Massachusetts Private Passenger Automobile Statistical Plan

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 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. ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code. The Annual Mileage Code on the loss record must match the 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.

Massachusetts Private Passenger Automobile Statistical Plan

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	500,000	15 #	
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	500,000	15 #	
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	80	
25,000	09	
50,000	10 ***	
100,000	11 ***	
All Other Limits Not Above	49 ****	
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	500,000	15 #
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.
- **** Optional for policies effective 1/1/05 12/31/05 and mandatory for policies effective 1/1/06 and subsequent.
- ★ # Mandatory for policies effective 4/1/07 and subsequent.