Part I - Overview

A. SCOPE OF THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan is applicable to total automobile direct business written by a company on vehicles rated in accordance with the Massachusetts Private Passenger Automobile Insurance Manual. This Plan also applies to vehicle classifications or coverages for which companies may file their own rates (e.g. antique automobiles). The Massachusetts Private Passenger Automobile Insurance Manual, which is published by the Automobile Insurers Bureau of Massachusetts, should be used in conjunction with both the Private Passenger Automobile Statistical Plan and the various informational Accounting and Statistical Notices published periodically by Commonwealth Automobile Reinsurers. In order to assure that the statistical data reported to CAR is of the highest level of quality, the Massachusetts Private Passenger Automobile Statistical Plan provides companies with the necessary requirements, instructions and codes for reporting detailed statistical data for the following automobile insurance coverages to CAR:

Bodily Injury to Others

Personal Injury Protection (No-Fault)

Bodily Injury Caused by an Uninsured Automobile

Damage to Someone Else's Property

Optional Bodily Injury to Others

Medical Payments

Collision

Limited Collision

Comprehensive

Substitute Transportation

Towing and Labor

Bodily Injury Caused by an Underinsured Automobile

B. ORGANIZATION OF THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan is organized in the following major divisions:

Part I – Overview

Part II – General Rules

Part III – General Reporting Requirements (Premiums and Losses)

Part IV - Reporting Instructions - Premiums

Part V - Reporting Instructions - Losses

Part VI - Coding Section

Part VII - Statistical Data Quality Program

Part VIII - Record Layouts

Appendix A – Decision Tables – Classification Code and Coverage Code

Appendix B - Premium and Accident Town Tables

The Overview Section introduces the Massachusetts Private Passenger Automobile Statistical Plan. It identifies the coverages for which this Plan is applicable, details the organization of this Plan, specifies the Statistical Plan's effective date and identifies how CAR informs users of updates to this Plan.

The General Rules Section of this Plan describes company reporting requirements and the proper method for reporting data to CAR. The General Reporting Requirements Section of this Plan contains general information relative to the reporting of premium, and loss data to CAR. The Reporting Instructions Sections of this Plan contain specifications for reporting each of the data fields required on the various premium and loss record layouts.

Massachusetts Private Passenger Automobile Statistical Plan Part I - Overview

B. ORGANIZATION OF THE PLAN (Continued)

The Coding Section of this Plan identifies the possible values or codes that are valid for each of the data fields contained on the premium and loss record layouts. Data fields apply to all record layouts unless otherwise noted. If a specific data field only applies to a specific record layout or coverage, this will be indicated in the Coding Section. The Coding Section is divided into four subsections. The first section contains codes that are applicable to all record layouts. The remaining sections contain codes that are applicable to the individual liability, no-fault and physical damage record layouts.

The Statistical Data Quality Program Section of this Plan details the specifics of the Statistical Data Quality Program. The purpose of the Statistical Data Quality Program is to assure the quality and completeness of the data reported to CAR. This data is subsequently used for statistical, reinsurance and ratemaking functions. The Program is subdivided into two sections. The Statistical Data Quality Components Section contains CAR's expectations for reporting quality and timely statistical data and the Statistical Data Quality Penalties Section contains associated reporting penalties.

The Record Layouts Section of this Plan identifies the required record layout format including appropriate field positions for statistical records reported to CAR. A Private Passenger Record Layout Modification Key precedes the record layouts and identifies the fields to which modifications have been made in prior years.

Appendix A of this Plan contains detailed Classification and Coverage Code Decision Tables. These Decision Tables shall be used to determine whether specific data fields are required for a particular classification or coverage code.

Appendix B of this Plan contains two tables of valid Premium and Accident Town Codes. One table is listed in alphabetical order and the other is listed in numerical order. These towns correspond to the rating towns listed in the Massachusetts Private Passenger Automobile Insurance Manual.

C. EFFECTIVE DATE OF THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan is applicable to policies with effective dates of January 1, 1981 and subsequent and contains revisions through the date noted on the cover page of this Plan. All policies and endorsements to such policies must contain the Statistical Plan coding and must be reported on the record format that was in effect for the particular policy effective year. Refer to the Private Passenger Automobile Statistical Plan applicable to the particular policy effective year.

★ D. UPDATES TO THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan, initially published in loose-leaf form, is available for viewing or downloading from CAR's website (www.commauto.com). The current year version, as well as prior year versions of the Plan are available. Since the Private Passenger Statistical Plan is now available electronically, paper copies of revised pages are no longer distributed to companies. Instead, CAR will publish an Accounting and Statistical Notice to notify companies of the revised pages and companies will be directed to CAR's website for further information. The revised pages will be available on CAR's website and will be incorporated in the electronic version of the applicable Plan.

The <u>revised</u> pages will be applicable to all new and renewal policies with effective dates on or after the date indicated in the lower left corner of the reprinted pages. Note that specific revisions will be indicated by a star (*) to the left of the line containing the revision. The date in the lower right corner of the page represents the date that the revised page was approved by the Massachusetts Division of Insurance. Any special reporting instructions will be provided to companies via an Accounting and Statistical Notice published by CAR.

Part III - General Reporting Requirements

Section A – Premiums

7. RATE DEVIATIONS

Under Sections 113B and 193R of Chapter 175 of the Massachusetts General Laws, companies may request approval from the Massachusetts Division of Insurance to deviate from the approved fixed and established private passenger automobile rates. Statistical records reported on policies for which rate deviations have been applied must be coded with the appropriate Type of Risk and Rate Departure Factor Codes. Additionally, the premium reported on statistical records must reflect the policy premium after the application of rate deviations.

Refer to the Coding Section for applicable codes and examples.

8. MULTIPLE YEAR POLICIES AND INSTALLMENT POLICIES

Multiple year policies rated on an annual basis shall be reported in the same manner as one year policies. If the policy is written and rated for a period longer than one year, report the total policy premium for the full policy period and the total exposure for the full policy period.

The statistical reporting of policies written on an installment basis for terms not longer than one year is the same for policies written on a prepayment basis. Any interest or finance charge shall not be included in the premium reported for the policy.

9. RULES FOR EXTENDING A POLICY

A policyholder may request that his or her policy be extended. The statistical reporting for such extensions may be done by either of two methods: extension by endorsement or extension by cancellation and rewrite.

If the extension by endorsement method is used, the additional premium must be reported under the original policy number coded with Transaction Type Code 12. The Transaction Effective Date should be the date the extension took effect and the Policy Expiration Date should be the new expiration date.

If the extension is by cancellation and rewrite, a new policy number must be used and the unearned premium on the original policy must be credited in the same manner as any cancelled policy, coded with Transaction Type Code 13. All of the coding for the new policy shall be done in the usual manner under the new policy, coded with Transaction Type Code 11.

Part III - General Reporting Requirements

Section B – Losses

1. REPORTING OF LOSSES

Losses and allocated loss adjustment expenses must be reported on separate records with the applicable codes used to report the corresponding premium records in addition to the loss codes contained in the Coding Section of this Plan.

Allocated loss adjustment expenses must be submitted for all liability and PIP (no-fault) losses. For physical damage losses, allocated loss adjustment expenses are required only for ceded paid losses. However, allocated loss adjustment expenses for voluntary paid physical damage losses may be optionally reported.

★ 2. <u>DEFINITION OF A CLAIM</u>

a. Claim Definition

For the purpose of this Plan, a claim shall be defined as:

- i. the loss incurred on account of bodily injury to any one individual arising out of any one accident for a particular coverage,
- ii. the loss for damage to the property, including loss of use, of any one individual (or legal entity) arising out of any one accident for which there is property damage coverage,
- iii. each individual loss arising under a physical damage coverage.

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Part III - General Reporting Requirements

Section B – Losses

3. ACCIDENT REPORTING

Each accident must be uniquely identified within a given accident year. The Claim Identification Number must be used to uniquely identify the accident and claimant. If multiple coverages are involved, each coverage must be uniquely identified through the use of Coverage and Type of Loss codes. Refer to the Reporting Instructions – Losses Section of this Plan for additional information on Claim Identification Number.

The following example illustrates several scenarios for reporting Claim Identification Number. Note that in all cases, the Claim Identification Number must be consistent for the liability and no-fault lines of business. Refer to methods 1, 2, and 3 of the example. However, it is not required for the physical damage Claim Identification Numbers to be consistent either with liability and no-fault or within physical damage. Refer to methods 2 and 3 of the example.

Sample Loss Scenario:

Company A's insured was in an accident for which he was at fault. The insured suffers injuries (\$9,000) plus lost wages (\$500) and his vehicle was damaged (\$2,100). The insured was also reimbursed for substitute transportation (\$900). The other driver was seriously injured (\$8,000), and his car was damaged (\$3,500). Company B paid for their driver's medical bills under PIP coverage and paid collision damage waiving the deductible. Company B then subrogated against the at-fault insured's insurance company. Company B also paid for a police report (\$10) and an independent medical exam (\$350) under PIP, which was included in their subrogation figure to Company A. Company B's insured then took court action against the at-fault driver for pain and suffering, etc. (\$10,000). Below is a summary of Company A's statistical reporting.

	Subline Code	Type of Loss Code	Coverage Code	Loss Amount	Claim Identification Number		
Claimant					Method 1	Method 2	Method 3
1 (Driver A)	621	05		\$1,500	ABC010	ABC010	ABC010
	625	24		\$7,500	ABC010	ABC010	ABC010
	625	34		\$500	ABC010	ABC010	ABC010
	628	11	016	\$1,600	ABC010	ABC019	ABC019
	628	09	083	\$900	ABC010	ABC019	ABC018
2 (Driver B)	621	03		\$3,500	ABC020	ABC020	ABC020
	621	01		\$10,000	ABC020	ABC020	ABC020
	621	11		\$9,160	ABC020	ABC020	ABC020

Part III - General Reporting Requirements

Section B – Losses

4. REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES

a. Allocated Loss Adjustment Expenses (ALAE)

Allocated loss adjustment expenses are the following types of expenses paid by a company in connection with the adjustment of a specific claim. ALAE are to be reported as separate records, in the same detail as indemnity losses, using the appropriate Transaction Type Code. Transaction Type Code 27 represents paid legal expenses, Transaction Type Code 29 represents paid medical expenses, and Transaction Type Code 24 represents all other paid expenses. Transaction Type Code 22 represents outstanding allocated loss adjustment expenses.

Note that salvage pool expenses should not be reported as allocated loss adjustment expenses. Refer to the Subrogation Recoveries/Expenses portion of this section for additional details.

i. Transaction Type Code 27

The following are allowable legal allocated loss adjustment expenses:

- a) Arbitration, court, and other specific items of expense, such as stenography, witnesses, summonses (excluding medical), and examinations under oath
- b) External attorney fees for claims in suit
- House counsel fees for claims in suit, excluding fees incurred to effect subrogation, provided that:
 - 1) The fees are computed at the same rate and by the same method as non-ceded claims,
 - 2) The fees reflect the total operating cost, including labor, on an individual suit basis and are substantiated by time statistics. (Operating costs are defined as expenses which are normally contained in company overhead, such as rent, heat, electricity, benefits, etc., but excludes any items of profit)

ii. Transaction Type Code 29

The following are allowable medical allocated loss adjustment expenses:

- a) Medical examinations to determine the extent of the company's liability
- b) Preferred provider network/organization service fee expenses incurred on a particular claim
- c) Expert medical or other evidence
- d) Laboratory and x-ray
- e) Autopsy
- f) Cost of medical records

Last Revision Date: 01/01/2000 Page: III:8 Print Date: 10/10/2002

Part III - General Reporting Requirements

Section B – Losses

4. REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES (Continued)

a. Allocated Loss Adjustment Expenses (ALAE) (Continued)

iii. Transaction Type Code 24

The following are allowable all other allocated loss adjustment expenses:

- a) Accident reconstruction
- b) Copies of documents
- c) Public records/police/fire reports (to the limit provided for by law)
- d) Motor vehicle registration search fees
- e) Appraisals of property (excluding motor vehicles)
- f) Special investigation of a claimant's background (including asset/credit reports)
- g) Engine oil, fluid analysis

b. Unallocated Loss Adjustment Expenses

Unallocated loss adjustment expenses are expenses paid by a company in settling a claim, that can not be directly allocated to a specific claim. Unallocated loss adjustment expenses are <u>not</u> to be reported. Examples of these expenses include:

- Overhead, salaries, and traveling expenses of company employees (other than amounts allocated as attorney fees for claims in suit)
- ii. Special investigations concerning the facts of the loss
- iii. Adjuster's fees, including those paid to independent adjusters and/or attorneys for adjusting claims (The term "adjusting" includes the investigation and adjustment of claims, the disposition of salvage, and the recovery of subrogation claims not in suit)
- iv. Fees for appraisals of motor vehicles, including preinspections and intensified appraisals
- v. Fees for retrieval of preinspection reports

5. <u>INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS</u>

The intercompany settlement reduces the dollars of loss charged against the insured to the extent he or she is free of fault by allowing his or her insurance company to recover from the company insuring the at-fault party.

When a PIP (no-fault) claim is established by a company (company #1) to cover damages caused by an at-fault third party to one of its insureds, and the company subsequently takes subrogation action against the company (company #2) insuring the at-fault party, the PIP claim reported by company #1 must follow the no-fault reporting and coding instructions set forth in this Plan.

Part III - General Reporting Requirements

Section B – Losses

5. <u>INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS (Continued)</u>

The company being subrogated against (company #2) must establish a bodily injury liability claim to cover the amount of reimbursement to company #1. The reimbursement outstanding reserve and/or payment shall be coded to the vehicle at fault and shall be reported as an outstanding and/or paid loss with Type of Loss Code 11 or 14, depending upon the particulars of the claim. The amount of the reimbursement outstanding reserve and/or payment reported by company #2 shall include any reimbursement for allocated loss adjustment expense incurred by company #1 on its PIP claim, for medical, wage, and other economic loss, and for unallocated loss adjustment expense equal to 10% of the total amount of indemnity reimbursed. The sample loss scenario depicted previously in this section illustrates this reporting requirement under Claimant 2.

The reimbursement recovery received by company #1 shall be reported as a credit entry against the PIP claim using subrogation Transaction Type Code 26 and Type of Loss Code 45. Any allocated loss adjustment expense included in the recovery shall be reported as a separate record using the applicable allocated loss adjustment expense Transaction Type Code and Type of Loss Code 45. Any unallocated loss adjustment expense included in the recovery must not be reported.

6. <u>INTRACOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS</u>

When multiple PIP (no-fault) claims are established by the same company as the result of one accident involving two or more of its insureds, the company must determine the at-fault party and then establish a separate bodily injury claim to reimburse the insured not at fault. The statistical reporting requirements for these claims are identical to those explained for company #2 above.

7. <u>SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING FROM INTER/INTRACOMPANY REIMBURSEMENTS</u>

When reporting the following types of subrogation recoveries, the records must contain all codes identical to the original entries, with the exception of the Transaction Type Code and the Accounting Date.

a. Indemnity Recoveries

Subrogation recoveries of previously reported indemnity transactions must be identified by subrogation Transaction Type Code 26. Certain expenses incurred in effecting the recovery, not to exceed the original loss amount, can be deducted from the recovery amount or reported separately with a subrogation Transaction Type Code. Such expenses include:

- i. Attorney's fees and associated costs for claims in suit
- ii. Court costs
- iii. Location/address reports





Part III - General Reporting Requirements

Section B – Losses

7. <u>SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING FROM INTER/INTRACOMPANY REIMBURSEMENTS) (Continued)</u>

a. Indemnity Recoveries (Continued)

The following are expenses that can neither be deducted from the recovery amount nor reported separately:

- i. Cost of company employees
- ii. Collection agency fees
- iii. Subrogation recovery services

b. Allocated Loss Adjustment Expense Recoveries

Subrogation recoveries of a previously reported allocated loss adjustment expense transaction must be reported as offsets to the original entries, using applicable allocated loss adjustment expense Transaction Type Codes.

8. SALVAGE RECOVERIES/EXPENSES

Salvage recovery adjustments to previously reported collision, comprehensive, and property damage entries must be identified by salvage Transaction Type Code 25, and must contain all codes identical to the original entry, with the exception of the Transaction Type Code and the Accounting Date.

The following expenses incurred to effect salvage may be netted from the recovery amount or reported as a separate record with salvage Transaction Type Code 25:

- a. Original towing and storage charges, excluding losses resulting from towing and labor
- b. Haul fees to salvage yard
- c. Pool fees of commission
- d. Auction fees
- e. Salvage title fees (to the limit provided for by law)
- f. Salvage pool expenses

9. AMOUNT OF PAID LOSS AND EXPENSE

The loss to be reported shall be the amount of paid indemnity, medical, wage, or other economic loss pertaining to a single coverage of the policy for a particular claimant. In the case of PIP (no-fault), amounts reported must be prior to recovery via intracompany or intercompany reimbursements.

Liability and PIP expense reported is the allocated loss adjustment expense paid and/or outstanding for the particular claim or coverage/accident. Paid allocated loss adjustment expense on physical damage losses is only required for ceded business, but may be optionally reported for voluntary business.

Part III - General Reporting Requirements

Section B – Losses

10. EXTENT OF VEHICLE LOSS FOR PAID LOSSES

For each property damage liability and physical damage paid loss record reported, identify whether the loss is a total or a partial vehicle loss within the Partial/Total Loss Indicator field.

Regarding vehicle claims, a total loss is any loss where the insurer takes title to the damaged vehicle and gains the salvage value of the insured vehicle. (In certain cases the policyholder may retain title to the vehicle, but the estimated salvage value is deducted from the settlement. This satisfies the definition in that the insurer in fact took title and returned it to the insured upon being reimbursed for the estimated salvage value).

A partial loss is any loss where the insurer makes payment to a policyholder of a dollar amount for the repair of the insured vehicle. The insured retains title to the vehicle. The partial/total loss status will remain as determined at first payment. All non-vehicle claims should be coded as partial losses.

Refer to the Coding Section of this Plan for specific instructions on reporting the Partial/Total Loss Indicator.

11. OUTSTANDING LOSSES (EXCLUDING PHYSICAL DAMAGE)

Outstanding losses shall be evaluated as of each quarter ending date and shall be reported in the method prescribed in the Annual Call Schedule.

Outstanding PIP (no-fault) losses may be subdivided between medical, wage, or all other economic losses, using applicable Type of Loss Codes, or outstanding PIP losses may be reported in total, using a non-split outstanding Type of Loss Code 23.

12. GLASS LOSSES

All glass losses should be reported with the appropriate Coverage Code and Type of Loss Code. Specifically,

- a. Individual glass damage losses should be reported with an other than collision Coverage Code and Type of Loss Code 03.
- b. Glass damage resulting from a collision should be reported with a collision Coverage Code and the appropriate Type of Loss Code.
- c. Glass damage resulting from an other than collision loss should be reported with an other than collision Coverage Code and the appropriate Type of Loss Code.

13. EXTRA-RISK RATING

Physical damage loss records should be coded to identify the appropriate extra-risk category as reported on the corresponding premium record. Refer to Section A – Premiums of the General Reporting Requirements Section of this Plan for additional information relative to extra-risk rating.

Part IV - Reporting Instructions - Premiums

Section A – Liability

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. **BODILY INJURY LIMITS CODE (Positions 37-38)**

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

★ 16. PROPERTY DAMAGE LIMIT CODE (Positions 39-40)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

★ 17. MEDICAL PAYMENTS LIMIT CODE (Positions 41-42)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

18. <u>BODILY INJURY CAUSED BY AN UNINSURED AUTO LIMITS CODE</u> (Positions 43-44)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

19. <u>BODILY INJURY CAUSED BY AN UNDERINSURED AUTO LIMITS CODE</u> (Positions 45-46)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

20. Reserved for Future Use (Position 47)

Report space or zero.

6. ESTIMATED ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code rounded to the nearest hundred miles.

Refer to the Coding Section for examples.

Part IV - Reporting Instructions - Premiums

Section A – Liability

22. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

★ 23. Reserved for Future Use (Positions 53-55)

Report spaces or zeros.

24. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

25. **DISCOUNT CODE (Position 57)**

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

26. Reserved for Future Use (Positions 58-60)

Report spaces or zeros.

★ 27. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

28. Reserved for Future Use (Positions 67-71)

Report spaces or zeros.

Part IV - Reporting Instructions - Premiums

Section A – Liability

29. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) digit ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

30. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

31. RATE DEPARTURE FACTOR CODE (Positions 88-90)

Report the three (3) digit numeric code. The Rate Departure Factor Code must be numeric and within the range of the current approved rate deviations.

If the transaction does not have a rate deviation report Rate Departure Factor Code 100. Any spaces or non-numeric characters will be converted to zeros.

Refer to the Coding Section for examples.

32. Reserved for Future Use (Positions 91-95)

Report spaces or zeros.

33. BODILY INJURY PREMIUM AMOUNT (Positions 96-103)

Report the combined premium for Bodily Injury, Optional Bodily Injury, Medical Payments, Bodily Injury Caused by an Uninsured Auto and Bodily Injury Caused by an Underinsured Auto rounded to the nearest whole dollar.

The Bodily Injury Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

Part IV - Reporting Instructions - Premiums

Section A – Liability

34. PROPERTY DAMAGE PREMIUM AMOUNT (Positions 104-111)

Report the property damage premium rounded to the nearest whole dollar.

The Property Damage Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 999999999 may be reported. Amounts must be right justified with leading zeros.

35. Reserved for Future Use (Positions 112-114)

Report spaces or zeros.

36. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

37. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

38. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Last Revision Date: 01/01/2000 **Page: IV:6** Print Date: 10/10/2002

Part IV - Reporting Instructions - Premiums

Section B - No-Fault

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. PIP COVERAGE CODE (Position 37)

Report the one (1) digit numeric code. Refer to the Coding Section for the applicable code.

16. PIP DEDUCTIBLE CODE (Positions 38-39)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

17. Reserved for Future Use (Positions 40-47)

Report space or zeros.

18. ESTIMATED ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code rounded to the nearest hundred miles. Refer to the Coding Section for examples.

19. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

★ 20. Reserved for Future Use (Positions 53-55)

Report spaces or zero.

Part IV - Reporting Instructions - Premiums

Section B – No-Fault

21. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

22. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

23. Reserved for Future Use (Positions 58-60)

Report spaces or zeros.

★ 24. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

25. RESERVED FOR FUTURE USE (Positions 67-71)

Report spaces or zeros.

26. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) digit ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

27. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

Part IV - Reporting Instructions - Premiums

Section B - No-Fault

28. RATE DEPARTURE FACTOR CODE (Positions 88-90)

Report the three (3) digit numeric code. The Rate Departure Factor Code must be numeric and within the range of the current approved rate deviations.

If the transaction does not have a rate deviation report Rate Departure Factor Code of 100. Any spaces or non-numeric characters will be converted to zeros.

Refer to the Coding Section for examples.

29. Reserved for Future Use (Positions 91-95)

Report spaces or zeros.

30. PIP (NO-FAULT) PREMIUM AMOUNT (Positions 96-103)

Report the PIP premium rounded to the nearest whole dollar.

The PIP Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

31. Reserved for Future Use (Positions 104-114)

Report spaces or zeros.

32. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

Part IV - Reporting Instructions - Premiums

Section B – No-Fault

33. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen 17 characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

34. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Part IV - Reporting Instructions - Premiums

Section C – Physical Damage

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. OTHER THAN COLLISION COVERAGE CODE (Positions 37-39)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

16. COLLISION COVERAGE CODE (Positions 40-42)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

17. Reserved for Future Use (Positions 43-44)

Report spaces or zeros.

18. SYMBOL CODE (Positions 45-46)

Report the two (2) digit numeric code assigned to the vehicle for the transaction being reported. Refer to the Coding Section for applicable codes and examples.

19. PRE-INSURANCE INSPECTION IDENTIFICATION CODE (Position 47)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes

20. ESTIMATED ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code rounded to the nearest hundred miles.

Refer to the Coding Section for examples.

21. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

22. ANTI-THEFT DEVICE DISCOUNT CODE (Position 53)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

Part IV - Reporting Instructions - Premiums

<u>Section C – Physical Damage</u>

★ 23. Reserved for Future Use (Positions 54-55)

Report spaces or zeros.

24. OEM COVERAGE CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

25. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

26. VALUE CODE (Positions 58-60)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

★ 27. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

28. HIGH-THEFT VEHICLE CODE (Position 67)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

29. Reserved for Future Use (Position 68)

Report space or zero.

30. EXTRA-RISK RATING CODE – OTHER THAN COLLISION (Position 69)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

31. Reserved for Future Use (Position 70)

Report space or zero.

Part IV - Reporting Instructions - Premiums

Section C – Physical Damage

32. EXTRA-RISK RATING CODE - COLLISION (Position 71)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

33. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) position ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

34. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

35. RATE DEPARTURE FACTOR CODE (Positions 88-90)

Report the three (3) digit numeric code. The Rate Departure Factor Code must be numeric and within the range of the current approved rate deviations.

If the transaction does not have a rate deviation report Rate Departure Factor Code 100. Any spaces or non-numeric characters will be converted to zeros.

Refer to the Coding Section for examples.

36. Reserved for Future Use (Positions 91-95)

Report spaces or zeros.

37. OTHER THAN COLLISION PREMIUM AMOUNT (Positions 96-103)

Report the other than collision premium rounded to the nearest whole dollar.

The Other Than Collision Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 999999999 may be reported. Amounts must be right justified with leading zeros.

Part IV - Reporting Instructions - Premiums

Section C – Physical Damage

38. COLLISION PREMIUM AMOUNT (Positions 104-111)

Report the collision premium rounded to the nearest whole dollar.

The Collision Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

39. Reserved for Future Use (Positions 112-114)

Report spaces or zeros.

40. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

41. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

42. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Part V - Reporting Instructions - Losses

Section A – Liability

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

★ 15. LIABILITY LIMITS CODE (Positions 37-38)

Report the two (2) digit numeric code for the limit under which the loss was incurred.

Refer to the Coding Section for applicable codes.

16. Reserved for Future Use (Position 39)

Report space or zero.

17. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

18. Reserved for Future Use (Positions 43-47)

Report spaces or zeros.

19. ESTIMATED ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code. The Estimated Annual Mileage Code on the loss record must match the Estimated Annual Mileage Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section A – Liability

20. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

★ 21. Reserved for Future Use (Positions 53-54)

Report spaces or zeros.

22. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

Report the one (1) digit numeric code that indicates the damage to the vehicle involved in the accident. Refer to the Coding Section for applicable codes.

23. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. The Passive Restraint Device Discount Code on the loss record must match the Passive Restraint Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

24. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. The Discount Code on the loss record must match the Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

25. Reserved for Future Use (Positions 58-60)

Report spaces or zeros.

26. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

27. Reserved for Future Use (Positions 67-71)

Report spaces or zeros.

Part V - Reporting Instructions - Losses

Section A – Liability

28. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

29. RESERVED FOR FUTURE USE (Position 81)

Report space or zero.

30. REPORTING DATE (Positions 82-84)

Report the month and year in which the claim was established. Reporting month requires a one (1) digit code in position 82. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Reporting year requires a two (2) digit code in positions 83-84. Use the third and fourth positions of the year in which the claim was established. For example, a claim established in the year 2001 shall be reported as 01 in positions 83-84.

31. Reserved for Future Use (Positions 85-86)

Report spaces or zeros.

32. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the liability type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 33. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

Part V - Reporting Instructions - Losses

Section A – Liability

34. LOSS AMOUNT (Positions 91-98)

Report the amount of the liability loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

35. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

36. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

37. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

38. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Part V - Reporting Instructions - Losses

Section B – No Fault

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. PIP COVERAGE CODE (Position 37)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable code.

16. PIP DEDUCTIBLE CODE (Positions 38-39)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

17. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

18. Reserved for Future Use (Positions 43-47)

Report spaces or zeros.

19. ESTIMATED ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code. The Estimated Annual Mileage Code on the loss record must match the Estimated Annual Mileage Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

20. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Part V - Reporting Instructions - Losses

Section B – No Fault

21. TYPE OF CLAIMANT CODE (Position 53)

Report the one (1) digit numeric code. Refer to the Coding Section for the applicable codes.

★ 22. Reserved for Future Use (Positions 54-55)

Report spaces or zeros.

23. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. The Passive Restraint Device Discount Code on the loss record must match the Passive Restraint Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

24. <u>DISCOUNT CODE (Position 57)</u>

Report the one (1) digit numeric code. The Discount Code on the loss record must match the Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

25. Reserved for Future Use (Positions 58-60)

Report spaces or zeros.

26. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

27. Reserved for Future Use (Positions 67-71)

Report spaces or zeros.

Part V - Reporting Instructions - Losses

Section B - No Fault

28. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

29. Reserved for Future Use (Positions 81-86)

Report spaces or zeros.

30. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the PIP (no-fault) type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 31. Reserved for Future Use (Positions 89-90)

Report spaces or zeros.

32. LOSS AMOUNT (Positions 91-98)

Report the amount of the PIP loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

33. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section B – No Fault

34. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

35. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

36. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Part V - Reporting Instructions - Losses

Section C – Physical Damage

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. COVERAGE CODE (Positions 37-39)

Report the three (3) digit numeric code for the coverage under which the loss was incurred. Refer to the Coding Section for applicable codes.

16. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

17. Reserved for Future Use (Positions 43-44)

Report spaces or zeros.

18. SYMBOL CODE (Positions 45-46)

Report the two (2) digit numeric code. The Symbol Code on the loss record must match the Symbol Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

19. INTENSIFIED APPRAISAL IDENTIFICATION CODE (Position 47)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

20. ESTIMATED ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code. The Estimated Annual Mileage Code on the loss record must match the Estimated Annual Mileage Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section C – Physical Damage

21. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

22. ANTI-THEFT DEVICE DISCOUNT CODE (Position 53)

Report the one (1) digit numeric code. The Anti-Theft Device Discount Code on the loss record must match the Anti-Theft Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

★ 23. Reserved for Future Use (Position 54)

Report space or zero.

24. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

Report the one (1) digit numeric code that indicates the damage to the vehicle involved in the accident. Refer to the Coding Section for applicable codes.

25. OEM COVERAGE CODE (Position 56)

Report the one (1) digit numeric code. The OEM Coverage Code on the loss record must match the OEM Coverage Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

26. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. The Discount Code on the loss record must match the Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

27. VALUE CODE (Positions 58-60)

Report the three (3) digit numeric code. The Value Code on the loss record must match the Value Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

Part V - Reporting Instructions - Losses

Section C – Physical Damage

28. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

29. HIGH-THEFT VEHICLE CODE (Position 67)

Report the one (1) digit numeric code. The High-Theft Vehicle Code on the loss record must match the High-Theft Vehicle Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

30. Reserved for Future Use (Position 68)

Report space or zero.

31. EXTRA-RISK RATING CODE – OTHER THAN COLLISION (Position 69)

Report the one (1) digit numeric code. The Extra-Risk Rating Code - Other Than Collision on the loss record must match the Extra-Risk Rating Code - Other Than Collision as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

32. Reserved for Future Use (Position 70)

Report space or zero.

33. EXTRA-RISK RATING CODE - COLLISION (Position 71)

Report the one (1) digit numeric code. The Extra-Risk Rating Code - Collision on the loss record must match the Extra-Risk Rating Code - Collision as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

34. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

35. Reserved for Future Use (Positions 81-84)

Report spaces or zeros.

Part V - Reporting Instructions - Losses

<u>Section C – Physical Damage</u>

36. CATASTROPHE CODE (Positions 85-86)

Catastrophe Code is a serial number assigned by the Insurance Services Offices (ISO) to a natural disaster. Report the applicable two (2) digit numeric Catastrophe Code. If not applicable, report spaces or zeros.

Refer to CAR's Statistical Edit Package for a list of applicable codes.

37. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the physical damage type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 38. Reserved for Future Use (Positions 89-90)

Report spaces or zeros.

39. LOSS AMOUNT (Positions 91-98)

Report the amount of the physical damage loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

40. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. For physical damage claims, it is acceptable to use a different claim number to identify payments under more than one physical damage coverage. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

<u>Section C – Physical Damage</u>

41. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

42. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

43. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Part VI - Coding Section

MODEL YEAR CODE

• Model Year Code is a two digit numeric code that corresponds to the third and fourth positions of the model year of the vehicle

Examples:

Vehicle	Model Year	Code
Dodge Colt	1989	89
Ford Escort	1996	96
Toyota Camry	2000	00

Part VI - Coding Section

CLASS GROUP CODE

- \star
- This code is valid for Policy Effective Years 2002 and prior.
- For voluntary business, companies may optionally use Class Group Code 1.

Description	Code
Voluntary	0
Ceded – Private Passenger	1

Part VI - Coding Section

DISCOUNT CODE

Description	Multi-Car Status * Exists	Multi-Car Status * Does Not Exist
Multi-Car Discount Applies (Rate Class 10 and 15 only)	1	
Annual Mileage Discount Applies **	2	3
Multi-Car Discount (Rate Class 10 and 15 only) and Annual Mileage Discount Apply	4	
Motorcycle Rider Training Discount Applies		6
No Discount Applies	5	9

- * Multi-Car Status is defined as "An individual, (or husband and wife resident in the same household) who owns two or more automobiles ... At least two of the automobiles must be classified as use class 10, 15 or 30. The premium reduction applies only to Class 10 and 15 automobiles". Therefore Multi-Car Status may exist but the Multi-Car Discount may not be applicable.
- ** The Estimated Annual Mileage Discount does not apply to other than collision coverage, therefore, when only other than collision coverage is afforded and no other discounts apply, code space or zero (0) for the Discount Code.

*

Part VI - Coding Section

PRODUCER CODE

- Producer Code is a six position alphanumeric code
- Producer Code should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- ★ Note that a unique Producer Code is required to be reported for each agency office location.

Examples:

Producer Code	Code	
A1234	A1234 <i>b</i>	
987	987 <i>bbb</i>	
AB5678	AB5678	

Part VI - Coding Section

LIABILITY LIMITS CODE

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

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

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

MEDICAL PAYMENTS		
Limits of Liability	Code	
\$ 500	01	
750	02	
1,000	03	
2,000	04	
5,000	05	
10,000	06	
15,000	07	
20,000	08	
25,000	09	
50,000	10 ***	
100,000	11 ***	
No Medical Payments	00	

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

- * If both mandatory (code 01) and optional (code 04) Bodily Injury coverage are purchased, Limits Code 04 must be reported.
- ** If the 20/40 limit of Underinsured Auto coverage is purchased, although there is no associated cost, Limits Code 04 must be reported.
- ★ *** This limit is available for voluntary business only.

Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

TYPE OF LOSS CODE - LIABILITY

Description	Code
Bodily Injury to Others – Excluding claims covered under Type of Loss Code 02	01
Bodily Injury to Others – Guest claims, claims arising out of accidents occurring off the ways of the Commonwealth or claims out of Massachusetts	02
Damage to Someone Else's Property (Property Damage Liability)	03
Medical Payments	05
Bodily Injury Caused by an Uninsured Automobile	06
Bodily Injury Caused by an Underinsured Automobile	07
Bodily Injury to Others – Inter or Intra Company Reimbursements resulting from PIP (No-Fault) claims (excluding claims covered under Type of Loss Code 14)	11
Bodily Injury to Others – Inter or Intra Company Reimbursements resulting from PIP (No-Fault) claims arising out of accidents occurring off the ways of the Commonwealth or claims out of Massachusetts	14

PRIVATE PASSENGER RECORD LAYOUT MODIFICATION KEY

The Private Passenger Record Layout Modification Key should be used in conjunction with the Private Passenger Record Layouts contained on the following pages. The key identifies those fields to which modifications were made in prior policy years. For example, the field may have been reported in an alternate field position, or the field was added to or eliminated from the Private Passenger Record Layout. For reporting instructions for prior effective years, refer to the Massachusetts Private Passenger Automobile Statistical Plan in effect for the specific year (which can be found on CAR's website (www.commauto.com)).

No.	Valid Policy Effective Date(s)	Field	Subline Codes	Reporting Position
1	1989 through 1995	Intensified Appraisal ID Code	628 Losses	47
2	1991 and subsequent	Producer Code	All	61 – 66
3	1995 and prior	Model Year Code	628	43 – 44
		ZIP Code	All	72 – 80
4	1995 and subsequent	Vehicle Identification Number	All	131 – 147
		Model Year Code	All	51 – 52
5	(5) 1996 and subsequent	Rate Departure Factor Code	All Premiums	88 – 90
6	2001 and subsequent	OEM Coverage Code	628	56
7	2001 and subsequent Optional 1/1/1999-12/31/2000	Model Year Century Code	All	36
	2001 and subsequent	Property Damage Limit Code	621	39 – 40
8	2000 and prior		021	40
	2002 and prior	Class Group Code	All	54
9	2003 and subsequent	Reserved for Future Use	<u> </u>	J-7
100	2002 and prior	Claim Count	All Losses	90
10	2003 and subsequent	Reserved for Future Use	All LUSSES	

*

*

Last Revision Date: 01/01/2003 Page: VIII:1 Print Date: 10/10/2002

LIABILITY PREMIUM

I		
1	COMPANY OR	
2	GROUP NUMBER C	ODE
3	GROOF NOMBER CODE	
4	TRANSACTION TYPE	CODE
5	TIVINOTOTICIVITIE	OODL
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY	Month
9	EFFECTIVE	Year
10	DATE	Year
11	TRANSACTION	Month
12	EFFECTIVE	Year
13	DATE	Year
14	POLICY	Month
15	EXPIRATION	Year
16	DATE	Year
17	STATE CODE	
18	317.112.00DE	
19	PREMIUM TOWN	J I
20	CODE	-
21		
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CO	DE
24	ANNUAL STATEMENT	
25	LINE OF BUSINESS CODE	
26	2223 332	
27	SUBLINE CODE	
28		
29		
30		
31		
32	CLASSIFICATION CODE	
33		
34		
35		
36	MODEL YEAR CENTURY C	ODE ⑦
37	BODILY INJURY	
38	LIMITS CODE	
39	PROPERTY DAMAGE LIN	IIT CODE
40	8	
41	MEDICAL PAYMENTS	
42	LIMIT CODE	
43	BODILY INJURY CAUSED BY AN	
44	UNINSURED AUTO LIMITS CODE	
45	BODILY INJURY CAUSED BY AN	
46	UNDERINSURED AUTO LIMITS CODE	
47	Reserved for Future Use	
48	ESTIMATED ANNUAL	
49	MILEAGE CODE	
50		

51	MODEL YEAR CODE ⑤
52	MODEL TEAR CODE
53	Reserved for Future Use
54 🗙	9
55	
56	PASSIVE RESTRAINT DISC. CODE
57	DISCOUNT CODE
58	
59	Reserved for Future Use
60	
61	
62	PRODUCER CODE
63	
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68	Decembed for 5: true 11-
69	Reserved for Future Use
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73 74	
	710 0005
75 76	ZIP CODE
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84	EVENOUE
85	EXPOSURE
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87	
88	DATE DEDADTI DE EACTOR COSE
89	RATE DEPARTURE FACTOR CODE
90	\$
91	
92	
93	Reserved for Future Use
94	
95	
96	
97	BODILY INJURY
98	PREMIUM
99	. I CLIVIIOIVI
100	

101	DODILY IN ILIDY
102	BODILY INJURY PREMIUM (Continued)
103	FREIMIOW (Continued)
104	
105	
106	
107	PROPERTY DAMAGE
108	PREMIUM
109	
110	
111	
112	Decement
113	Reserved for Future Use
114	Future OSE
115	
116	
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118	
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120	
121	DOLLOV
122	POLICY IDENTIFICATION
123	NUMBER
124	NOWBER
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137	VEHICLE
138	IDENTIFICATION
139	NUMBER
140	4
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142	
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147	
148	
149	COMPANY USE

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

150

LIABILITY LOSS

1	COMPANY OR	
2	GROUP NUMBER CO	ODE
3	3.13 3 . 11 3 2211332	
4 5	TRANSACTION TYPE CODE	
6	ACCOUNTING Month	
7	DATE	Year
8	POLICY	Month
9	EFFECTIVE	Year
10	DATE	Year
11	DATE	Month
12		
	ACCIDENT	Day
13	DATE	Day
14		Year
15	Dear of for Est	Year
16	Reserved for Future	use
17	STATE CODE	
18		
19	PREMIUM TOWN	1
20	CODE	
21		
22	CAR IDENTIFICATION	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT LINE OF BUSINESS CODE	
25		
26		
27	SUBLINE CODE	
28		
29		
30		
31		
32	CLASSIFICATION CODE	
33		
34		
35		
36	MODEL YEAR CENTURY (ODE 7
37	LIARII ITV LIMITS CO	DDE
38	LIABILITY LIMITS CODE	
39	Reserved for Future	Jse
40	ACCIDENT TOWN	
41	CODE	•
42	OODL	
43		
44		
45	Reserved for Future	Jse
46		
47		
48	FOTIMATED AND U	Δ1
49	ESTIMATED ANNUAL	
50	MILEAGE CODE	

51	MODEL YEAR CODE ⑤	
52	MODEL YEAR CODE (9)	
53	Reserved for Future Use 9	
54		
55	PARTIAL/TOTAL LOSS INDICATOR	
56	PASSIVE RESTRAINT DISC. CODE	
57	DISCOUNT CODE	
58		
59	Reserved for Future Use	
60		
61		
62	PRODUCER CODE	
63		
64	2	
65		
66		
67		
68		
69	Reserved for Future Use	
70		
71		
72		
73		
74		
75	ZIP CODE	
76	4	
77		
78		
79		
80		
81	Reserved for Future Use	
82	REPORTING Month	
83	DATE Year	
84	Year	
85	Pagented for Fishers Use	
86	Reserved for Future Use	
87	TYPE OF LOSS CODE	
88	TIFE OF LOSS CODE	
89	B	
90	Reserved for Future Use 0	
91		
92		
93		
94	LOSS AMOUNT	
95	2000, 49100141	
96		
97		
98		
99	CLAIM IDENTIFICATION	
100	NUMBER	

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105	
106	CI AIRA
107	CLAIM IDENTIFICATION
108	NUMBER (Continued)
109	NOWBER (Continued)
110	
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112	
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116	
117	
118	
119	
120	
121	POLICY
122	IDENTIFICATION
123	NUMBER
124	
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133 134	
135	
136	
137	VEHICLE
138	IDENTIFICATION NUMBER
139	INUIVIBER
140	4
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148	
149	COMPANY USE

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

150

NO-FAULT PREMIUM

	1	
1	COMPANY OR	
2	GROUP NUMBER CO	ODE
3		
4	TRANSACTION TYPE	CODE
5	400011171110	
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY	Month
9	EFFECTIVE DATE	Year
10		Year
11	TRANSACTION	Month
12	EFFECTIVE	Year
13	DATE	Year
14	POLICY	Month
15	EXPIRATION	Year
16	DATE	Year
17	STATE CODE	
18		
19	PREMIUM TOWN	, l
20	CODE	
21	CODE	
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT	
25	LINE OF BUSINESS O	
26		
27	SUBLINE CODE	
28		
29		
30		
31		
32	CLASSIFICATION	١
33	CODE	
34		
35		
36	MODEL YEAR CENTURY (CODE 7
37	PIP COVERAGE CO	DDE
38	PIP DEDUCTIBLE CO	ODE .
39	FIF DEDUCTIBLE CO	JUL
40		
41		
42		
43	Boon and for Firthern	Lloo
44	Reserved for Future	USE
45		
46		
47		
48		
49	ESTIMATED ANNUAL	
50	MILEAGE CODE	
	L	

51	MODEL YEAR CODE ⑤		
52	MODEL YEAR CODE (5)		
53			
54	Reserved for Future Use		
55			
56	PASSIVE RESTRAINT DISC. CODE		
57	DISCOUNT CODE		
58			
59	Reserved for Future Use		
60			
61			
62	PRODUCER CODE		
63			
64	2		
65			
66			
67			
68	5 16 5		
69	Reserved for Future Use		
70			
71			
72			
73			
74	ZIP CODE		
75			
76			
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78 79			
80			
81			
82			
83			
84	EVPOSUSE		
85	EXPOSURE		
86			
87 88	DATE DEDADTI DE CACTOR COSE		
	RATE DEPARTURE FACTOR CODE		
89 90	(5)		
90			
91			
93	Reserved for Future Use		
93	reserved for Future ose		
95			
96			
97			
98	PIP (NO-FAULT)		
99	PREMIUM		
100			
100			

101	PIP (NO-FAULT)	
102	PREMIUM (Continued)	
103	T NEIWIGW (Continued)	
104		
105		
106		
107		
108		
109	Reserved for Future Use	
110		
111		
112		
113		
114		
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116		
117		
118		
119		
120		
121	POLICY	
122	IDENTIFICATION	
123	NUMBER	
124	NONBER	
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128		
129		
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131		
132		
133		
134		
135		
136		
137	VEHICLE	
138	IDENTIFICATION	
139	NUMBER	
140	4	
141		
142		
143		
144		
145		
146		
147		
148		
149	COMPANY USE	
150		

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

NO-FAULT LOSS

4		1
1	COMPANY OR	
3	GROUP NUMBER CODE	
5	TRANSACTION TYPE	CODE
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY	Month
9	EFFECTIVE	Year
10	DATE	Year
11		Month
12		Day
13	ACCIDENT	Day
14	DATE	Year
		Year
15	Pager and for Fust are	
16 17	Reserved for Future	Use
17	STATE CODE	
18		
20	PREMIUM TOWN	1
21	CODE	
22	CAR IDENTIFICATION CODE	
23		
24	TYPE OF RISK CODE	
25	ANNUAL STATEMENT	
26	LINE OF BUSINESS CODE	
27	SUBLINE CODE	
28		
29	SUBLINE CODE	
30		
31	CLASSIFICATION	
32		
33	CODE	
34		
35		
36	MODEL YEAR CENTURY CODE ①	
37	PIP COVERAGE CO	DDE
38		
39	PIP DEDUCTIBLE CO	JUE
40	4 0 0 1 D 5 1 =	
41	ACCIDENT TOWN	
42	CODE	
43		
44		
45	Reserved for Future	Use
46		
47		
48	ECTIMATED ANNIHAL	
49	ESTIMATED ANNUAL MILEAGE CODE	
50	WILLAGE GODE	

51	MODEL YEAR CODE 5	
52	MODEL YEAR CODE (5)	
53	TYPE OF CLAIMANT	
54★	D	
55	Reserved for Future Use 9	
56	PASSIVE RESTRAINT DISC. CODE	
57	DISCOUNT CODE	
58		
59	Reserved for Future Use	
60		
61		
62	DDODLIGED CODE	
63	PRODUCER CODE	
64	2	
65		
66		
67		
68		
69	Reserved for Future Use	
70		
71		
72		
73		
74		
75	ZIP CODE	
76	4	
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82		
83		
84	Reserved for Future Use	
85		
86		
87	TYPE OF LOSS CODE	
88	2 3. 2000 0002	
89	Reserved for Future Use 10	
90★	Neserveu für Future üse 10	
91		
92		
93		
94	LOSS AMOUNT	
95		
96		
97		
98		
99	CLAIM IDENTIFICATION	
100	NUMBER	

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102	
103	
104	
105	
106	
107	CLAIM
108	IDENTIFICATION
109	NUMBER (Continued)
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	POLICY
122	IDENTIFICATION
123	NUMBER
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131	
132	
133	
134	
135	
136	
137	VEHICLE
138	IDENTIFICATION
139	NUMBER
140	4
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145	
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148	
149	COMPANY USE
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Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Part VIII - Record Layouts

PHYSICAL DAMAGE PREMIUM

1	COMPANY OR		
2	GROUP NUMBER C	ODE	
3			
5	TRANSACTION TYPE CODE		
6	ACCOUNTING	Month	
7	DATE	Year	
8	POLICY	Month	
9	EFFECTIVE	Year	
10	DATE	Year	
11	TRANSACTION	Month	
12	EFFECTIVE	Year	
13	DATE	Year	
14	POLICY	Month	
15	EXPIRATION	Year	
16	DATE	Year	
17	STATE CODE		
18	STATE CODE		
19	DDEMI IM TOWA		
20	PREMIUM TOWN CODE	N	
21	CODE		
22	CAR IDENTIFICATION CODE		
23	TYPE OF RISK CODE		
24	ANNUAL STATEMENT		
25			
26	LINE OF BUSINESS CODE		
27			
28	SUBLINE CODE		
29			
30			
31			
32	CLASSIFICATION	١	
33	CODE		
34			
35			
36	MODEL YEAR CENTURY C	ODE ⑦	
37	OTHER THAN GOVE	OLON	
38	OTHER THAN COLLI: COVERAGE COD		
39	COVERAGE COD	_	
40	2011-2-2		
41	COLLISION COVERAGE CODE		
42	COVERAGE COD	_	
43		0	
44	Reserved for Future Use	e ③	
45	SAMBOI CODE		
46	SYMBOL CODE		
47	PRE-INSURANCE INSP. ID CODE		
48	ESTIMATED ANNIHAL		
49	ESTIMATED ANNUAL MILEAGE CODE		
50	WILLAGE GODE		

51	MODEL YEAR CODE (5)
52	_
53 54★	ANTI-THEFT DEVICE DISC. CODE
55	Reserved for Future Use 9
56	OEM COVERAGE CODE 6
57	DISCOUNT CODE
58	
59	VALUE CODE
60	
61	
62	PRODUCER CODE
63	
64	2
65	
66	HIGH-THEFT VEHICLE CODE
68	Reserved for Future Use
69	EXTRA-RISK RATING CODE – OTC
70	Reserved for Future Use
71	EXTRA-RISK RATING CODE – COLL
72	2,111,111,011,111,111,011,011,011
73	
74	
75	ZIP CODE
76	
77	4
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79	
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84	EXPOSURE
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86	
87	
88	RATE DEPARTURE FACTOR CODE
89	(5)
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91	
92	B16. 5 : 11
93	Reserved for Future Use
94	
95	
96	OTHER THAN
97	OTHER THAN COLLISION
98	PREMIUM
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101	OTHER THAN
102	COLLISION PREMIUM
102	(Continued)
103	(Continued)
105	
106	
107	COLLISION
108	PREMIUM
109	
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112	Reserved for
113	Future Use
114	i diare osc
115	
116	
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119	
120	
121	POLICY
122	IDENTIFICATION
123	NUMBER
124	Nomber
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136	VELUC: 5
137	VEHICLE
138	IDENTIFICATION NUMBER
139	NUMBER
140	4
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148	
149	COMPANY USE

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

150

PHYSICAL DAMAGE LOSS

1	COMPANY OR											
2	GROUP NUMBER C	ODE										
3	<u> </u>											
4	TRANSACTION TYPE	CODE										
5		Month										
6	ACCOUNTING DATE	Month										
7		Year										
8	POLICY	Month										
9	EFFECTIVE	Year										
10	DATE	Year										
11		Month										
12	ACCIDENT	Day										
13	DATE	Day										
14		Year										
15		Year										
16	Reserved for Future	Use										
17	STATE CODE											
18												
19	PREMIUM TOWN	١										
20	CODE											
21	CAR IDENTIFICATION CODE											
22	CAR IDENTIFICATION CODE											
23	TYPE OF RISK CODE											
24	ANNUAL STATEMENT											
25	LINE OF BUSINESS CODE											
26	STIDLINE CODE											
27												
28	SUBLINE CODE											
29												
30												
32	CLASSIFICATION											
33	CODE	`										
34	OODL											
35												
36	MODEL YEAR CENTURY (CODE (7)										
37	COVED 4 OF COD	_										
38	COVERAGE COD											
39												
40	ACCIDENT TOWI	_v										
41	CODE											
42												
43	Pagantad for Fitting Us	e (3)										
44	Reserved for Future Use											
45	SYMBOL CODE											
46	GTIVIBOL CODE											
47	INTENSIFIED APPRAISAL II	CODE(1)										
48	ESTIMATED ANNU	IAL										
49	MILEAGE CODE											
50	2											

51	MODEL YEAR CODE ⑤
52	
53	ANTI-THEFT DEVICE DISC. CODE
54	Reserved for Future Use 9
55	PARTIAL/TOTAL LOSS INDICATOR
56	OEM COVERAGE CODE 6
57	DISCOUNT CODE
58	
59	VALUE CODE
60	
61	
62	PRODUCER CODE
63	_
64	2
65	
66	
67	HIGH-THEFT VEHICLE CODE
68	Reserved for Future Use
69	EXTRA-RISK RATING CODE – OTC
70	Reserved for Future Use
71	EXTRA-RISK RATING CODE – COLL.
72	
73	
	710 0005
75 76	ZIP CODE
77	4
78	
79	
80	
81	
82	
83	Reserved for Future Use
84	
85	
86	CATASTROPHE CODE
87	TVDE OF LOSS CODE
88	TYPE OF LOSS CODE
89	
90★	Reserved for Future Use
91	
92	
93	
94	
95	LOSS AMOUNT
96	
0-	
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98	
	CLAIM IDENTIFICATION

101	
102	
103	
104	
105	
106	CLAIM
107	IDENTIFICATION
108	NUMBER (Continued)
109	
110	
111	
112	
113	
114	
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116	
117	
118	
119	
120	
121	POLICY
122	IDENTIFICATION
123	NUMBER
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132	
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134	
135	
136	
137	VEHICLE
138	IDENTIFICATION
139	NUMBER
140	4
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148	
149	COMPANY USE
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Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Last Revision Date: 01/01/2002 Page: VIII:7 Print Date: 10/10/2002

A

Accident Date, V:1–V:2, V:7–V:8, V:13–V:14
Accident Reporting, III:8
Accident Town Code, V:3, V:9, V:15
Accident Town Tables *See* Premium Town Tables
Accounting Date, IV:1, IV:7, IV:13, V:1, V:7, V:13
Adjustments, II:4
Allocated Loss Adjustment Expenses (ALAE),
III:9–III:10
Annual Statement Line of Business Code, IV:2,
IV:8, IV:14, V:2, V:8, V:14, VI:5
Anti-Theft Device Discount Code, IV:15, V:16,
VI:40

C

CAR Identification Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:3 Catastrophe Code, V:18 Claim Definition, III:6 Claim Identification Number, V:6, V:11–V:12, V:18-19, VI:24 reporting of, III:8 Classification Code, IV:3, IV:9, IV:15, V:3, V:9, assignment of statistical classification, VI:7 Miscellaneous Rated As Private Passenger, Non-Owned Automobiles, VI:12 Private Passenger, VI:8-VI:9 Private Passenger Motorcycles, VI:11 Special Rating and Adjustment, VI:12 Collision Coverage Code, IV:15, VI:35 Companies in a Run-Off Position, II:2 Company (Group) Number Code, IV:1, IV:7, IV:13, V:1, V:7, V:13 Coverage Code, V:15

D

Data Reporting Requirements, II:2–II:4, II:3, II:4 alphanumeric/numeric coding, II:3 consolidated shipment reporting, II:3 monthly/quarterly submissions, II:3 reporting of spaces, II:3

D (continued)

Decision Tables
Table of Required Fields, A:1
Classification Code Decision Table, A:2
Coverage Code Decision Table, A:3
Discount Code, IV:4, IV:10, IV:16, V:4, V:10, V:16, VI:19

\mathbf{E}

Effective Date of the Plan, I:2
Endorsements
reporting changes in coverage, III:1–III:2
as of policy effective date, III:1
subsequent to policy effective date, III:2
Estimated Annual Mileage Code, IV:3, IV:9,
IV:15, V:3, V:9, V:15, VI:14
Exposure, IV:5, IV:10, IV:17, VI:22
reporting of exposure, III:1
Extent of Vehicle Loss. *See* Partial/Total Loss Indicator
Extra-Risk Rating, III:4, III:13
Extra-Risk Rating Code, V:17
Collision, IV:17, V:17, VI:44
Other Than Collision, IV:16, V:17, VI:43

G

Glass Losses, III:13

H

High-Theft Vehicle Code, IV:16, V:17, VI:42

I

Installment Policies, III:5
Intensified Appraisal Identification Code, V:15,
VI:39
Intercompany Reimbursement of PIP Claims,
III:10–III:11
Intracompany Reimbursement of PIP Claims, III:11

L	P
Liability Limits Codes, IV:3, VI:27 BI Caused by an Underinsured Auto Limits Code, IV:3 BI Caused by an Uninsured Auto Limits Code, IV:3	Partial/Total Loss Indicator, III:13, V:4, V:16, VI:17 Passive Restraint Device Discount Code, IV:4, IV:10, V:4, V:10, VI:18 PIP Coverage Code, IV:9, V:9, VI:29
Liability Limits Codes Bodily Injury Limit Code, IV:3 Liability Limits Code (Losses), V:3 Medical Payments Limit Code, IV:3 Property Damage Limit Code, IV:3 Limits in Excess (LEX) Records, VII:3	PIP Deductible Code, IV:9, V:9, VI:30 Policy Effective Date, IV:1, IV:7, IV:13, V:1, V:7, V:13 Policy Expiration Date, IV:2, IV:8, IV:14 Policy Extension, III:5 Policy Identification Number, IV:6, IV:11, IV:18,
Loss Amount, V:6, V:11, V:18 Loss Requirements, III:6–III:13 reporting of losses, III:6 Low Volume Companies, II:1, VII:2 eligibility, II:1 non-compliance penalties, VII:8	V:6, V:12, V:19, VI:25 Pre-Insurance Inspection Identification Code, IV:15, VI:38 Premium Amounts Bodily Injury Premium Amount, IV:5 Collision Premium Amount, IV:18 Other Than Collision Premium Amount, IV:17
M	PIP (No-Fault) Premium Amount, IV:11 Property Damage Premium Amount, IV:6
Massachusetts Annual Statement Page 15, II:2 non-compliance penalties, VII:10 reconciliation of, II:2, VII:6 Massachusetts Automobile Insurance Expense Call, II:2, VII:6 non-compliance penalties, VII:10 Model Year Century Code, IV:3, IV:9, IV:15, V:3, V:9, V:15, VI:13 Model Year Code, IV:4, IV:9, IV:15, V:4, V:9, V:16, VI:15 Multiple Year Policies, III:5	Property Damage Premium Amount, IV.6 Premium Requirements, III:1–III:5 premium cancellation, III:2–III:3 flat cancellation, III:2 pro rata cancellation, III:3 short rate cancellation, III:3 reporting of premiums, III:1 Premium Town Code, IV:2, IV:8, IV:14 Premium Town Tables, B:1-14 Alphabetical Listing, B:1-7 Numerical Listing, B:8-14 Producer Code, IV:4, IV:10, IV:16, V:4, V:10, V:17, VI:20
Newly Reporting Companies, II:1, VII:1	R
Nil Submission, II:1, VII:2 associated penalties, VII:7	Rate Departure Factor Code, IV:5, IV:11, IV:17, VI:23 Rate Deviations, III:5
OEM Coverage Code, III:1, IV:16, V:16, VI:41 Other Than Collision Coverage Code, IV:15, VI:33 miscellaneous coverages, VI:34 Outstanding Losses, III:13	Rate Edit appeal process, VII:5 associated penalties, VII:9 error tolerances, VII:5 penalty reduction, VII:9

Appendix A - Classification and Coverage Code Decision Tables

TABLES OF REQUIRED PRIVATE PASSENGER FIELDS

The fields identified below are required to be reported on all private passenger statistical records and are therefore not listed in the Decision Tables contained on the following pages. For all other fields not noted below, refer to the Classification Code and Coverage Code Decision Tables to determine which fields are required to be reported.

Fields Common to All Records

Accounting Date

Annual Statement Line of Business Code

CAR Identification Code

PIP Coverage Code (No-Fault)

PIP Deductible Code (No-Fault)

Policy Effective Date

Policy Identification Code

Producer Code

State Code

 \star

Subline Code

Transaction Type Code

Fields Common to Premium Records Only

Policy Expiration Date

Premium Amounts

Transaction Effective Date

Fields Common to Loss Records Only

Accident Date

Catastrophe Code (Physical Damage)

Claim Identification Number

Loss Amount

Reporting Date (Liability)

Type of Claimant Code (No-Fault)

Type of Loss Code

Appendix A - Classification and Coverage Code Decision Tables

CLASSIFICATION CODE DECISION TABLE

Classification Code	Rating Class	Accident Town Code	Anti-Theft Device Discount	Coverage Code (Phys. Dam.)	Discount Code	Estimated Annual Mileage	Exposure	Extra-Risk Rating Codes	High-Theft Vehicle Code	Intensified Appraisal Code	Limits Codes (Liability)	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Passive Restraint Device	Pre-Insurance Insp. ID Code	Premium Town Code	Rate Departure Factor Code	Symbol Code	Type of Risk Code	Value Code	Vehicle Identification Number	ZIP Code
###1##	10	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###2##	15	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###3##	17	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###4##	18	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###5##	30	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###6##	20	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###7##	21	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###8##	25	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
###9##	26	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
0400##		Υ	N	Υ	N	N	Υ	Υ	Υ	Υ	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	Υ	Υ
0408##		Υ	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	Υ
0409##		Υ	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	Υ
041###		Υ	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	Υ
042600		Υ	N	Υ	N	N	Υ	Υ	Υ	N	Υ	N	N	N	N	N	N	Υ	Υ	N	Υ	N	N	Υ
0453##		Υ	N	Υ	N	N	Υ	Υ	Υ	N	N	N	N	N	N	N	N	Υ	Υ	N	Υ	N	Υ	Υ
0455##		Υ	N	Υ	N	N	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	N	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
0459##		Υ	N	Υ	N	N	Υ	Υ	Υ	N	N	N	N	N	N	N	N	Υ	Υ	N	Υ	N	Υ	Υ
048300		Υ	N	Υ	N	N	Υ	Υ	Υ	Υ	Υ	N	N	N	Υ	N	Υ	Υ	Υ	N	Υ	N	Υ	Υ
049500		Υ	N	Υ	N	N	Υ	Υ	Υ	N	Υ	N	N	N	N	N	N	Υ	Υ	N	Υ	N	N	Υ
0539##		Υ	Υ	Υ	N	N	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	N	Υ	Υ
0608##		Υ	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	Υ
0609##		Υ	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	Υ
061###		Υ	N	Υ	Υ	N	Υ	Υ	Υ	N	Υ	Υ	Υ	N	Υ	N	N	Υ	Υ	N	Υ	Υ	Υ	Υ
190000		N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
700000		N	N	Υ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	Υ	N	N	N
800000		N	N	Y	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	Y	N	N	N
902000		N	N	Y	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	Y	N	N	N
998000		N	N	Y	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	Y	N	N	N

Appendix A - Classification and Coverage Code Decision Tables

COVERAGE CODE DECISION TABLE

- For all shaded areas, refer to the Classification Code Decision Table
- Applicable to Physical Damage records

	Other Than Collision																				
Coverage Code	Accident Town Code	Anti-Theft Device Discount	Classification Code	Discount Code	Estimated Annual Mileage	Exposure	Extra-Risk Rating Code	High-Theft Vehicle Code	Intensified Appraisal Code	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Pre-Insurance Insp. ID Code	Premium Town Code	Type of Risk	Symbol Code	Rate Departure Factor	Value Code	Vehicle Identification Number	ZIP Code
056,057	N	N	Υ	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	Υ	N	N	N
060,063			Υ							N	N					Υ		Υ			
080 - 082	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
083-087	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
089	N	N	Υ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Other OTC Cov.			Υ			_										Υ		Υ			

	Collision																				
Coverage Code	Accident Town Code	Anti-Theft Device Discount	Classification Code	Discount Code	Estimated Annual Mileage	Exposure	Extra Risk-Rating Code	High-Theft Vehicle Code	Intensified Appraisal Code	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Pre-Insurance Insp. ID Code	Premium Town Code	Type of Risk	Symbol Code	Rate Departure Factor	Value Code	Vehicle Identification Number	ZIP Code
012-019		N	Υ													Υ		Υ			
041		N	Υ				N			N	N					Υ		Υ			
040, 042- 049		N	Υ				N									Υ		Υ			
072-079		N	Υ													Υ		Υ			
092		N	Υ							N	N					Υ		Υ			
096,097	N	N	Υ	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	Υ	N	N	N
000,001																					