

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part II - General Rules**

**B. REPORTING METHOD (Continued)**

The following general instructions apply:

1. Each premium and loss shall be reported on an individual transaction-by-transaction basis in accordance with the instructions and codes contained in this Plan.
2. Companies are responsible for the completeness and accuracy of their own data. Prior to the submission of statistics, the company shall perform an audit of the statistics being reported to detect and correct any error in the assignment of statistical codes contained in the Coding Section of this Plan.
- ★ 3. All coding must be numeric except for the following fields: Anti-Theft Device Discount Code, Discount Code, Producer Code, Policy Identification Number, Vehicle Identification Number and Company Use fields on premium records and Anti-Theft Device Discount Code, Discount Code, Producer Code, Policy Identification Number, Claim Identification Number, Vehicle Identification Number and Company Use fields on loss records. These fields may be reported with any combination of alphanumeric codes. Fields reserved for future use must be reported with spaces or zero filled.
4. For purposes of the Massachusetts Private Passenger Automobile Statistical Plan, all references to the reporting of spaces in any field will be denoted by an italicized lower case *b*. For example, in this Plan, Policy Identification Number 12345 would be denoted by 12345***bbbbbbbbb*** (where *b* denotes a space). In this example, the symbol *b* indicates that a space would be reported by the company in every unused position of the Policy Identification Number field.
5. Data should be reported to CAR as follows:
  - a. Each submission must be filed on a monthly basis with the exception of outstanding loss records, which should be filed quarterly in the March, June, September and December shipments. The records must be submitted in accordance with the Call Schedule that is published annually as an Accounting and Statistical Notice.
  - b. For those companies affiliated with a group, statistical data must be reported to CAR at the individual company number level, rather than at the group company number level.
  - c. In order to assure that a company's submission of data for a particular accounting month is complete, all premium and paid loss data for each accounting month must be submitted to CAR in a single mailing. However, it is acceptable for quarterly outstanding loss data to be submitted separately.

If a company is not able to consolidate their shipments for mailing to CAR, a request for waiver from this requirement must be filed with CAR. If CAR grants a waiver to this requirement, it is necessary for the company to continue to submit their data shipments to CAR in the same manner for each subsequent accounting month.

- d. Companies that have no statistical data to report to CAR must report a Nil Submission Form. This report will indicate that a company has no premium, paid loss and/or outstanding loss transactions to report for a specific month.

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part III - General Reporting Requirements**

**Section A – Premiums**

**1. REPORTING OF PREMIUMS**

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

Companies have the option to report combined bodily injury liability premiums apart from property damage liability premiums, on separate statistical records. Similarly, other than collision and collision premiums may be reported on separate statistical records if desired. Note that if Original Equipment Manufacturer (OEM) coverage exists on a policy, but is only applicable to one of the written physical damage coverages, separate collision and other than collision physical damage statistical records must be reported.

- ★ Premium relating to a new or additional company specific coverage must be reported on a separate statistical record using Classification Code 998000, Type of Risk 9, and if applicable to physical damage, All Other Coverage Code 089 or 099.
- ★ If a limit of liability or physical damage deductible for which a statistical code is not currently available is offered, the premium record must be reported with the applicable classification and record reporting requirements and with the established all other limit or deductible codes.

**2. REPORTING OF EXPOSURE**

Exposure is required as outlined in the Coding Section of this Plan. Exposure must be separately reported for each of the subdivisions of experience for which separate classification codes and exposure basis are shown. If the Classification and Coverage Code Decision Tables contained in Appendix A of this Plan indicate that exposure is not required for certain classification codes or coverage codes, then spaces or zeros must be reported in the Exposure field.

Refer to the Reporting Instructions and Coding Sections of this Plan for further instructions regarding the reporting of exposure.

**3. CHANGES IN COVERAGE BY ENDORSEMENT**

**a. Endorsements Effective as of the Policy Effective Date**

All original records affected by the change in coverage must be offset and new records must be reported with the revised codes. On the new record, all codes not impacted by the change in coverage shall remain the same. Both the offset and reenter records must be fully coded. The Transaction Effective Date should always equal the Policy Effective Date on the offset and reenter records.

The following is an example of liability endorsement records that would be reported to CAR due to adding a new driver. The rate calculation would be affected, as indicated by the following premium adjustments:

Record	Tx-Type	Pol-Eff-Date	Tx-Eff-Date	Pol-Exp-Date	Exp	BI Premium	PD Premium	Class Code
Original	11	06-00	06-00	06-01	+12	\$527	\$190	1101
Offset	12	06-00	06-00	06-01	-12	-\$527	-\$190	1101
Reenter	12	06-00	06-00	06-01	+12	\$812	\$289	1269

**Massachusetts Private Passenger Automobile  
Statistical Plan  
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.

- ★ Losses relating to a company specific coverage that is provided either at an additional premium charge or at no additional premium charge must be statistically reported using Classification Code 998000, All Other Coverage Code 089 or 099, Type of Loss 09 and Type of Risk 9.

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. DEFINITION OF A CLAIM**

**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.

**Massachusetts Private Passenger Automobile  
Statistical Plan  
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) character alphanumeric 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.

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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) character alphanumeric 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.

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Part IV - Reporting Instructions - Premiums**

**Section C – Physical Damage**

**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) character alphanumeric 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.

**Massachusetts Private Passenger Automobile  
Statistical Plan  
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) character alphanumeric 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.

**Massachusetts Private Passenger Automobile  
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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. DISCOUNT CODE (Position 57)**

Report the one (1) character alphanumeric 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.



**Massachusetts Private Passenger Automobile  
Statistical Plan  
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 alphanumeric 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) character alphanumeric 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.

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**★ TYPE OF RISK CODE**

<b>Description</b>	<b>Code</b>
Regular Business (Massachusetts Motor Vehicle Policies and Risks not coded below)	1
Business Written at <u>a</u> Rate Discount • Approved under Section 193R of Chapter 175 of the General Laws	3
Business Written at <u>a</u> Rate Discount (Risks Not Subject to the Compulsory Law) • Approved under Section 193R of Chapter 175 of the General Laws	5
Business Not Subject to the Compulsory Law and Not Written at <u>a</u> Rate Discount	7
Company Specific Coverage • Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08	9

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**DISCOUNT CODE**

- For specific details relative to the application of the discounts listed below, refer to Rule 19 (Discounts) of the AIB's Private Passenger Automobile Insurance Manual.



Description	Code
<b>Mandatory for Policies Effective 1/1/09 and Subsequent and Optional for Policies Effective 4/1/08-12/31/08:</b>	
All Other Discount Applies	A
All Other and Multi-Car Discounts Apply	B
All Other and Annual Mileage Discounts Apply	C
All Other, Multi-Car and Annual Mileage Discounts Apply	D
All Other and Motorcycle Rider Training Discounts Apply	E
<b>For Policies Effective 7/1/06 and Subsequent and Optional for Policies Effective 1/1/06-6/30/06:</b>	
Multi-Car Discount Applies	1
Annual Mileage Discount Applies **	2
Multi-Car Discount and Annual Mileage Discount Apply	4
Motorcycle Rider Training Discount Applies	6
No Discount Applies	0

Description (For Policies Effective Prior to 1/1/06 and Optional for Policies Effective 1/1/06-6/30/06)	Multi-Car Status * Exists	Multi-Car Status * Does Not Exist
	Code	
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 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.

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**TYPE OF LOSS CODE – PIP (NO-FAULT)**

<b>Description</b>	<b>Code</b>
Non-Split Outstanding Loss	23
Medical Loss	24
Wage Loss	34
Other Economic Loss	44
Subrogation Recovery	45
★ All Other types – No-Fault • (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08)	09

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**TYPE OF LOSS CODE - LIABILITY**

<b>Description</b>	<b>Code</b>
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
★ All Other types – Liability <ul style="list-style-type: none"> <li>• (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08)</li> </ul>	09

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**TYPE OF LOSS CODE – PHYSICAL DAMAGE**

**OTHER THAN COLLISION**

Description	Code
Fire	01
Theft	02
Glass <ul style="list-style-type: none"> <li>• For additional information on Glass Losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan</li> </ul>	03
Malicious Mischief and Vandalism	05
Cyclone, Earthquake, Explosion, Hail, Tornado, Water Damage and Windstorm	06
Flood and Rising Water	07
Towing and Labor Costs <ul style="list-style-type: none"> <li>• Refer to the Coverage Code Decision Table in Appendix A for reportable fields</li> </ul>	08
★ All Other types – Other Than Collision	09

**COLLISION**

Description	Code
Without Waiver of Deductible – <ul style="list-style-type: none"> <li>• Collision loss payment when deductible is applied</li> <li>• Limited Collision with a deductible</li> </ul>	10
With Waiver of Deductible – <ul style="list-style-type: none"> <li>• Collision loss payment when deductible is applied</li> </ul>	11
With Waiver of Deductible – <ul style="list-style-type: none"> <li>• Collision loss payment when deductible is waived</li> <li>• Limited Collision with full coverage</li> </ul>	12
★ All Other types – Collision <ul style="list-style-type: none"> <li>• (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08)</li> </ul>	09