9,001 - \$10,000	13	\$7,501 - \$8,000	13	\$8,001 - \$9,000
	14	\$10,001 - \$11,000	14	\$8,001 - \$8,500	14	\$9,001 - \$10,000
	15	\$11,001 - \$12,000	15	\$8,501 - \$9,000	15	\$10,001 - \$11,000
	16	\$12,001 - \$13,000	16	\$9,001 - \$9,500	16	\$11,001 - \$12,000
	17	\$13,001 - \$14,000	17	\$9,501 - \$10,000	17	\$12,001 - \$13,000
	18	\$14,001 - \$16,000	18	\$10,001 - \$10,500	18	\$13,001 - \$14,000
	19	\$16,001 - \$18,000	19	\$10,501 - \$11,000	19	\$14,001 - \$15,000
	20	\$18,001 - \$20,000	20	\$11,001 - \$11,500	20	\$15,001 - \$16,000
	21	\$20,001 - \$23,000	21	\$11,501 - \$12,000	21	\$16,001 - \$17,000
	22	\$23,001 - \$26,000	22	\$12,001 - \$13,500	22	\$17,001 - \$18,000
	23	\$26,001 - \$29,000	23	\$13,501 - \$15,000	23	\$18,001 - \$19,000
	24	\$29,001 - \$33,000	24	\$15,001 - \$17,500	24	\$19,001 - \$20,000
	25	\$33,001 - \$37,000	25	\$17,501 - \$20,000	25	\$20,001 - \$22,500
	26	\$37,001 - \$41,000	26	\$20,001 - \$22,500	26	\$22,501 - \$25,000
	27	\$41,001 - \$45,000	27	\$22,501 - \$25,000	27	\$25,001 - \$27,500
	28	\$45,001 - \$49,000	28	\$25,001 - \$27,500	28	\$27,501 - \$30,000
	29	\$49,001 - \$53,000	29	\$27,501 - \$30,000	29	\$30,001 - \$32,500
	30	\$53,001 - \$57,000	30	\$30,001 - \$33,000	30	\$32,501 - \$35,000
	31	\$57,001 - \$61,000	31	\$33,001 - \$36,000	31	\$35,001 - \$37,000
	32	\$61,001 - \$65,000	32	\$36,001 - \$39,000	32	\$37,001 - \$39,000
	33	\$65,001 - \$70,000	33	\$39,001 - \$42,000	33	\$39,001 - \$41,000
	34	\$70,001 - \$75,000	34	\$42,001 - \$45,000	34	\$41,001 - \$43,000
	35	\$75,001 - \$80,000	35	\$45,001 - \$48,000	35	\$43,001 - \$45,000
	36	\$80,001 - \$84,000	36	\$48,001 - \$52,000	36	\$45,001 - \$47,000
	37	\$84,001 - \$88,000	37	\$52,001 - \$56,000	37	\$47,001 - \$49,000
	38	\$88,001 - \$92,000	38	\$56,001 - \$60,000	38	\$49,001 - \$51,000
	39	\$92,001 - \$96,000	39	\$60,001 - \$64,000	39	\$51,001 - \$53,000
	40	\$96,001 - \$100,000	40	\$64,001 - \$68,000	40	\$53,001 - \$55,000
	41	\$100,001 - \$104,000	41	\$68,001 - \$72,000	41	\$55,001 - \$57,000
	42	\$104,001 - \$108,000	42	\$72,001 - \$76,000	42	\$57,001 - \$59,000
	43	\$108,001 - \$112,000	43	\$76,001 - \$80,000	43	\$59,001 - \$61,000
	44	\$112,001 - \$116,000	44	\$80,001 - \$84,000	44	\$61,001 - \$63,000
	45	\$116,001 - \$120,000	45	\$84,001 - \$88,000	45	\$63,001 - \$65,000
	46	\$120,001 - \$125,000	46	\$88,001 - \$92,000	46	\$65,001 - \$67,000
	47	\$125,001 - \$130,000	47	\$92,001 - \$96,000	47	\$67,001 - \$69,000
	48	\$130,001 - \$135,000	48	\$96,001 - \$100,000	48	\$69,001 - \$71,000
	49	\$135,001 - \$140,000	49	\$100,001 - \$105,000	49	\$71,001 - \$73,000
	50	\$140,001 - \$145,000	50	\$105,001 - \$110,000	50	\$73,001 - \$75,000
VRG 50	Factor 0.020	Maximum Price \$145,000	Factor 0.025	Maximum Price \$110,000	Factor 0.035	Maximum Price \$75,000

For VRG 50 relativities:

- 1) Subtract the Maximum Price above from the Base List Price and divide by \$1000.
- 2) Multiply the amount in Step 1 by the factor above.
- 3) The adjusted VRG relativity is determined by adding the amount from Step 2 to the unadjusted VRG 50 rate relativity.

STATED AMOUNT DIVISORS

COLLISION				COMPREHENSIVE	
Vans/Wagons/Pickups		All Other Vehicles		All Vehicles	
<u>VRG</u>	<u>Divisor</u>	<u>VRG</u>	<u>Divisor</u>	<u>VRG</u>	<u>Divisor</u>
11	\$4,000	11	\$3,500	11	\$3,500
12	\$8,500	12	\$7,250	12	\$7,500
13	\$9,500	13	\$7,750	13	\$8,500
14	\$10,500	14	\$8,250	14	\$9,500
15	\$11,500	15	\$8,750	15	\$10,500
16	\$12,500	16	\$9,250	16	\$11,500
17	\$13,500	17	\$9,750	17	\$12,500
18	\$15,000	18	\$10,250	18	\$13,500
19	\$17,000	19	\$10,750	19	\$14,500
20	\$19,000	20	\$11,250	20	\$15,500
21	\$21,500	21	\$11,750	21	\$16,500
22	\$24,500	22	\$12,750	22	\$17,500
23	\$27,500	23	\$14,250	23	\$18,500
24	\$31,000	24	\$16,250	24	\$19,500
25	\$35,000	25	\$18,750	25	\$21,250
26	\$39,000	26	\$21,250	26	\$23,750
27	\$43,000	27	\$23,750	27	\$26,250
28	\$47,000	28	\$26,250	28	\$28,750
29	\$51,000	29	\$28,750	29	\$31,250
30	\$55,000	30	\$31,500	30	\$33,750
31	\$59,000	31	\$34,500	31	\$36,000
32	\$63,000	32	\$37,500	32	\$38,000
33	\$67,500	33	\$40,500	33	\$40,000
34	\$72,500	34	\$43,500	34	\$42,000
35	\$77,500	35	\$46,500	35	\$44,000
36	\$82,000	36	\$50,000	36	\$46,000
37	\$86,000	37	\$54,000	37	\$48,000
38	\$90,000	38	\$58,000	38	\$50,000
39	\$94,000	39	\$62,000	39	\$52,000
40	\$98,000	40	\$66,000	40	\$54,000
41	\$102,000	41	\$70,000	41	\$56,000
42	\$106,000	42	\$74,000	42	\$58,000
43	\$110,000	43	\$78,000	43	\$60,000
44	\$114,000	44	\$82,000	44	\$62,000
45	\$118,000	45	\$86,000	45	\$64,000
46	\$122,500	46	\$90,000	46	\$66,000
47	\$127,500	47	\$94,000	47	\$68,000
48	\$132,500	48	\$98,000	48	\$70,000
49	\$137,500	49	\$102,500	49	\$72,000
50	\$142,500	50	\$107,500	50	\$74,000

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT COMPREHENSIVE \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
11	2.69	2.53	2.91	2.80	2.94	2.85	3.13	3.56	3.33	3.18	3.56	3.80	4.12	3.69	4.72	5.71	3.62
12	1.32	1.24	1.42	1.37	1.44	1.40	1.53	1.74	1.63	1.56	1.74	1.86	2.02	1.81	2.31	2.79	1.77
13	1.22	1.14	1.32	1.27	1.33	1.29	1.41	1.61	1.50	1.44	1.61	1.72	1.87	1.67	2.14	2.58	1.64
14	1.14	1.07	1.24	1.19	1.25	1.21	1.33	1.51	1.41	1.35	1.51	1.61	1.75	1.57	2.01	2.43	1.54
15	1.09	1.02	1.17	1.13	1.19	1.15	1.26	1.44	1.34	1.28	1.44	1.53	1.66	1.49	1.91	2.30	1.46
16	1.04	0.98	1.12	1.08	1.14	1.10	1.21	1.38	1.29	1.23	1.38	1.47	1.59	1.43	1.83	2.21	1.40
17	1.00	0.94	1.08	1.04	1.10	1.06	1.17	1.33	1.24	1.19	1.33	1.42	1.54	1.38	1.76	2.13	1.35
18	0.97	0.92	1.05	1.01	1.07	1.03	1.13	1.29	1.21	1.15	1.29	1.38	1.49	1.34	1.71	2.07	1.31
19	0.95	0.89	1.03	0.99	1.04	1.01	1.10	1.26	1.17	1.12	1.26	1.34	1.46	1.30	1.67	2.02	1.28
20	0.93	0.88	1.01	0.97	1.02	0.99	1.09	1.24	1.15	1.10	1.24	1.32	1.43	1.28	1.64	1.98	1.26
21	0.92	0.86	0.99	0.96	1.01	0.98	1.07	1.22	1.14	1.09	1.22	1.30	1.41	1.26	1.62	1.95	1.24
22	0.91	0.85	0.98	0.95	1.00	0.96	1.06	1.20	1.12	1.08	1.20	1.28	1.39	1.25	1.60	1.93	1.22
23	0.90	0.85	0.98	0.94	0.99	0.96	1.05	1.20	1.12	1.07	1.20	1.28	1.39	1.24	1.59	1.92	1.21
24	0.90	0.84	0.97	0.93	0.98	0.95	1.04	1.19	1.11	1.06	1.19	1.27	1.38	1.23	1.58	1.90	1.21
25	0.86	0.81	0.93	0.90	0.95	0.92	1.00	1.14	1.07	1.02	1.14	1.22	1.32	1.18	1.52	1.83	1.16
26	0.81	0.76	0.88	0.84	0.89	0.86	0.94	1.07	1.00	0.96	1.07	1.14	1.24	1.11	1.42	1.72	1.09
27	0.77	0.72	0.83	0.80	0.84	0.82	0.89	1.02	0.95	0.91	1.02	1.09	1.18	1.05	1.35	1.63	1.03
28	0.74	0.69	0.80	0.77	0.81	0.78	0.86	0.97	0.91	0.87	0.97	1.04	1.13	1.01	1.29	1.56	0.99
29	0.71	0.67	0.77	0.74	0.78	0.75	0.83	0.94	0.88	0.84	0.94	1.00	1.09	0.97	1.25	1.51	0.96
30	0.69	0.65	0.75	0.72	0.76	0.73	0.80	0.91	0.85	0.82	0.91	0.97	1.06	0.95	1.21	1.46	0.93
31	0.68	0.64	0.73	0.71	0.74	0.72	0.79	0.90	0.84	0.80	0.90	0.96	1.04	0.93	1.19	1.44	0.91
32	0.67	0.63	0.73	0.70	0.74	0.72	0.78	0.89	0.83	0.80	0.89	0.95	1.03	0.92	1.18	1.43	0.91
33	0.67	0.63	0.73	0.70	0.74	0.71	0.78	0.89	0.83	0.79	0.89	0.95	1.03	0.92	1.18	1.42	0.90
34	0.67	0.63	0.73	0.70	0.73	0.71	0.78	0.89	0.83	0.79	0.89	0.95	1.03	0.92	1.18	1.42	0.90
35	0.67	0.63	0.73	0.70	0.74	0.71	0.78	0.89	0.83	0.79	0.89	0.95	1.03	0.92	1.18	1.43	0.90
36	0.67	0.63	0.73	0.70	0.74	0.71	0.78	0.89	0.83	0.80	0.89	0.95	1.03	0.92	1.18	1.43	0.91
37	0.68	0.64	0.73	0.71	0.74	0.72	0.79	0.90	0.84	0.80	0.90	0.96	1.04	0.93	1.19	1.44	0.91
38	0.68	0.64	0.74	0.71	0.75	0.72	0.79	0.90	0.84	0.81	0.90	0.96	1.05	0.94	1.20	1.45	0.92
39	0.69	0.65	0.74	0.72	0.75	0.73	0.80	0.91	0.85	0.81	0.91	0.97	1.05	0.94	1.21	1.46	0.92
40	0.69	0.65	0.75	0.72	0.76	0.74	0.81	0.92	0.86	0.82	0.92	0.98	1.06	0.95	1.22	1.47	0.93
41	0.70	0.66	0.76	0.73	0.77	0.74	0.82	0.93	0.87	0.83	0.93	0.99	1.08	0.96	1.23	1.49	0.94
42	0.71	0.67	0.77	0.74	0.78	0.75	0.83	0.94	0.88	0.84	0.94	1.00	1.09	0.98	1.25	1.51	0.96
43	0.72	0.68	0.78	0.75	0.79	0.76	0.84	0.95	0.89	0.85	0.95	1.02	1.11	0.99	1.27	1.53	0.97
44	0.73	0.69	0.79	0.76	0.80	0.78	0.85	0.97	0.90	0.87	0.97	1.03	1.12	1.00	1.29	1.55	0.98
45	0.74	0.70	0.80	0.77	0.81	0.79	0.86	0.98	0.92	0.88	0.98	1.05	1.14	1.02	1.31	1.58	1.00
46	0.76	0.71	0.82	0.79	0.83	0.80	0.88	1.00	0.93	0.89	1.00	1.07	1.16	1.04	1.33	1.60	1.02
47	0.77	0.72	0.83	0.80	0.84	0.82	0.89	1.02	0.95	0.91	1.02	1.09	1.18	1.06	1.35	1.63	1.03
48	0.78	0.74	0.85	0.82	0.86	0.83	0.91	1.04	0.97	0.93	1.04	1.11	1.20	1.08	1.38	1.66	1.05
49	0.80	0.75	0.86	0.83	0.88	0.85	0.93	1.06	0.99	0.95	1.06	1.13	1.23	1.10	1.40	1.70	1.07
50	0.82	0.77	0.88	0.85	0.89	0.87	0.95	1.08	1.01	0.96	1.08	1.15	1.25	1.12	1.43	1.73	1.10

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT COMPREHENSIVE \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	18	19	20	21	22	23	24	25	26	27	40	41	42	43	44	45
11	4.92	4.87	4.65	5.11	5.18	4.52	3.05	4.56	6.60	2.58	4.67	3.00	4.27	5.40	4.32	5.76
12	2.41	2.38	2.28	2.50	2.53	2.21	1.49	2.23	3.23	1.26	2.29	1.47	2.09	2.64	2.12	2.82
13	2.23	2.20	2.11	2.31	2.34	2.05	1.38	2.06	2.99	1.17	2.11	1.36	1.93	2.44	1.96	2.61
14	2.09	2.07	1.98	2.17	2.20	1.92	1.30	1.94	2.80	1.10	1.99	1.27	1.82	2.29	1.84	2.45
15	1.99	1.97	1.88	2.06	2.09	1.83	1.23	1.84	2.66	1.04	1.88	1.21	1.72	2.18	1.75	2.32
16	1.90	1.88	1.80	1.97	2.00	1.75	1.18	1.76	2.55	1.00	1.81	1.16	1.65	2.09	1.67	2.23
17	1.84	1.82	1.73	1.90	1.93	1.69	1.14	1.70	2.46	0.96	1.74	1.12	1.59	2.01	1.61	2.15
18	1.78	1.76	1.69	1.85	1.88	1.64	1.11	1.65	2.39	0.94	1.69	1.09	1.55	1.96	1.57	2.09
19	1.74	1.72	1.64	1.80	1.83	1.60	1.08	1.61	2.33	0.91	1.65	1.06	1.51	1.91	1.53	2.04
20	1.71	1.69	1.62	1.77	1.80	1.57	1.06	1.58	2.29	0.90	1.62	1.04	1.48	1.87	1.50	2.00
21	1.68	1.66	1.59	1.75	1.77	1.55	1.04	1.56	2.26	0.88	1.60	1.03	1.46	1.85	1.48	1.97
22	1.66	1.65	1.57	1.73	1.75	1.53	1.03	1.54	2.23	0.87	1.58	1.01	1.44	1.82	1.46	1.95
23	1.65	1.64	1.56	1.71	1.74	1.52	1.03	1.53	2.22	0.87	1.57	1.01	1.43	1.81	1.45	1.93
24	1.64	1.63	1.55	1.70	1.73	1.51	1.02	1.52	2.20	0.86	1.56	1.00	1.43	1.80	1.44	1.92
25	1.58	1.56	1.49	1.64	1.66	1.45	0.98	1.46	2.12	0.83	1.50	0.96	1.37	1.73	1.39	1.85
26	1.48	1.47	1.40	1.54	1.56	1.36	0.92	1.37	1.99	0.78	1.41	0.90	1.29	1.63	1.30	1.74
27	1.41	1.39	1.33	1.46	1.48	1.29	0.87	1.30	1.89	0.74	1.34	0.86	1.22	1.54	1.24	1.65
28	1.35	1.33	1.27	1.40	1.42	1.24	0.84	1.25	1.81	0.71	1.28	0.82	1.17	1.48	1.18	1.58
29	1.30	1.29	1.23	1.35	1.37	1.20	0.81	1.20	1.74	0.68	1.23	0.79	1.13	1.43	1.14	1.52
30	1.26	1.25	1.19	1.31	1.33	1.16	0.78	1.17	1.69	0.66	1.20	0.77	1.10	1.39	1.11	1.48
31	1.24	1.23	1.17	1.29	1.31	1.14	0.77	1.15	1.66	0.65	1.18	0.76	1.08	1.36	1.09	1.45
32	1.23	1.22	1.17	1.28	1.30	1.13	0.77	1.14	1.65	0.65	1.17	0.75	1.07	1.35	1.08	1.44
33	1.23	1.22	1.16	1.28	1.29	1.13	0.76	1.14	1.65	0.64	1.17	0.75	1.07	1.35	1.08	1.44
34	1.23	1.21	1.16	1.27	1.29	1.13	0.76	1.14	1.65	0.64	1.17	0.75	1.07	1.35	1.08	1.44
35	1.23	1.22	1.16	1.28	1.29	1.13	0.76	1.14	1.65	0.64	1.17	0.75	1.07	1.35	1.08	1.44
36	1.23	1.22	1.17	1.28	1.30	1.13	0.76	1.14	1.65	0.65	1.17	0.75	1.07	1.35	1.08	1.44
37	1.24	1.23	1.17	1.29	1.31	1.14	0.77	1.15	1.66	0.65	1.18	0.76	1.08	1.36	1.09	1.45
38	1.25	1.23	1.18	1.29	1.31	1.15	0.77	1.16	1.67	0.65	1.18	0.76	1.08	1.37	1.10	1.46
39	1.26	1.25	1.19	1.31	1.32	1.16	0.78	1.17	1.69	0.66	1.19	0.77	1.09	1.38	1.11	1.47
40	1.27	1.26	1.20	1.32	1.34	1.17	0.79	1.18	1.70	0.67	1.21	0.77	1.10	1.39	1.12	1.49
41	1.29	1.27	1.21	1.33	1.35	1.18	0.80	1.19	1.72	0.67	1.22	0.78	1.11	1.41	1.13	1.50
42	1.30	1.29	1.23	1.35	1.37	1.20	0.81	1.21	1.74	0.68	1.23	0.79	1.13	1.43	1.14	1.52
43	1.32	1.31	1.25	1.37	1.39	1.21	0.82	1.22	1.77	0.69	1.25	0.80	1.14	1.45	1.16	1.54
44	1.34	1.32	1.27	1.39	1.41	1.23	0.83	1.24	1.79	0.70	1.27	0.82	1.16	1.47	1.18	1.57
45	1.36	1.35	1.29	1.41	1.43	1.25	0.84	1.26	1.82	0.71	1.29	0.83	1.18	1.49	1.20	1.59
46	1.38	1.37	1.31	1.44	1.46	1.27	0.86	1.28	1.85	0.73	1.31	0.84	1.20	1.52	1.22	1.62
47	1.41	1.39	1.33	1.46	1.48	1.29	0.87	1.31	1.89	0.74	1.34	0.86	1.22	1.54	1.24	1.65
48	1.44	1.42	1.36	1.49	1.51	1.32	0.89	1.33	1.92	0.75	1.36	0.87	1.24	1.57	1.26	1.68
49	1.46	1.45	1.38	1.52	1.54	1.34	0.91	1.36	1.96	0.77	1.39	0.89	1.27	1.60	1.29	1.71
50	1.49	1.48	1.41	1.55	1.57	1.37	0.93	1.38	2.00	0.78	1.42	0.91	1.30	1.64	1.31	1.75

STATED AMOUNT FIRE \$500 DEDUCTIBLE RATES PER \$100

<u>VRG</u>	<u>All Territories</u>
11	0.37
12	0.18
13	0.17
14	0.16
15	0.15
16	0.14
17	0.14
18	0.13
19	0.13
20	0.13
21	0.12
22	0.12
23	0.12
24	0.12
25	0.12
26	0.11
27	0.10
28	0.10
29	0.10
30	0.09
31	0.09
32	0.09
33	0.09
34	0.09
35	0.09
36	0.09
37	0.09
38	0.09
39	0.09
40	0.09
41	0.10
42	0.10
43	0.10
44	0.10
45	0.10
46	0.10
47	0.10
48	0.11
49	0.11
50	0.11

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT THEFT \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
11	1.52	1.40	1.67	1.59	1.70	1.63	1.82	2.13	1.96	1.86	2.13	2.29	2.52	2.22	2.94	3.63	2.17
12	0.74	0.69	0.82	0.78	0.83	0.80	0.89	1.04	0.96	0.91	1.04	1.12	1.23	1.08	1.44	1.78	1.06
13	0.69	0.63	0.76	0.72	0.77	0.74	0.82	0.96	0.89	0.84	0.96	1.04	1.14	1.00	1.33	1.64	0.98
14	0.65	0.60	0.71	0.68	0.72	0.69	0.77	0.90	0.83	0.79	0.90	0.98	1.07	0.94	1.25	1.54	0.92
15	0.61	0.57	0.67	0.64	0.68	0.66	0.74	0.86	0.79	0.75	0.86	0.93	1.02	0.89	1.19	1.46	0.87
16	0.59	0.54	0.65	0.62	0.66	0.63	0.70	0.82	0.76	0.72	0.82	0.89	0.98	0.86	1.14	1.40	0.84
17	0.57	0.52	0.62	0.59	0.63	0.61	0.68	0.79	0.73	0.69	0.79	0.86	0.94	0.83	1.10	1.35	0.81
18	0.55	0.51	0.61	0.58	0.61	0.59	0.66	0.77	0.71	0.67	0.77	0.83	0.91	0.80	1.07	1.32	0.78
19	0.54	0.50	0.59	0.56	0.60	0.58	0.64	0.75	0.69	0.66	0.75	0.81	0.89	0.78	1.04	1.28	0.77
20	0.53	0.49	0.58	0.55	0.59	0.57	0.63	0.74	0.68	0.65	0.74	0.80	0.88	0.77	1.02	1.26	0.75
21	0.52	0.48	0.57	0.54	0.58	0.56	0.62	0.73	0.67	0.64	0.73	0.78	0.86	0.76	1.01	1.24	0.74
22	0.51	0.47	0.56	0.54	0.57	0.55	0.62	0.72	0.66	0.63	0.72	0.78	0.85	0.75	0.99	1.23	0.73
23	0.51	0.47	0.56	0.54	0.57	0.55	0.61	0.71	0.66	0.62	0.71	0.77	0.85	0.74	0.99	1.22	0.73
24	0.51	0.47	0.56	0.53	0.57	0.54	0.61	0.71	0.66	0.62	0.71	0.77	0.84	0.74	0.98	1.21	0.72
25	0.49	0.45	0.54	0.51	0.54	0.52	0.59	0.68	0.63	0.60	0.68	0.74	0.81	0.71	0.94	1.17	0.70
26	0.46	0.42	0.50	0.48	0.51	0.49	0.55	0.64	0.59	0.56	0.64	0.69	0.76	0.67	0.89	1.09	0.65
27	0.43	0.40	0.48	0.46	0.48	0.47	0.52	0.61	0.56	0.53	0.61	0.66	0.72	0.63	0.84	1.04	0.62
28	0.42	0.38	0.46	0.44	0.46	0.45	0.50	0.58	0.54	0.51	0.58	0.63	0.69	0.61	0.81	0.99	0.59
29	0.40	0.37	0.44	0.42	0.45	0.43	0.48	0.56	0.52	0.49	0.56	0.61	0.67	0.59	0.78	0.96	0.57
30	0.39	0.36	0.43	0.41	0.44	0.42	0.47	0.55	0.50	0.48	0.55	0.59	0.65	0.57	0.76	0.93	0.56
31	0.38	0.35	0.42	0.40	0.43	0.41	0.46	0.54	0.50	0.47	0.54	0.58	0.64	0.56	0.74	0.92	0.55
32	0.38	0.35	0.42	0.40	0.43	0.41	0.46	0.53	0.49	0.47	0.53	0.57	0.63	0.56	0.74	0.91	0.54
33	0.38	0.35	0.42	0.40	0.42	0.41	0.46	0.53	0.49	0.46	0.53	0.57	0.63	0.55	0.73	0.91	0.54
34	0.38	0.35	0.42	0.40	0.42	0.41	0.45	0.53	0.49	0.46	0.53	0.57	0.63	0.55	0.73	0.91	0.54
35	0.38	0.35	0.42	0.40	0.42	0.41	0.46	0.53	0.49	0.46	0.53	0.57	0.63	0.55	0.73	0.91	0.54
36	0.38	0.35	0.42	0.40	0.42	0.41	0.46	0.53	0.49	0.47	0.53	0.57	0.63	0.56	0.74	0.91	0.54
37	0.38	0.35	0.42	0.40	0.43	0.41	0.46	0.54	0.49	0.47	0.54	0.58	0.64	0.56	0.74	0.91	0.55
38	0.38	0.36	0.42	0.40	0.43	0.41	0.46	0.54	0.50	0.47	0.54	0.58	0.64	0.56	0.75	0.92	0.55
39	0.39	0.36	0.43	0.41	0.43	0.42	0.47	0.54	0.50	0.48	0.54	0.59	0.64	0.57	0.75	0.93	0.55
40	0.39	0.36	0.43	0.41	0.44	0.42	0.47	0.55	0.51	0.48	0.55	0.59	0.65	0.57	0.76	0.94	0.56
41	0.40	0.37	0.44	0.42	0.44	0.43	0.48	0.56	0.51	0.49	0.56	0.60	0.66	0.58	0.77	0.95	0.57
42	0.40	0.37	0.44	0.42	0.45	0.43	0.48	0.56	0.52	0.49	0.56	0.61	0.67	0.59	0.78	0.96	0.57
43	0.41	0.38	0.45	0.43	0.45	0.44	0.49	0.57	0.53	0.50	0.57	0.61	0.68	0.59	0.79	0.97	0.58
44	0.41	0.38	0.45	0.43	0.46	0.44	0.50	0.58	0.53	0.51	0.58	0.62	0.69	0.60	0.80	0.99	0.59
45	0.42	0.39	0.46	0.44	0.47	0.45	0.50	0.59	0.54	0.51	0.59	0.63	0.70	0.61	0.81	1.00	0.60
46	0.43	0.39	0.47	0.45	0.48	0.46	0.51	0.60	0.55	0.52	0.60	0.64	0.71	0.62	0.83	1.02	0.61
47	0.43	0.40	0.48	0.46	0.49	0.47	0.52	0.61	0.56	0.53	0.61	0.66	0.72	0.63	0.84	1.04	0.62
48	0.44	0.41	0.49	0.46	0.49	0.48	0.53	0.62	0.57	0.54	0.62	0.67	0.74	0.65	0.86	1.06	0.63
49	0.45	0.42	0.50	0.47	0.50	0.49	0.54	0.63	0.58	0.55	0.63	0.68	0.75	0.66	0.87	1.08	0.64
50	0.46	0.43	0.51	0.48	0.51	0.50	0.55	0.65	0.60	0.56	0.65	0.70	0.77	0.67	0.89	1.10	0.66

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT THEFT \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	18	19	20	21	22	23	24	25	26	27	40	41	42	43	44	45
11	3.08	3.04	2.89	3.21	3.26	2.80	1.77	2.83	4.25	1.44	2.90	1.73	2.62	3.41	2.66	3.67
12	1.51	1.49	1.41	1.57	1.60	1.37	0.87	1.38	2.08	0.71	1.42	0.85	1.28	1.67	1.30	1.79
13	1.39	1.38	1.31	1.45	1.48	1.27	0.80	1.28	1.92	0.65	1.31	0.78	1.19	1.54	1.20	1.66
14	1.31	1.29	1.23	1.36	1.39	1.19	0.75	1.20	1.81	0.61	1.23	0.74	1.12	1.45	1.13	1.56
15	1.24	1.23	1.17	1.30	1.32	1.13	0.72	1.14	1.72	0.58	1.17	0.70	1.06	1.38	1.07	1.48
16	1.19	1.18	1.12	1.24	1.26	1.08	0.69	1.09	1.64	0.56	1.12	0.67	1.01	1.32	1.03	1.42
17	1.15	1.13	1.08	1.20	1.22	1.04	0.66	1.05	1.59	0.54	1.08	0.65	0.98	1.27	0.99	1.37
18	1.12	1.10	1.05	1.16	1.18	1.02	0.64	1.02	1.54	0.52	1.05	0.63	0.95	1.24	0.96	1.33
19	1.09	1.08	1.02	1.13	1.15	0.99	0.63	1.00	1.50	0.51	1.03	0.61	0.93	1.21	0.94	1.30
20	1.07	1.06	1.00	1.11	1.13	0.97	0.62	0.98	1.48	0.50	1.01	0.60	0.91	1.18	0.92	1.27
21	1.05	1.04	0.99	1.10	1.11	0.96	0.61	0.97	1.45	0.49	0.99	0.59	0.90	1.17	0.91	1.25
22	1.04	1.03	0.98	1.08	1.10	0.95	0.60	0.96	1.44	0.49	0.98	0.59	0.89	1.15	0.90	1.24
23	1.04	1.02	0.97	1.08	1.09	0.94	0.60	0.95	1.43	0.48	0.98	0.58	0.88	1.15	0.89	1.23
24	1.03	1.02	0.97	1.07	1.09	0.94	0.59	0.94	1.42	0.48	0.97	0.58	0.88	1.14	0.89	1.22
25	0.99	0.98	0.93	1.03	1.05	0.90	0.57	0.91	1.37	0.46	0.93	0.56	0.84	1.10	0.85	1.18
26	0.93	0.92	0.87	0.97	0.98	0.84	0.53	0.85	1.28	0.43	0.88	0.52	0.79	1.03	0.80	1.11
27	0.88	0.87	0.83	0.92	0.93	0.80	0.51	0.81	1.22	0.41	0.83	0.50	0.75	0.98	0.76	1.05
28	0.84	0.83	0.79	0.88	0.89	0.77	0.48	0.77	1.16	0.39	0.79	0.47	0.72	0.93	0.73	1.00
29	0.81	0.80	0.76	0.85	0.86	0.74	0.47	0.75	1.12	0.38	0.77	0.46	0.69	0.90	0.70	0.97
30	0.79	0.78	0.74	0.82	0.84	0.72	0.45	0.73	1.09	0.37	0.75	0.44	0.67	0.88	0.68	0.94
31	0.78	0.77	0.73	0.81	0.82	0.71	0.45	0.71	1.07	0.36	0.73	0.44	0.66	0.86	0.67	0.92
32	0.77	0.76	0.72	0.80	0.82	0.70	0.44	0.71	1.07	0.36	0.73	0.43	0.66	0.86	0.67	0.92
33	0.77	0.76	0.72	0.80	0.81	0.70	0.44	0.71	1.06	0.36	0.73	0.43	0.66	0.85	0.66	0.92
34	0.77	0.76	0.72	0.80	0.81	0.70	0.44	0.71	1.06	0.36	0.72	0.43	0.65	0.85	0.66	0.91
35	0.77	0.76	0.72	0.80	0.81	0.70	0.44	0.71	1.06	0.36	0.73	0.43	0.66	0.85	0.66	0.92
36	0.77	0.76	0.72	0.80	0.82	0.70	0.44	0.71	1.07	0.36	0.73	0.43	0.66	0.85	0.67	0.92
37	0.78	0.77	0.73	0.81	0.82	0.71	0.45	0.71	1.07	0.36	0.73	0.44	0.66	0.86	0.67	0.92
38	0.78	0.77	0.73	0.81	0.83	0.71	0.45	0.72	1.08	0.37	0.74	0.44	0.67	0.87	0.67	0.93
39	0.79	0.78	0.74	0.82	0.83	0.72	0.45	0.72	1.09	0.37	0.74	0.44	0.67	0.87	0.68	0.94
40	0.80	0.79	0.75	0.83	0.84	0.72	0.46	0.73	1.10	0.37	0.75	0.45	0.68	0.88	0.69	0.95
41	0.80	0.79	0.75	0.84	0.85	0.73	0.46	0.74	1.11	0.38	0.76	0.45	0.69	0.89	0.70	0.96
42	0.81	0.80	0.76	0.85	0.86	0.74	0.47	0.75	1.12	0.38	0.77	0.46	0.69	0.90	0.70	0.97
43	0.83	0.82	0.77	0.86	0.87	0.75	0.47	0.76	1.14	0.39	0.78	0.46	0.70	0.91	0.71	0.98
44	0.84	0.83	0.79	0.87	0.89	0.76	0.48	0.77	1.16	0.39	0.79	0.47	0.71	0.93	0.72	1.00
45	0.85	0.84	0.80	0.89	0.90	0.77	0.49	0.78	1.18	0.40	0.80	0.48	0.73	0.94	0.74	1.01
46	0.87	0.86	0.81	0.90	0.92	0.79	0.50	0.79	1.20	0.41	0.82	0.49	0.74	0.96	0.75	1.03
47	0.88	0.87	0.83	0.92	0.93	0.80	0.51	0.81	1.22	0.41	0.83	0.50	0.75	0.98	0.76	1.05
48	0.90	0.89	0.84	0.94	0.95	0.82	0.52	0.82	1.24	0.42	0.85	0.51	0.76	0.99	0.78	1.07
49	0.92	0.90	0.86	0.95	0.97	0.83	0.53	0.84	1.26	0.43	0.86	0.52	0.78	1.01	0.79	1.09
50	0.94	0.92	0.88	0.97	0.99	0.85	0.54	0.86	1.29	0.44	0.88	0.53	0.80	1.04	0.81	1.11

Stated Amount C.A.C. with M.M.& V. \$500 Deductible 15% of the Stated Amount Comprehensive Rate

Additional Charges to Reduce Deductible from \$500 - Same as Actual Cash Value Charges

For Higher Deductibles, Refer to Rule 16

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

MOTORCYCLE RATES

Part 1 - Bodily Injury

Part 2 - PIP

Territory	Experienced Operators				Territory	Experienced Operators			
	Group A	Group B	Group C	Group D		Group A	Group B	Group C	Group D
1	\$21	\$16	\$26	\$23	1	\$2	\$2	\$2	\$2
2	\$21	\$16	\$26	\$23	2	\$2	\$2	\$2	\$2
3	\$21	\$16	\$28	\$25	3	\$2	\$2	\$2	\$2
4	\$23	\$18	\$30	\$26	4	\$2	\$2	\$4	\$2
5	\$30	\$23	\$39	\$33	5	\$4	\$2	\$4	\$4
6	\$30	\$23	\$39	\$33	6	\$4	\$2	\$4	\$4
7	\$30	\$23	\$39	\$33	7	\$4	\$2	\$4	\$4
8	\$30	\$23	\$39	\$33	8	\$4	\$2	\$4	\$4
9	\$37	\$30	\$49	\$42	9	\$4	\$4	\$5	\$4
10	\$42	\$32	\$54	\$46	10	\$4	\$4	\$5	\$4
11	\$40	\$32	\$54	\$46	11	\$4	\$4	\$5	\$4
12	\$42	\$33	\$56	\$47	12	\$4	\$4	\$5	\$5
13	\$44	\$33	\$56	\$49	13	\$4	\$4	\$5	\$5
14	\$54	\$42	\$70	\$60	14	\$5	\$4	\$7	\$5
15	\$65	\$51	\$84	\$72	15	\$5	\$5	\$9	\$7
16	\$75	\$58	\$96	\$84	16	\$7	\$5	\$9	\$7
17	\$61	\$47	\$79	\$68	17	\$5	\$5	\$7	\$7
18	\$61	\$47	\$79	\$68	18	\$5	\$5	\$7	\$7
19	\$61	\$47	\$79	\$68	19	\$5	\$5	\$7	\$7
20	\$61	\$47	\$79	\$68	20	\$5	\$5	\$7	\$7
21	\$61	\$47	\$79	\$68	21	\$5	\$5	\$7	\$7
22	\$61	\$47	\$79	\$68	22	\$5	\$5	\$7	\$7
23	\$61	\$47	\$79	\$68	23	\$5	\$5	\$7	\$7
24	\$61	\$47	\$79	\$68	24	\$5	\$5	\$7	\$7
25	\$61	\$47	\$79	\$68	25	\$5	\$5	\$7	\$7
26	\$61	\$47	\$79	\$68	26	\$5	\$5	\$7	\$7
27	\$19	\$16	\$26	\$23	27	\$2	\$2	\$2	\$2
40	\$53	\$40	\$68	\$58	40	\$5	\$4	\$7	\$5
41	\$53	\$42	\$70	\$60	41	\$5	\$4	\$7	\$5
42	\$63	\$49	\$82	\$70	42	\$5	\$5	\$7	\$7
43	\$60	\$47	\$79	\$68	43	\$5	\$5	\$7	\$7
44	\$67	\$53	\$88	\$75	44	\$7	\$5	\$9	\$7
45	\$61	\$47	\$79	\$68	45	\$5	\$5	\$7	\$7

Notes:

- (1) Motorcycle territory definitions are the same as for private passenger automobiles.
- (2) Rates for inexperienced operators are calculated by applying a factor of 1.50 to the experienced operators rates above.
- (3) Group definitions are as follows:

Group	Vehicle size
A	0 c.c. to 100 c.c.
B	101 c.c. to 350 c.c.
C	351 c.c. to 650 c.c.
D	651 c.c. and over

- (4) For electric motorcycles used for private passenger purposes, use the private passenger motorcycle rates specified for Vehicle Engine Size Group D.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

MOTORCYCLE RATES

Part 5 - Optional BI

Rates at Basic limits

Territory	Experienced Operators			
	With Guest			
	Group A	Group B	Group C	Group D
1	\$19	\$14	\$25	\$21
2	\$19	\$16	\$25	\$21
3	\$19	\$16	\$26	\$23
4	\$21	\$18	\$28	\$25
5	\$26	\$21	\$35	\$30
6	\$28	\$21	\$35	\$30
7	\$28	\$21	\$35	\$30
8	\$28	\$21	\$35	\$30
9	\$35	\$26	\$46	\$39
10	\$39	\$30	\$49	\$44
11	\$39	\$30	\$49	\$42
12	\$40	\$32	\$53	\$44
13	\$40	\$32	\$53	\$46
14	\$49	\$39	\$65	\$56
15	\$60	\$47	\$77	\$67
16	\$68	\$54	\$89	\$77
17	\$56	\$44	\$74	\$63
18	\$56	\$44	\$74	\$63
19	\$56	\$44	\$74	\$63
20	\$56	\$44	\$74	\$63
21	\$56	\$44	\$74	\$63
22	\$56	\$44	\$74	\$63
23	\$56	\$44	\$74	\$63
24	\$56	\$44	\$74	\$63
25	\$56	\$44	\$74	\$63
26	\$56	\$44	\$74	\$63
27	\$18	\$14	\$23	\$21
40	\$49	\$37	\$63	\$54
41	\$49	\$39	\$65	\$56
42	\$58	\$46	\$75	\$65
43	\$56	\$44	\$74	\$63
44	\$63	\$49	\$81	\$70
45	\$56	\$44	\$74	\$63

Territory	Experienced Operators			
	Without Guest			
	Group A	Group B	Group C	Group D
1	\$5	\$4	\$7	\$5
2	\$5	\$4	\$7	\$7
3	\$5	\$5	\$7	\$7
4	\$7	\$5	\$9	\$7
5	\$7	\$5	\$11	\$9
6	\$7	\$5	\$11	\$9
7	\$7	\$5	\$11	\$9
8	\$7	\$5	\$11	\$9
9	\$11	\$7	\$12	\$11
10	\$11	\$9	\$14	\$12
11	\$11	\$9	\$14	\$12
12	\$12	\$9	\$16	\$12
13	\$12	\$9	\$16	\$12
14	\$14	\$11	\$19	\$16
15	\$18	\$14	\$23	\$19
16	\$19	\$16	\$26	\$23
17	\$16	\$12	\$21	\$18
18	\$16	\$12	\$21	\$18
19	\$16	\$12	\$21	\$18
20	\$16	\$12	\$21	\$18
21	\$16	\$12	\$21	\$18
22	\$16	\$12	\$21	\$18
23	\$16	\$12	\$21	\$18
24	\$16	\$12	\$21	\$18
25	\$16	\$12	\$21	\$18
26	\$16	\$12	\$21	\$18
27	\$5	\$4	\$7	\$5
40	\$14	\$11	\$18	\$16
41	\$14	\$11	\$19	\$16
42	\$18	\$12	\$21	\$19
43	\$16	\$12	\$21	\$18
44	\$18	\$14	\$23	\$19
45	\$16	\$12	\$21	\$18

Notes:

(1) Motorcycle territory definitions are the same as for private passenger automobiles.

(2) Rates for inexperienced operators are calculated by applying a factor of 1.50 to the experienced operators rates above.

(3) Group definitions are as follows:

Group	Vehicle size
A	0 c.c. to 100 c.c.
B	101 c.c. to 350 c.c.
C	351 c.c. to 650 c.c.
D	651 c.c. and over

(4) For electric motorcycles used for private passenger purposes, use the private passenger motorcycle rates specified for Vehicle Engine Size Group D.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

MOTORCYCLE RATES

Part 4 - Property Damage

Rates at Basic limits

Territory	Experienced Operators			
	Group A	Group B	Group C	Group D
1	\$21	\$18	\$28	\$25
2	\$23	\$18	\$28	\$25
3	\$23	\$18	\$28	\$25
4	\$23	\$18	\$30	\$26
5	\$33	\$26	\$44	\$37
6	\$33	\$26	\$44	\$37
7	\$33	\$26	\$44	\$37
8	\$33	\$26	\$44	\$37
9	\$44	\$33	\$58	\$49
10	\$46	\$35	\$58	\$51
11	\$46	\$35	\$58	\$51
12	\$46	\$35	\$60	\$51
13	\$46	\$35	\$60	\$51
14	\$67	\$53	\$88	\$75
15	\$67	\$53	\$88	\$75
16	\$68	\$53	\$88	\$75
17	\$70	\$54	\$91	\$79
18	\$70	\$54	\$91	\$79
19	\$70	\$54	\$91	\$79
20	\$70	\$54	\$91	\$79
21	\$70	\$54	\$91	\$79
22	\$70	\$54	\$91	\$79
23	\$70	\$54	\$91	\$79
24	\$70	\$54	\$91	\$79
25	\$70	\$54	\$91	\$79
26	\$70	\$54	\$91	\$79
27	\$21	\$18	\$28	\$25
40	\$51	\$40	\$67	\$58
41	\$68	\$53	\$88	\$75
42	\$67	\$53	\$88	\$75
43	\$67	\$53	\$88	\$75
44	\$67	\$51	\$86	\$74
45	\$68	\$53	\$88	\$75

Notes:

- (1) Motorcycle territory definitions are the same as for private passenger automobiles.
- (2) Rates for inexperienced operators are calculated by applying a factor of 1.50 to the experienced operators rates above.
- (3) Group definitions are as follows:

Group	Vehicle size
A	0 c.c. to 100 c.c.
B	101 c.c. to 350 c.c.
C	351 c.c. to 650 c.c.
D	651 c.c. and over

- (4) For electric motorcycles used for private passenger purposes, use the private passenger motorcycle rates specified for Vehicle Engine Size Group D.

Part 6 - Medical Payments

Rates by limit

All Territories	
Limit per person	All Groups
\$500	\$128
\$750	\$135
\$1,000	\$142
\$2,000	\$168
\$5,000	\$238
\$10,000	\$340
\$15,000	\$425
\$20,000	\$487
\$25,000	\$537

Part 3 - Uninsured Motorists

Rates by limit

All Territories	
Limit	All Groups
20/40	\$32
20/50	\$32
25/50	\$37
35/80	\$39
50/100	\$42
100/300	\$54
250/500	\$65

Part 12 - Underinsured Motorists

Rates by limit

All Territories	
Limit	All Groups
20/40	\$0
20/50	\$0
25/50	\$4
35/80	\$11
50/100	\$23
100/300	\$72
250/500	\$299

Notes:

- (1) Rates for Parts 3, 6, and 12 are the same for experienced and inexperienced operators.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

MOTORCYCLE RATES

Part 7 - Collision Rates at \$500 deductible

Territory	Rate per \$100 of value*
	Experienced Operators
	All Groups
1	\$1.84
2	\$1.84
3	\$1.87
4	\$1.96
5	\$2.66
6	\$2.66
7	\$2.66
8	\$2.66
9	\$3.99
10	\$4.08
11	\$4.06
12	\$4.08
13	\$4.08
14	\$7.30
15	\$7.32
16	\$7.32
17	\$7.30
18	\$7.30
19	\$7.30
20	\$7.30
21	\$7.30
22	\$7.30
23	\$7.30
24	\$7.30
25	\$7.30
26	\$7.30
27	\$1.84
40	\$6.04
41	\$5.76
42	\$7.07
43	\$7.32
44	\$7.16
45	\$7.30

Part 7 - Collision Other deductibles

All Territories	
Deductible	All Groups
\$300	\$500 deductible premium + \$26
\$1,000	71.2% of \$500 deductible premium
\$2,000	57.0% of \$500 deductible premium

Part 7 - Collision Waiver of Deductible Charges

All Territories	
Deductible	All Groups
\$300	\$5
\$500	\$9
\$1,000	\$11
\$2,000	\$18

Part 8 - Limited Collision

\$500 deductible base premium (Part 8) =
(6.0%) x [\$500 deductible Collision base premium (Part 7)]

Deductible	All Groups
\$0	\$500 deductible premium (Part 8) + \$5
\$300	\$500 deductible premium (Part 8) + \$4
\$1,000	61.7% of \$500 deductible premium (Part 8)
\$2,000	40.9% of \$500 deductible premium (Part 8)

Motorcycle Age Factors

Age Group	Based on Model Year (MY)**	Collision Factor
1	Current MY	1.000
2	1 st Preceding	0.940
3	2 nd Preceding	0.870
4	3 rd Preceding	0.800
5	4 th Preceding	0.740
6	5 th Preceding	0.670
7	6 th Preceding	0.610
8	All other	0.540

** The current model year changes October 1, regardless of the actual date the models are introduced.

* Determine motorcycle Collision rates by the following procedure:

- Determine the motorcycle's value as Original Cost New in hundreds of dollars.
- Multiply the value determined in (a) by the rate per \$100 for its territory.
- Multiply the base manual premium determined in (b) by the Age Rate Factor.

Notes:

- Motorcycle territory definitions are the same as for private passenger automobiles.
- Rates for inexperienced operators are calculated by applying a factor of 1.50 to the experienced operators rates above.
- Rates are per \$100 of insured value.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

MOTORCYCLE RATES

Part 9 - Comprehensive Rates at \$500 deductible

Territory	Rate per \$100 of value*
	All Groups
1	\$0.65
2	\$0.67
3	\$0.72
4	\$0.82
5	\$1.16
6	\$1.17
7	\$1.26
8	\$1.44
9	\$2.59
10	\$2.92
11	\$2.91
12	\$3.05
13	\$3.08
14	\$6.16
15	\$6.76
16	\$7.21
17	\$11.13
18	\$11.13
19	\$11.13
20	\$11.13
21	\$11.13
22	\$11.13
23	\$11.13
24	\$11.13
25	\$11.13
26	\$11.13
27	\$0.63
40	\$3.62
41	\$4.20
42	\$5.71
43	\$6.25
44	\$7.04
45	\$5.97

Part 9 - Comprehensive Other deductibles

Deductible	All Territories
	All Groups
\$300	\$500 deductible premium + \$2
\$1,000	61.1% of \$500 deductible premium
\$2,000	55.8% of \$500 deductible premium

Fire	Charge 5% of the motorcycle Comprehensive premium
Theft	Charge 90% of the motorcycle Comprehensive premium

Motorcycle Age Factors

Age Group	Based on Model Year (MY)**	Comprehensive Factor
1	Current MY	1.000
2	1 st Preceding	0.920
3	2 nd Preceding	0.840
4	3 rd Preceding	0.770
5	4 th Preceding	0.680
6	5 th Preceding	0.610
7	6 th Preceding	0.530
8	All Other	0.450

** The current model year changes October 1, regardless of the actual date the models are introduced.

*Determine motorcycle Comprehensive rates by the following procedure:

- Determine the motorcycle's value as Original Cost New in hundreds of dollars.
- Multiply the value determined in (a) by the rate per \$100 for its territory.
- Multiply the base manual premium determined in (b) by the Age Rate Factor.

Notes:

- Motorcycle territory definitions are the same as for private passenger automobiles.
- Rates for Part 9 are the same for experienced and inexperienced operators.
- Rates are per \$100 of insured value.

Motorcycles Rated in the Private Passenger Automobile Insurance Manual**Territories**

The territory definitions applicable to motorcycles are the same as those used for private passenger vehicles.

Commissions

The commission provisions incorporated into the motorcycle rates are as follows (as a percentage of premium):

Liability coverages:	13.0%
Physical Damage coverages:	13.0%

Group Definitions

The motorcycle group rating variable is defined as follows:

<u>Group</u>	<u>Vehicle Size</u>
A	0 c.c. to 100 c.c.
B	101 c.c. to 350 c.c.
C	351 c.c. to 650 c.c.
D	651 c.c. and over

Electric Motorcycles

For electric motorcycles used for private passenger purposes, use the private passenger motorcycle rates specified for Vehicle Engine Size Group D.

Substitute Transportation (Part 10)

\$15/day with \$450 maximum	\$79
\$30/day with \$900 maximum	\$158
\$45/day with \$1,350 maximum	\$292
\$100/day with \$3000 maximum	\$606

Towing and Labor

\$50/day per disablement	\$14
\$100/day per disablement	\$28

Discount (Rule 44)

<u>Discount</u>	<u>Amount</u>	<u>Coverage</u>
Motorcycle Rider Training Program	10%	Parts 1-8, 12
Insured Age 65 or older	25%	All Parts

Age Rate Factor

For rating motorcycle physical damage coverages, see manual rate page for Age Rate Factors to be applied to the base manual premium of the motorcycle.

Merit Rating Plan

Rates for Parts 1, 2, 4, 5 and 7 are base rates (i.e. at the point/zero credit level, or prior to the application of any merit rating plan credits or surcharges). The determination of merit rating plan credits and point-based surcharges are the same as for private passenger vehicles.

Inexperienced Operator

Rates for inexperienced operators are calculated by applying a factor of 1.50 to the experienced operator rates. Inexperienced rating factors apply to coverage Parts 1, 2, 4, 5, 7, and 8.

Premium Calculation Rule

Premiums for Motorcycles shall be calculated using the following step procedure. Note that not all of these steps may be applicable for every coverage or policyholder. The premium for each exposure shall be rounded to the nearest whole dollar at the end of each step. (Rounding should occur after the application of each discount)

- 1) Determine the base manual premium
- 2) Apply the Age Rate Factor (for physical damage coverages)
- 3) Apply adjustments for increased limits or deductibles
- 4) Apply the inexperienced operator factor
- 5) Add waiver of deductible charges
- 6) Apply discounts in the following order: driver training, senior citizen
- 7) Apply Merit Rating credits or surcharges

**Approved Motorcycle Training Sites
Rider Education Recognition Program (RERP) Number**

Angel Motorcycle School, Fitchburg	(200185)
Big Boar Inc., Dartmouth	(135959)
Boston Harley Davidson, Revere	(200508)
Central Massachusetts Safety Council, W. Boylston	(60055)
Husky Riding Academy, North Quincy MA	(200648)
Massachusetts Motorcycle School, LLC Dunstable, MA	(200315)
Mass Motorcycle School, LLC (* Harley Davidson Riding Academy), Dunstable, MA	(200777)
Motorcycle Safe Riding Project, Beverly	(60050)
Pioneer Valley Rider Training, East Longmeadow	(105325)
Rider Skills of New England, Southbridge	(200207)
Sheldon's Harley-Davidson/Buell, Auburn	(200523)
Streetwise Cycle School, Boston	(123948)
Training Wheels of New England, Inc., East Orleans	(105250)

Those who participate in motorcycle rider education courses in any other location are also eligible for the 10% reduction, given the course is approved by the Motorcycle Safety Foundation. If courses are taken out of state, they must be Motorcycle Safety Foundation certified and adhere to Governor's Highway Safety Bureau rules and regulations on file at the Secretary of State's office.

Miscellaneous Rating Factors

DEDUCTIBLES (RULE 16)							
Deductibles:	\$1,000*		\$2,000*				\$100**
Collision:	.68		.53				Glass
Limited Collision:	.68		.53				Not Applicable
Comprehensive:	.54		.48				Not Applicable
Including Fire, Theft and Combined Additional Coverages							
Collision Waiver of Deductible Charges:				\$300 Deductible - \$25			
				\$500 Deductible - \$36			
				\$1,000 Deductible - \$48			
				\$2,000 Deductible - \$75			
*Charges based on \$500 Deductible Premium							
**Applies to otherwise determined premium							
SUBSTITUTE TRANSPORTATION (RULE 17)							
	\$15/Day, \$450 Maximum		\$30/Day, \$900 Maximum		\$45/Day, \$1,350 Maximum		\$100/Day, \$3,000 Maximum
Private Passenger:	\$50		\$150		\$185		\$335
DISCOUNTS (RULE 19)							
Annual Mileage:		0-5,000 miles - 10% Parts 1-8 and 12					
		5,001-7,500 miles - 5% Parts 1-8 and 12					
Multi-Car:		5% Parts 1, 2, 4, 5, 7, 8 and 9					
Continuous Coverage:		10% Parts 1, 2, 4, and 5					
Low Frequency:		10% Parts 1, 2, 4, and 5					
Class 15		25%					
RATE RELATIVITIES FACTOR FOR MODEL YEARS NOT SHOWN IN RATE PAGES (RULE 22)							
Collision:	1.050						
Comprehensive:	1.025						
FIRE, THEFT AND COMBINED ADDITIONAL COVERAGE (RULE 21)							
		Actual Cash Value					
Fire		10% of Comprehensive Premium					
Fire & Theft		70% of Comprehensive Premium					
Fire, Theft & C.A.C.		85% of Comprehensive Premium					
PERSONAL INJURY PROTECTION – DEDUCTIBLE (RULE 30)							
DEDUCTIBLE:	\$100	\$250	\$500	\$1,000	\$2,000	\$4,000	\$8,000
Policyholder - Alone:	2%	4%	8%	16%	29%	41%	51%
Policyholder and Household Members:	2%	6%	11%	21%	39%	53%	66%
TOWING AND LABOR (RULE 33)							
				\$50 per Disablement		\$100 per Disablement	
Private Passenger:				\$8		\$16	
EXCESS ELECTRONIC EQUIPMENT COVERAGE (RULE 46)							
Apply a rate of \$4 to each \$100 of valuation.							
CUSTOMIZING EQUIPMENT - STATED AMOUNT COVERAGE (RULE 47)							
Refer to Rule 47							

Miscellaneous Motor Vehicles

	LIABILITY	PHYSICAL DAMAGE
Trailers (Rule 34)	No Charge	Parts 7, 8 and 9 50% Latest Model Year shown in Rate Pages, Territory 1, Class 10 VRG based on Base List Price
Motor Homes (Rule 39)	Manual Rates	Parts 7 and 8 – 50% Part 9 – Manual Rate
Low Speed Vehicles (Rule 43)	Parts 1,4, and 5: 50% of Class 10 Parts 2,3,6, and 12: 100% of Class 10 Annual mileage, multi-car, continuous coverage, low frequency, class 15 discounts apply (Rule 19)	Parts 7 and 8: 75% of Class 10 Part 9: 50% of Class 10 Annual mileage, multi-car, class 15 discounts apply (Rule 19) VRG based on Base List Price (Rule 22)
Specialty and Classic Cars (Rule 42)	Parts 1,2,4, and 5: 25% of Class 10 Parts 3, 6, and 12: Manual Rates Class 15 discount applies (Rule 19)	Parts 7,8, and 9: 50% Latest Model Year shown in Rate Pages, Territory 1, Class 10 Base List Price for assigning VRG based on Appraised Value Class 15 discount applies (Rule 19)
Specialty and Classic Motorcycles (Rule 42)	Parts 1,2,4, and 5: 25% of Class 10 Motorcycle Rates Parts 3,6, and 12: Manual Motorcycle Rates Class 15 discount applies (Rule 19)	Parts 7,8, and 9: 50% of Territory 1 Motorcycle Rate Class 15 discount applies (Rule 19)

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