

**SC Department of Insurance
Property & Casualty
Actuarial Exhibit Tutorial**

04/15/11

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General Information

General Information

- ▶ The Department highly recommends the use of the following rate filing exhibits, which have been prepared as an aid to accelerate the rate filing review process.
- ▶ If a company elects not to provide these exhibits, then the Department may need to request additional information to complete its review, which may extend the review period.
- ▶ Separate exhibits are needed for each program type or form being filed (i.e. Auto, Motorcycle, etc).
- ▶ Read the notes at the bottom of each exhibit prior to completing it to ensure that the exhibit is completed properly.
- ▶ Filing requirements may be updated from time to time. Therefore, check this tutorial for updates prior to completing the exhibits for each filing.

General Information

- ▶ Companies may modify the provided exhibits as needed to best illustrate the data utilized.

South Carolina Department of Insurance											Auto-3
Personal Lines Automobile Rate Filing											
Historical Experience Exhibit											
Insurance Company:		Insert Company Name									
Program:		Insert Program Type									
Effective Date:		MM-DD-YYYY									
Coverage	Insert Coverage										
Year	Earned Premium	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	Loss Development Factor	Loss Trend Factor	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights	
				\$ -					#DIV/0!		
				\$ -					#DIV/0!		
				\$ -					#DIV/0!		
				\$ -					#DIV/0!		
				\$ -					#DIV/0!		
Total									#DIV/0!	0.0%	
Weighted Projected Loss Ratio		#DIV/0!									
Permissible Loss Ratio											
Indicated Change		#DIV/0!									
Credibility Percentage											
Complement of Credibility											
Credibility Weighted Indicated Change		#DIV/0!									
Insurer Notes:											
Notes:											
1. Provide South Carolina experience on a direct basis (gross of reinsurance) for the latest 5 years											
2. Complete this exhibit for each coverage and in total											
3. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required											
4. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)											

Accident Year Incurred Losses and ALAE **ULAE**

For example, an auto insurer may include ALAE in its Incurred Losses and have a separate load for ULAE. In this case, Auto-3 would be revised as shown.

General Information

South Carolina Department of Insurance		Auto-3a
Personal Lines Automobile Rate Filing		
Factor Development Worksheet		
The following are acceptable methodologies in determining the factors used for the premium and loss trend and development. If any other methodology is employed, please provide the detail supporting the factor calculation.		
Present Level Factor		
Parallelogram Method	<input checked="" type="checkbox"/>	
Re-rating	<input type="checkbox"/>	
Other	<input type="checkbox"/>	
Premium Trend Factor		
ISO Fast Track 12-16 Pt Fit	<input type="checkbox"/>	
Exponential	<input type="checkbox"/>	
Other	<input checked="" type="checkbox"/>	See Exhibit A
Loss Development Factor		
Link Ratios	<input type="checkbox"/>	
Cumulative	<input checked="" type="checkbox"/>	
Age-to-Ultimate	<input type="checkbox"/>	
Other	<input type="checkbox"/>	
Loss Trend Factor		
ISO Fast Track 12-16 Pt Fit	<input type="checkbox"/>	
Exponential	<input checked="" type="checkbox"/>	
Other	<input type="checkbox"/>	
Confirm the consistency in data used for the development of the premium and loss trend factors by checking the following box:	<input checked="" type="checkbox"/>	

- ▶ If the company needs more space to provide the requested information in an exhibit, then the exhibit may be expanded or a supplementary exhibit may be referenced in the allotted space and provided elsewhere.

General Information

- ▶ Complete all applicable sections of the exhibits including cells with light blue text.

South Carolina Department of Insurance Personal Lines Automobile Rate Filing						Auto-1
Underwriting Results Exhibit						
Insurance Company:	Insert Company Name					
Effective Date:	MM-DD-YYYY					
Actual SC Direct	Year	% of Premium	Year	% of Premium	Year	% of Premium
Earned Premium		#DIV/0!		#DIV/0!		#DIV/0!
Incurred Losses		#DIV/0!		#DIV/0!		#DIV/0!
Incurred LAE		#DIV/0!		#DIV/0!		#DIV/0!
Incurred U/W Expenses		#DIV/0!		#DIV/0!		#DIV/0!
U/W Results	\$ -	#DIV/0!	\$ -	#DIV/0!	\$ -	#DIV/0!
Insurer Notes:						
Notes:						
1. Use Calendar Year Data						
2. Use Latest Three Years of Data						

Interrogatories

Interrogatories

South Carolina Department of Insurance Personal Lines Automobile Rate Filing	
Interrogatories	
1	Is this filing the initial rate filing for this program?
1a	If Yes, only complete exhibits Auto-4 and Auto-6 (Include at least 3 Competitor Rates and your Proposed Rates).
1b	If No, complete all attached exhibits.
1c	If No, what is the six digit State Tracking Number(s) of your last filing?
2	Is this filing being submitted under the File and Use provision? (The File and Use provision can be used if the filing type is Rate only or Rate/Rule, if the Overall Total Change is within +/- 7.0%, and if the File and Use provision has not been used within 12 months of your proposed Renewal effective date unless the Overall Total Change was less than or equal to 0.0%).
3	Does this program market to Standard or Non-Standard risks?
4	Have you changed any of your Rate Level Indication calculation methodologies since your last filing?
4a	If Yes, support your change in methodologies.
5	Does this program use insurance score information for rating purposes?
5a	If Yes, provide the name of the insurance score model used.
6	Confirm that a copy of the actual Insurance Expense Exhibit, as submitted with the Annual Statement, has been submitted with this filing.
7	How was Exhibit Auto-7 computed? (Actual re-rate of policies, Estimate based on distributions, etc).
7a	If the exhibit was computed by an actual re-rate of policies, 100% of policies must be re-rated.
8	Are you proposing rate capping with this filing?
8a	If Yes, then provide the proposed rate capping details (The Department may approve a one-term cap).
9	Do any of your proposed changes create "multiple rating plans" (charging different rates for risks with the same rating characteristics)?
9a	If Yes, then provide the proposed multiple rating plan details (The Department may approve multiple rating plans if a transition plan is approved).
10	Confirm that the Notes section at the bottom of each exhibit were followed when completing each exhibit.

South Carolina Department of Insurance Personal Lines Homeowners Rate Filing	
Interrogatories	
1	Is this filing the initial rate filing for this program?
1a	If Yes, only complete exhibits Home-4 and Home-6 (Include at least 3 Competitor Rates and your Proposed Rates).
1b	If No, complete all attached exhibits.
1c	If No, what is the six digit State Tracking Number(s) of your last filing?
2	Is this filing being submitted under the File and Use provision? (The File and Use provision can be used if the filing type is Rate only or Rate/Rule, if the Overall Total Change is within +/- 7.0%, and if the File and Use provision has not been used within 12 months of your proposed Renewal effective date unless the Overall Total Change was less than or equal to 0.0%).
3	Does this program market to coastal properties?
4	Do you currently write with wind in the area covered by the SC Wind & Hail Underwriting Association?
5	What catastrophe model is used in this filing?
6	Does this program use insurance score information for rating purposes?
6a	If Yes, provide the name of the insurance score model used.
7	Confirm that a copy of the actual Insurance Expense Exhibit, as submitted with the Annual Statement, has been submitted with this filing.
8	Have you changed any of your Rate Level Indication calculation methodologies since your last filing?
8a	If Yes, support your change in methodologies.
9	Do any of your proposed changes create "multiple rating plans" (charging different rates for risks with the same rating characteristics)?
9a	If Yes, then provide the proposed multiple rating plan details (The Department may approve multiple rating plans if a transition plan is approved).
10	Confirm that the Notes section at the bottom of each exhibit were followed when completing each exhibit.
11	How was Exhibit Home-7 computed? (Actual re-rate of policies, Estimate based on distributions, etc).
11a	If the exhibit was computed by an actual re-rate of policies, 100% of policies must be re-rated.
12	Are you proposing rate capping with this filing?
12a	If Yes, then provide the proposed rate capping details (The Department may approve a one-term cap).

Interrogatories

South Carolina Department of Insurance Personal Lines Automobile Rate Filing	
Interrogatories	
1	Is this filing the initial rate filing for this program?
1a	If Yes, only complete exhibits Auto-4 and Auto-6 (Include at least 3 Competitor Rates and your Proposed Rates).
1b	If No, complete all attached exhibits.
1c	If No, what is the six digit State Tracking Number(s) of your last filing?
2	Is this filing being submitted under the File and Use provision? (The File and Use provision can be used if the filing type is Rate only or Rate/Rule, if the Overall Total Change is within +/- 7.0%, and if the File and Use provision has not been used within 12 months of your proposed Renewal effective date unless the Overall Total Change was less than or equal to 0.0%).
3	Does this program market to Standard or Non-Standard risks?
4	Have you changed any of your Rate Level Indication calculation methodologies since your last filing?
4a	If Yes, support your change in methodologies.
5	Does this program use insurance score information for rating purposes?
5a	If Yes, provide the name of the insurance score model used.
6	Confirm that a copy of the actual Insurance Expense Exhibit, as submitted with the Annual Statement, has been submitted with this filing.
7	How was Exhibit Auto-7 computed? (Actual re-rate of policies, Estimate based on distributions, etc).
7a	If the exhibit was computed by an actual re-rate of policies, 100% of policies must be re-rated.
8	Are you proposing rate capping with this filing?
8a	If Yes, then provide the proposed rate capping details (The Department may approve a one-term cap).
9	Do any of your proposed changes create "multiple rating plans" (charging different rates for risks with the same rating characteristics)?
9a	If Yes, then provide the proposed multiple rating plan details (The Department may approve multiple rating plans if a transition plan is approved).
10	Confirm that the Notes section at the bottom of each exhibit were followed when completing each exhibit.

- ▶ These Interrogatories provide general information the Department relies on to complete analysis and are intended to expedite the filing review process by identifying information needed for a thorough review of the filing.



Interrogatories: Frequently Asked Questions

- ▶ What should be included in a new program's initial rate filing?
 - ▶ Exhibit-4 (Permissible Loss Ratio Calculation) needs to be included for all lines of business.
 - ▶ Exhibit-6 (Annual Premiums by Territory) is required for automobile and homeowners programs.
 - ▶ A rates comparison including the company's proposed rates as well as the rates of at least 3 competitors is needed for all lines of business. For auto and homeowners, Exhibit-6 may be amended to include this information.

Interrogatories: Frequently Asked Questions

- ▶ How does a filing qualify for File and Use?
 - ▶ The filing must be a rate or rate/rule filing type.
 - ▶ The overall total change must be between -7.0% and +7.0%.
 - ▶ The File and Use provision cannot have been used in the 12 months prior to the proposed renewal effective date.

Interrogatories: Frequently Asked Questions

- ▶ Is rate capping allowed in South Carolina?
 - ▶ A one-term cap used to limit policyholder disruption may be approved by the Department. Details of the proposed capping plan must be provided.
 - ▶ A transition plan is another form of rate capping, which may be approved as a transition from one rating plan to another rating plan over a period of time (no more than 3 years).

Interrogatories: Frequently Asked Questions

- ▶ Can new rates and/or rules be implemented for new business only in an effort to avoid disruption for renewal business?
 - ▶ No, this would lead to multiple rating plans in which different rates are charged for risks with the same rating characteristics, which is considered unfairly discriminatory. The Department may approve a transition plan to temporarily limit renewal disruption caused by new rates and/or rules.



Exhibit-1

Exhibit-1

South Carolina Department of Insurance Personal Lines Automobile Rate Filing						Auto-1
Underwriting Results Exhibit						
Insurance Company:		Insert Company Name				
Effective Date:		MM-DD-YYYY				
Actual SC Direct	Year	% of Premium	Year	% of Premium	Year	% of Premium
Earned Premium		#DIV/0!		#DIV/0!		#DIV/0!
Incurred Losses		#DIV/0!		#DIV/0!		#DIV/0!
Incurred LAE		#DIV/0!		#DIV/0!		#DIV/0!
Incurred U/W Expenses		#DIV/0!		#DIV/0!		#DIV/0!
U/W Results	\$ -	#DIV/0!	\$ -	#DIV/0!	\$ -	#DIV/0!
Insurer Notes: 						
Notes: 1. Use Calendar Year Data 2. Use Latest Three Years of Data						

Exhibit-1 (Auto/Home/Other)

South Carolina Department of Insurance Auto-1 Personal Lines Automobile Rate Filing Underwriting Results Exhibit Insurance Company: <input style="width: 150px;" type="text" value="Insert Company Name"/> Effective Date: <input style="width: 100px;" type="text" value="MM-DD-YYYY"/>						
Actual SC Direct	Year	% of Premium	Year	% of Premium	Year	% of Premium
Earned Premium		#DIV/0!		#DIV/0!		#DIV/0!
Incurred Losses		#DIV/0!		#DIV/0!		#DIV/0!
Incurred LAE		#DIV/0!		#DIV/0!		#DIV/0!
Incurred U/W Expenses		#DIV/0!		#DIV/0!		#DIV/0!
U/W Results	\$ -	#DIV/0!	\$ -	#DIV/0!	\$ -	#DIV/0!
Insurer Notes:						
Notes:						
1. Use Calendar Year Data 2. Use Latest Three Years of Data						

- ▶ This exhibit should be completed using actual South Carolina data on a direct basis.
- ▶ Calendar year data for the most recent three years is requested.
- ▶ The exhibit may be completed on a group or company basis.



Exhibit-2

Exhibit-2

South Carolina Department of Insurance Personal Lines Automobile Rate Filing		Auto-2	
Summary Exhibit			
Insurance Company:		Insert Company Name	
Program:		Insert Program Type	
Effective Date:		MM-DD-YYYY	
Coverage (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Indicated Change	Proposed Change
n1			
n2			
n3			
Liability Total			
n4			
n5			
n6			
Physical Damage Total			
Overall Total			
Insurer Notes:			
Notes:			
1. The coverage Indicated Change value should balance to the coverage Credibility Weighted Indicated Change value in exhibit Auto-3			
2. The coverage Proposed Change value should balance to the coverage Overall Change value in Exhibit Auto-5			
3. The Liability Total Proposed Change value may not exceed the Liability Total Indicated Change value			
4. The Physical Damage Total Proposed Change value may not exceed the Physical Damage Total Indicated Change value			
5. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)			



Exhibit-2 (Auto/Home/Other)

- ▶ Indicated changes by coverage should be supported by the credibility weighted indicated changes by coverage in Exhibit-3.

South Carolina Department of Insurance Personal Lines Automobile Rate Filing		Auto-2	
Summary Exhibit			
Insurance Company:		Insert Company Name	
Program:		Insert Program Type	
Effective Date:		MM-DD-YYYY	
Coverage (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Indicated Change	Proposed Change
n1			
n2			
n3			
Liability Total			
n4			
n5			
n6			
Physical Damage Total			
Overall Total			
Insurer Notes:			
Notes:			
1. The coverage Indicated Change value should balance to the coverage Credibility Weighted Indicated Change value in exhibit Auto-3			
2. The coverage Proposed Change value should balance to the coverage Overall Change value in Exhibit Auto-5			
3. The Liability Total Proposed Change value may not exceed the Liability Total Indicated Change value			
4. The Physical Damage Total Proposed Change value may not exceed the Physical Damage Total Indicated Change value			
5. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)			

South Carolina Department of Insurance Personal Lines Automobile Rate Filing		Auto-3									
Historical Experience Exhibit											
Insurance Company:		Insert Company Name									
Program:		Insert Program Type									
Effective Date:		MM-DD-YYYY									
Coverage	Insert Coverage	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	LAE	Loss Development Factor	Loss Trend Factor	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights
Year	Earned Premium			\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
Total										#DIV/0!	0.0%
Weighted Projected Loss Ratio		#DIV/0!									
Permissible Loss Ratio		#DIV/0!									
Indicated Change		#DIV/0!									
Credibility Percentage		#DIV/0!									
Complement of Credibility		#DIV/0!									
Credibility Weighted Indicated Change		#DIV/0!									
Insurer Notes:											
Notes:											
1. Provide South Carolina experience on a direct basis (gross of reinsurance) for the latest 5 years											
2. Complete this exhibit for each coverage and in total											
3. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required											
4. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)											

Exhibit-2 (Auto/Home/Other)

- ▶ Coverage Proposed Change values should agree with the coverage Overall Change values in Exhibit-5.

South Carolina Department of Insurance Personal Lines Automobile Rate Filing		Auto-2	
Summary Exhibit			
Insurance Company:		Insert Company Name	
Program:		Insert Program Type	
Effective Date:		MM-DD-YYYY	
Coverage (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Indicated Change	Proposed Change
n1			
n2			
n3			
Liability Total			
n4			
n5			
n6			
Physical Damage Total			
Overall Total			
Insurer Notes:			
Notes:			
1. The coverage Indicated Change value should balance to the coverage Credibility Weighted Indicated Change value in exhibit Auto-3			
2. The coverage Proposed Change value should balance to the coverage Overall Change value in Exhibit Auto-5			
3. The Liability Total Proposed Change value may not exceed the Liability Total Indicated Change value			
4. The Physical Damage Total Proposed Change value may not exceed the Physical Damage Total Indicated Change value			
5. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)			

South Carolina Department of Insurance Personal Lines Automobile Rate Filing		Auto-5							
Off-Balance Exhibit									
Insurance Company:		Insert Company Name							
Program:		Insert Program Type							
Effective Date:		MM-DD-YYYY							
Rating Variable Change (Add/Delete rows as needed)	Coverages (Add/Delete columns as needed)								
	n1	n2	n3	n4	n5	n6	n7	etc	Total
n1									
n2									
n3									
n4									
n5									
n6									
n7									
n8									
etc									
Overall Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Earned Premiums or Earned Exposures									
Weight									
Overall Total									0.0%
Insurer Notes:									
Notes:									
1. Use a row for each Rating Variable of change (i.e. Base Rates, Territory, Driver Class, etc)									
2. Earned Premium or Earned Exposures should be used to weight the average premium change by coverage									
3. The Rating Variable Total value should balance to the Rating Variable Total % Change value in exhibit Auto-5a									
4. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)									

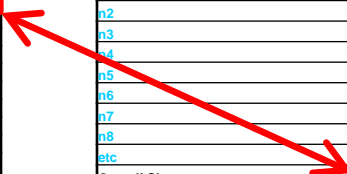


Exhibit-2 (Auto/Other)

South Carolina Department of Insurance Personal Lines Automobile Rate Filing		Auto-2	
Summary Exhibit			
Insurance Company:		Insert Company Name	
Program:		Insert Program Type	
Effective Date:		MM-DD-YYYY	
Coverage (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Indicated Change	Proposed Change
n1			
n2			
n3			
Liability Total			
n5			
n10			
Physical Damage Total			
Overall Total			
Insurer Notes:			
Notes: 1. The coverage Indicated Change value should balance to the coverage Credibility Weighted Indicated Change value in exhibit Auto-3 2. The coverage Proposed Change value should balance to the coverage Overall Change value in Exhibit Auto-5 3. The Liability Total Proposed Change value may not exceed the Liability Total Indicated Change value 4. The Physical Damage Total Proposed Change value may not exceed the Physical Damage Total Indicated Change value 5. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)			

- ▶ The Liability Total and Physical Damage Total Proposed Change values cannot exceed their Indicated Change values.



Exhibit-3

Exhibit-3

South Carolina Department of Insurance Personal Lines Automobile Rate Filing										Auto-3	
Historical Experience Exhibit											
Insurance Company:		Insert Company Name									
Program:		Insert Program Type									
Effective Date:		MM-DD-YYYY									
Coverage	Insert Coverage										
Year	Earned Premium	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	LAE	Loss Development Factor	Loss Trend Factor	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
Total										#DIV/0!	0.0%
Weighted Projected Loss Ratio		#DIV/0!									
Permissible Loss Ratio											
Indicated Change		#DIV/0!									
Credibility Percentage											
Complement of Credibility											
Credibility Weighted Indicated Change		#DIV/0!									
Insurer Notes:											
Notes:											
<ol style="list-style-type: none"> 1. Provide South Carolina experience on a direct basis (gross of reinsurance) for the latest 5 years 2. Complete this exhibit for each coverage and in total 3. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required 4. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc) 											

Exhibit-3 (Auto/Home/Other)

- ▶ Columns and rows may be added or removed to better accommodate the data used. Verify formulas are still accurate if edited.

South Carolina Department of Insurance Auto-3
 Personal Lines Automobile Rate Filing

Historical Experience Exhibit

Insurance Company:
 Program:
 Effective Date:

Coverage	Insert Coverage									
Year	Earned Premium	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	Loss Development Factor	Loss Trend Factor	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights
	\$			-					#DIV/0!	
	\$			-					#DIV/0!	
	\$			-					#DIV/0!	
	\$			-					#DIV/0!	
Total	\$			-					#DIV/0!	0.0%

Weighted Projected Loss Ratio	#DIV/0!
Permissible Loss Ratio	
Indicated Change	#DIV/0!
Credibility Percentage	
Complement of Credibility	
Credibility Weighted Indicated Change	#DIV/0!

Insurer Notes:

Notes:

1. Provide South Carolina experience on a direct basis (gross of reinsurance) for the latest 5 years
2. Complete this exhibit for each coverage and in total
3. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required
4. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)

Accident Year Incurred Losses and ALAE **ULAE**

In this example, an auto insurer may include ALAE in its Incurred Losses and have a separate load for ULAE. In this case, Auto-3 would be revised as shown.

Exhibit-3 (Auto/Home/Other)

- ▶ Total Loss Adjustment Expense may be included in the exhibit as a factor or a dollar amount.
 - ▶ ALAE could be included as part of Incurred Losses with ULAE identified separately.

South Carolina Department of Insurance Personal Lines Automobile Rate Filing											Auto-3
Historical Experience Exhibit											
Insurance Company:		Insert Company Name									
Program:		Insert Program Type									
Effective Date:		MM-DD-YYYY									
Coverage	Insert Coverage	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	LAE	Loss Development Factor	Loss Trend Factor	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights
Year	Earned Premium			\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
Total										#DIV/0!	0.0%
Weighted Projected Loss Ratio		#DIV/0!									
Permissible Loss Ratio											
Indicated Change		#DIV/0!									
Credibility Percentage											
Complement of Credibility											
Credibility Weighted Indicated Change		#DIV/0!									
Insurer Notes:											
Notes:											
1. Provide South Carolina experience on a direct basis (gross of reinsurance) for the latest 5 years											
2. Complete this exhibit for each coverage and in total											
3. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required											
4. Complete this exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)											

Exhibit-3 (Auto/Home/Other)

- Describe the credibility standard and the complement of credibility used in a supporting exhibit.

South Carolina Department of Insurance											Auto-3
Personal Lines Automobile Rate Filing											
Historical Experience Exhibit											
Insurance Company:		Insert Company Name									
Program:		Insert Program Type									
Effective Date:		MM-DD-YYYY									
Coverage	Insert Coverage										
Year	Earned Premium	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	LAE	Loss Development Factor	Loss Trend Factor	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
				\$ -						#DIV/0!	
Total										#DIV/0!	0.0%
Weighted Projected Loss Ratio											#DIV/0!
Permissible Loss Ratio											
Indicated Change											#DIV/0!
Credibility Percentage											
Complement of Credibility											
Credibility Weighted Indicated Change											#DIV/0!
Insurer Notes:											
Notes:											
1. Provide South Carolina experience on a direct basis (gross of reinsurance) for the latest 5 years											
2. Complete this exhibit for each coverage and for total											
3. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required											
4. Complete this exhibit for each program type being filed (i.e. Auto, motorcycle, etc)											

Exhibit-3 (Home)

- ▶ Include the direct incurred loss ratio.

South Carolina Department of Insurance													Home-3	
Personal Lines Homeowners Rate Filing														
Historical Experience Exhibit														
Insurance Company:		<input type="text" value="Insert Company Name"/>												
Effective Date:		<input type="text" value="MM-DD-YYYY"/>												
Form														
Year	Earned Premium	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	LAE	Direct Incurred Loss Ratio	Loss Development Factor	Loss Trend Factor	Cat Load	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights	
				\$ -								#DIV/0!		
				\$ -								#DIV/0!		
				\$ -								#DIV/0!		
				\$ -								#DIV/0!		
Total				\$ -								#DIV/0!	0.0%	
Weighted Projected Loss Ratio		#DIV/0!												
Permissible Loss Ratio														
Indicated Change		#DIV/0!												
Credibility Percentage														
Complement of Credibility														
Credibility Weighted Indicated Change		#DIV/0!												
Insurer Notes:														
Notes:														
1. Complete this exhibit for each form and in total.														
2. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required.														

Exhibit-3 (Home)

- ▶ The catastrophe load should be explicitly stated in dollars or as a ratio.

South Carolina Department of Insurance													Home-3
Personal Lines Homeowners Rate Filing													
Historical Experience Exhibit													
Insurance Company:		<input type="text" value="Insert Company Name"/>											
Effective Date:		<input type="text" value="MM-DD-YYYY"/>											
Form													
Year	Earned Premium	Present Level Factor	Premium Trend Factor	Earned Premium at Current Rate Level	Accident Year Incurred Losses	LAE	Direct Incurred Loss Ratio	Loss Development Factor	Loss Trend Factor	Cat Load In	Projected Accident Year Incurred Losses	Projected Loss Ratio	Individual Year Weights
				\$ -								#DIV/0!	
				\$ -								#DIV/0!	
				\$ -								#DIV/0!	
				\$ -								#DIV/0!	
Total				\$ -								#DIV/0!	0.0%
Weighted Projected Loss Ratio		#DIV/0!											
Permissible Loss Ratio													
Indicated Change		#DIV/0!											
Credibility Percentage													
Complement of Credibility													
Credibility Weighted Indicated Change		#DIV/0!											
Insurer Notes:													
Notes:													
1. Complete this exhibit for each form and in total.													
2. A supporting exhibit establishing your credibility standard and how your complement of credibility value was calculated/selected is required.													



Exhibit-3a

Exhibit-3a

South Carolina Department of Insurance		Auto-3a
Personal Lines Automobile Rate Filing		
Factor Development Worksheet		
The following are acceptable methodologies in determining the factors used for the premium and loss trend and development. If any other methodology is employed, please provide the detail supporting the factor calculation.		
Present Level Factor		
Parallelogram Method		<input type="checkbox"/>
Re-rating		<input type="checkbox"/>
Other		<input type="checkbox"/>
Premium Trend Factor		
ISO Fast Track 12-16 Pt Fit		<input type="checkbox"/>
Exponential		<input type="checkbox"/>
Other		<input type="checkbox"/>
Loss Development Factor		
Link Ratios		<input type="checkbox"/>
Cumulative		<input type="checkbox"/>
Age-to-Ultimate		<input type="checkbox"/>
Other		<input type="checkbox"/>
Loss Trend Factor		
ISO Fast Track 12-16 Pt Fit		<input type="checkbox"/>
Exponential		<input type="checkbox"/>
Other		<input type="checkbox"/>
Confirm the consistency in data used for the development of the premium and loss trend factors by checking the following box:		<input type="checkbox"/>

Exhibit-3a (Auto/Home/Other)

South Carolina Department of Insurance
Personal Lines Automobile Rate Filing
Auto-3a

Factor Development Worksheet

The following are acceptable methodologies in determining the factors used for the premium and loss trend and development. If any other methodology is employed, please provide the detail supporting the factor calculation.

Present Level Factor

Parallelogram Method	<input type="checkbox"/>
Re-rating	<input type="checkbox"/>
Other	<input type="checkbox"/>

Premium Trend Factor

ISO Fast Track 12-16 Pt Fit	<input type="checkbox"/>
Exponential	<input type="checkbox"/>
Other	<input type="checkbox"/>

Loss Development Factor

Link Ratios	<input type="checkbox"/>
Cumulative	<input type="checkbox"/>
Age-to-Ultimate	<input type="checkbox"/>
Other	<input type="checkbox"/>

Loss Trend Factor

ISO Fast Track 12-16 Pt Fit	<input type="checkbox"/>
Exponential	<input type="checkbox"/>
Other	<input type="checkbox"/>

Confirm the consistency in data used for the development of the premium and loss trend factors by checking the following box:

- ▶ Mark the appropriate boxes to indicate what methodologies were used to trend and develop premium and losses.
- ▶ If “Other” is marked, then further explanation and support are required; selection logic and methods should be provided. This may be submitted in a separate exhibit.
- ▶ If the selected value does not equal the calculated/indicated value, then justification is needed for the selection. A statement that actuarial judgment was used should also include the basis upon which it was made.

Exhibit-3a (Auto/Home/Other)

South Carolina Department of Insurance		Auto-3a
Personal Lines Automobile Rate Filing		
Factor Development Worksheet		
The following are acceptable methodologies in determining the factors used for the premium and loss trend and development. If any other methodology is employed, please provide the detail supporting the factor calculation.		
Present Level Factor		
Parallelogram Method		<input type="checkbox"/>
Re-rating		<input type="checkbox"/>
Other		<input type="checkbox"/>
Premium Trend Factor		
ISO Fast Track 12-16 Pt Fit		<input type="checkbox"/>
Exponential		<input type="checkbox"/>
Other		<input type="checkbox"/>
Loss Development Factor		
Link Ratios		<input type="checkbox"/>
Cumulative		<input type="checkbox"/>
Age-to-Ultimate		<input type="checkbox"/>
Other		<input type="checkbox"/>
Loss Trend Factor		
ISO Fast Track 12-16 Pt Fit		<input type="checkbox"/>
Exponential		<input type="checkbox"/>
Other		<input type="checkbox"/>
Confirm the consistency in data used for the development of the premium and loss trend factors by checking the following box:		<input type="checkbox"/>

- ▶ Mark this box to confirm that consistent information is used to determine the premium and loss trend factors.
- ▶ For example, countrywide data should not be used to develop the premium trend if loss trend is based on statewide data.

Exhibit-3a (Home)

South Carolina Department of Insurance		Home-3a
Personal Lines Homeowners Rate Filing		
Factor Development Worksheet		
The following are acceptable methodologies in determining the factors used for the premium and loss trend and development. If any other methodology is employed, please provide the detail supporting the factor calculation.		
Present Level Factor		
Parallelogram Method		
Re-rating		
Other		
Premium Trend Factor		
ISO Fast Track 12-16 Pt Fit		
Exponential		
Other		
Total Direct Incurred Loss Ratio from Home-3		
Loss Development Factor		
Link Ratios		
Cumulative		
Age-to-Ultimate		
Other		
Loss Trend Factor		
ISO Fast Track 12-16 Pt Fit		
Exponential		
Other		
Confirm the consistency in data used for the development of the premium and loss trend factors by checking the following box:		

- ▶ The Total Direct Incurred Loss Ratio from Home-3 should be inserted in the appropriate cell.



Exhibit-3b

Exhibit-3b

South Carolina Department of Insurance Personal Lines Homeowners Rate Filing		Home-3b
Catastrophe Model Information		Notes
Catastrophe Model used	<input type="text"/>	Short term model not allowed Storm surge not allowed Demand surge = loss amplification
Confirm long term version used	<input type="text"/>	
Confirm that storm surge was not included	<input type="text"/>	
Provide impact of demand surge on modeled results	<input type="text"/>	
Indicate/explain any adjustments made to the model output	<input type="text"/>	
Current catastrophe load %	<input type="text"/>	
Previous catastrophe load %	<input type="text"/>	
Provide basis for calculation	<input type="text"/>	
Explain difference in % amounts	<input type="text"/>	
Reinsurance Information		
Method used:		
Losses reported on a net basis	<input type="text"/>	
Losses reported on a direct basis	<input type="text"/>	
Expense calculation	<input type="text"/>	

Exhibit-3b (Home)

South Carolina Department of Insurance		Home-3b
Personal Lines Homeowners Rate Filing		
Catastrophe Model Information		
Catastrophe Model used		
Confirm long term version used		
Confirm that storm surge was not included		
Provide impact of demand surge on modeled results		
Indicate/explain any adjustments made to the model output		
Current catastrophe load %		
Previous catastrophe load %		
Provide basis for calculation		
Explain difference in % amounts		
Reinsurance Information		
Method used:		
Losses reported on a net basis		
Losses reported on a direct basis		
Expense calculation		
Notes		
Short term model not allowed		
Storm surge not allowed		
Demand surge = loss amplification		

- ▶ The catastrophe model and version as well as the impact of demand surge on the modeled losses are required. Any adjustments made to the modeled losses must also be stated.
- ▶ Companies are also asked to compare the current catastrophe load with that in its previous filing.

Exhibit-3b (Home)

South Carolina Department of Insurance Personal Lines Homeowners Rate Filing	Home-3b
Catastrophe Model Information	
Catastrophe Model used	
Confirm long term version used	
Confirm that storm surge was not included	
Provide impact of demand surge on modeled results	
Indicate/explain any adjustments made to the model output	
Current catastrophe load %	
Previous catastrophe load %	
Provide basis for calculation	
Explain difference in % amounts	
Reinsurance Information	
Method used:	
Losses reported on a net basis	
Losses reported on a direct basis	
Expense calculation	
Notes	
Short term model not allowed	
Storm surge not allowed	
Demand surge = loss amplification	

- ▶ The calculation of the reinsurance expense provision and the loss reporting method should also be provided.



Exhibit-4

Exhibit-4

South Carolina Department of Insurance		Auto-4	
Personal Lines Automobile Rate Filing			
Permissible Loss Ratio Calculation			
Insurance Company:	<input type="text" value="Insert Company Name"/>		
Program:	<input type="text" value="Insert Program Type"/>		
Effective Date:	<input type="text" value="MM-DD-YYYY"/>		
Expense Category (Add/Delete rows as needed)	Expense Ratio (% Premium)		
	Fixed	Variable	Total
Commissions			
Taxes, Licenses, & Fees			
Other Acquisition Expenses			
General Expenses			
Other Expenses			
Other Income			
Profit and Contingency			
Total Expense and Profit Ratio			
Permissible Loss Ratio	<input style="width: 100%;" type="text"/>		
Please explain any significant variances between the expenses reported in this exhibit and the Insurance Expense Exhibit:			
If "Other Expenses" are used, then define:			
Insurer Notes:			
Notes:			
1. Splitting Fixed and Variable expenses is optional according to your ratemaking methodology			
2. Profit and Contingency percentage may not exceed 5.0%			
3. Provide a copy of the actual Insurance Expense Exhibit as submitted with the Annual Statement			
4. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)			



Exhibit-4 (Auto/Home/Other)

South Carolina Department of Insurance
Personal Lines Automobile Rate Filing Auto-4

Permissible Loss Ratio Calculation

Insurance Company:

Program:

Effective Date:

Expense Category (Add/Delete rows as needed)	Expense Ratio (% Premium)		
	Fixed	Variable	Total
Commissions			
Taxes, Licenses, & Fees			
Other Acquisition Expenses			
General Expenses			
Other Expenses			
Other Income			
Profit and Contingency			
Total Expense and Profit Ratio			
Permissible Loss Ratio			

Please explain any significant variances between the expenses reported in this exhibit and the Insurance Expense Exhibit:

Insurer Notes:

Notes:

1. Splitting Fixed and Variable expenses is optional according to your ratemaking methodology
2. Profit and Contingency percentage may not exceed 5.0%
3. Provide a copy of the actual Insurance Expense Exhibit as submitted with the Annual Statement
4. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)

- ▶ All expense provisions used to calculate the company's permissible loss ratio must be included in this exhibit.
- ▶ Any provisions other than those shown on the template need to be listed separately with their respective amounts.
- ▶ List each additional provision separately; do not include in sum of "Other Expenses."

Exhibit-4 (Auto/Home/Other)

South Carolina Department of Insurance Home-4
 Personal Lines Homeowners Rate Filing

Permissible Loss Ratio Calculation

Insurance Company:
 Form:
 Effective Date:

Expense Category (Add/Delete rows as needed)	Expense Ratio (% Premium)		
	Fixed	Variable	Total
Commissions			
Taxes, Licenses, & Fees			
Other Acquisition Expenses			
General Expenses			
Reinsurance Expenses			
Other Expenses			
Other Income			
Profit and Contingency			
Total Expense and Profit Ratio			
Permissible Loss Ratio			

Please explain any significant variances between the expenses reported in this exhibit and the Insurance Expense Exhibit:

If "Other Expenses" are used, then define:

Insurer Notes:

Notes:

- Splitting fixed and variable expenses is optional according to your ratemaking methodology
- Profit and Contingency percentage may not exceed 5.0% unless writing heavily on the coast, with wind. Provide distribution by territory.
- Provide a copy of the actual Insurance Expense Exhibit as submitted with the Annual Statement
- Complete exhibit for each form being filed

- ▶ The company's profit and contingency provision may not exceed 5.0%.
 - ▶ Exception: homeowners programs that write heavily on the coast with wind (the exposure distribution by territory must be provided to support a higher provision)



Exhibit-5

Exhibit-5

South Carolina Department of Insurance Personal Lines Automobile Rate Filing									Auto-5
Off-Balance Exhibit									
Insurance Company:	Insert Company Name								
Program:	Insert Program Type								
Effective Date:	MM-DD-YYYY								
Rating Variable Change <i>(Add/Delete rows as needed)</i>	Coverages (Add/Delete columns as needed)								
	n1	n2	n3	n4	n5	n6	n7	etc	Total
n1									
n2									
n3									
n4									
n5									
n6									
n7									
n8									
etc									
Overall Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
Earned Premiums or Earned Exposures									
Weight									
Overall Total									0.0%
Insurer Notes:									
Notes: 1. Use a row for each Rating Variable of change (i.e. Base Rates, Territory, Driver Class, etc) 2. Earned Premium or Earned Exposures should be used to weight the average premium change by coverage 3. The Rating Variable Total value should balance to the Rating Variable Total % Change value in exhibit Auto-5a 4. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)									



Exhibit-5 (Auto/Home/Other)

South Carolina Department of Insurance Personal Lines Automobile Rate Filing										Auto-5
Off-Balance Exhibit										
Insurance Company:	Insert Company Name									
Program:	Insert Program Type									
Effective Date:	MM-DD-YYYY									
Rating Variable Change (Add/Delete rows as needed)	Coverages (Add/Delete columns as needed)									Total
n1	n1	n2	n3	n4	n5	n6	n7	etc		
n2										
n3										
n4										
n5										
n6										
n7										
n8										
etc										
Overall Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
Earned Premiums or Earned Exposures										
Weight										
Overall Total										0.0%
Insurer Notes:										
Notes:										

- ▶ Each row should contain the coverage changes and the total change for the rating variable being revised (red box).
- ▶ Each column should contain the rating variable changes and the total change for each coverage (green box).

Exhibit-5 (Auto/Home/Other)

- ▶ The rating variable Total change value should agree with the rating variable Total % Change value in Exhibit-5a.

South Carolina Department of Insurance Personal Lines Automobile Rate Filing										Auto-5
Off-Balance Exhibit										
Insurance Company:	Insert Company Name									
Program:	Insert Program Type									
Effective Date:	MM-DD-YYYY									
Rating Variable Change (Add/Delete rows as needed)	Coverages (Add/Delete columns as needed)								Total	
	n1	n2	n3	n4	n5	n6	n7	etc		
n1										
n2										
n3										
n4										
n5										
n6										
n7										
n8										
etc										
Overall Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
Earned Premiums or Earned Exposures										
Weight										
Overall Total										0.0%
Insurer Notes:										
Notes:										
<ol style="list-style-type: none"> 1. Use a row for each Rating Variable of change (i.e. Base Rates, Territory, Driver Class, etc) 2. Earned Premium or Earned Exposures should be used to weight the average premium change by coverage 3. The Rating Variable Total value should balance to the Rating Variable Total % Change value in exhibit Auto-5a 4. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc) 										

South Carolina Department of Insurance Personal Lines Automobile Rate Filing						Auto-5a
Rating Variable Support Exhibit						
Insurance Company:	Insert Company Name					
Program:	Insert Program Type					
Effective Date:	MM-DD-YYYY					
Rating Variable:	Insert Rating Variable					
Category (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Support for Change (Add columns as needed)	Current Factor	Proposed Factor	% Change	
n1						
n2						
n3						
n4						
n5						
n6						
n7						
n8						
etc						
Total						
Insurer Notes:						
Notes:						
<ol style="list-style-type: none"> 1. Complete this exhibit for each Rating Variable (i.e. Base Rates, Territory, Driver Class, etc) 2. List each Category affected by your proposed Rating Variable changes (i.e. Driver Class SM20, Driver Class SM21, Driver Class SM22, etc) 2a. If Category codes are company specific, provide the Category code definition 3. Earned Premiums or Earned Exposures should be used as weights to calculate the Total % Change 3a. Alternatively, the Total % Change could be calculated by re-rating your entire book, which should be acknowledged in the Insurer Notes 4. Support for Change value uses loss or competitive data to support your Proposed Factor selections (i.e. Indicated Factor, Indicated Change, Countrywide Factor, etc.) 4a. Add columns as needed to show how the Support for Change value was calculated/selected 5. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc) 						

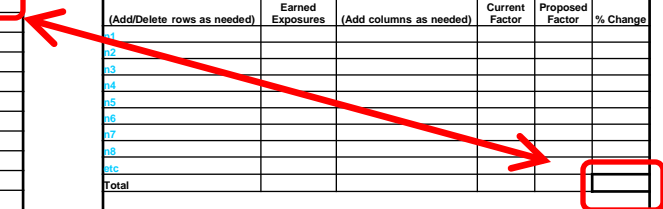




Exhibit-5a

Exhibit-5a

Category (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Support for Change (Add columns as needed)	Current Factor	Proposed Factor	% Change
n1					
n2					
n3					
n4					
n5					
n6					
n7					
n8					
etc					
Total					

South Carolina Department of Insurance **Auto-5a**
Personal Lines Automobile Rate Filing

Rating Variable Support Exhibit

Insurance Company:

Program:

Effective Date:

Rating Variable:

Insurer Notes:

Notes:

1. Complete this exhibit for each Rating Variable (i.e. Base Rates, Territory, Driver Class, etc)
2. List each Category affected by your proposed Rating Variable changes (i.e. Driver Class SM20, Driver Class SM21, Driver Class SM22, etc)
- 2a. If Category codes are company specific, provide the Category code definition
3. Earned Premiums or Earned Exposures should be used as weights to calculate the Total % Change
- 3a. Alternatively, the Total % Change could be calculated by re-rating your entire book, which should be acknowledged in the Insurer Notes
4. Support for Change value uses loss or competitive data to support your Proposed Factor selections (i.e. Indicated Factor, Indicated Change, Countrywide Factor, etc.)
- 4a. Add columns as needed to show how the Support for Change value was calculated/selected
5. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)



Exhibit-5a (Auto/Home/Other)

South Carolina Department of Insurance
Personal Lines Automobile Rate Filing

Auto-5a

Rating Variable Support Exhibit

Insurance Company:

Program:

Effective Date:

Rating Variable:

Category (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Support for Change (Add columns as needed)	Current Factor	Proposed Factor	% Change
t1					
t2					
t3					
t4					
t5					
t6					
t7					
t8					
etc					
Total					

Insurer Notes:

Notes:

- Complete this exhibit for each Rating Variable (i.e. Base Rates, Territory, Driver Class, etc)
- List each Category affected by your proposed Rating Variable changes (i.e. Driver Class SM20, Driver Class SM21, Driver Class SM22, etc)
- 2a. If Category codes are company specific, provide the Category code definition
- 3a. Earned Premiums or Earned Exposures should be used as weights to calculate the Total % Change. Alternatively, the Total % Change could be calculated by re-rating your entire book, which should be acknowledged in the Insurer Notes
- Support for Change value uses loss or competitive data to support your Proposed Factor selections (i.e. Indicated Factor, Indicated Change, Countrywide Factor, etc.)
- 4a. Add columns as needed to show how the Support for Change value was calculated/selected
- Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)

- ▶ Calculate the Total % Change using either earned premiums or earned exposures as weights. Otherwise, re-rate 100% of policies.
- ▶ Identify method used.

Exhibit-5a (Auto/Home/Other)

South Carolina Department of Insurance
Personal Lines Automobile Rate Filing

Auto-5a

Rating Variable Support Exhibit

Insurance Company:

Program:

Effective Date:

Rating Variable:

Category (Add/Delete rows as needed)	Earned Premium or Earned Exposures	Support for Change (Add columns as needed)	Current Factor	Proposed Factor	% Change
t1					
t2					
t3					
t4					
t5					
t6					
t7					
t8					
etc					
Total					

Insurer Notes:

Notes:

- Complete this exhibit for each Rating Variable (i.e. Base Rates, Territory, Driver Class, etc)
- List each Category affected by your proposed Rating Variable changes (i.e. Driver Class SM20, Driver Class SM21, Driver Class SM22, etc)
- If Category codes are company specific, provide the Category code definition
- Earned Premiums or Earned Exposures should be used as weights to calculate the Total % Change
- Alternatively, the Total % Change could be calculated by re-rating your entire book, which should be acknowledged in the Insurer Notes
- Support for Change value uses loss or competitive data to support your Proposed Factor selections (i.e. Indicated Factor, Indicated Change, Countrywide Factor, etc.)
- Add columns as needed to show how the Support for Change value was calculated/selected
- Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)

- ▶ Specific support for the proposed changes needs to be explicitly stated.
- ▶ Supporting calculations and values must be provided here or in a supplementary exhibit.



Exhibit-6

Exhibit-6

**South Carolina Department of Insurance
Personal Lines Automobile Rate Filing**

Auto-6
Page 1

Auto Annual Premiums by Territory

Insurance Company:
Effective Date:

COMPARISON OF ANNUAL PREMIUMS

DO NOT ADD OR DELETE ANY COVERAGE OR MAKE ANY CHANGES TO THIS EXAMPLE

1. Premiums shown are for an automobile which is driven to or from work less than ten miles one way, no business use
2. The driver is a single, male, age 34
3. BI and UMBI: \$25,000/\$50,000, PD and UMPD: \$25,000, OTC and COL: \$500 deductible
4. 2006 Ford Taurus SE (VIN: 1FADP53U86A)
5. For counties with multiple territories, please provide the highest premium rate applicable in the county
6. Insurance Score value should equal 70% of the insurance score model's best score

I certify that these premiums are correct South Carolina premiums in accordance with the above example.

SIGNATURE _____
DATE _____
TITLE _____
PHONE _____
EMAIL _____

**South Carolina Insurance Department
Private Passenger Auto Rates**

Auto-6
Page 2

Insurance Company:
Effective Date:

Coverage	Current Rate	Proposed Rate	\$ Change	% Change
County				
Abbeville				
Aiken				
Allendale				
Anderson				
Bamberg				
Barnwell				
Beaufort				
Berkeley				
Calhoun				
Charleston				
Cherokee				
Chester				
Chesterfield				
Clarendon				
Colleton				
Darlington				
Dillon				
Dorchester				
Edgefield				
Fairfield				
Florence				
Georgetown				
Greenville				
Greenwood				
Hampton				
Horry				
Jasper				
Kershaw				
Lancaster				
Laurens				
Lee				
Lexington				
Marion				
Marlboro				
McCormick				
Newberry				
Oconee				
Orangeburg				
Pickens				
Richland				
Saluda				
Spartanburg				
Sumter				
Union				
Williamsburg				
York				

Insurer Notes:

Exhibit-6 (Auto/Home)

- ▶ Companies are to provide rates in all counties for the example provided and should note any additional rating criteria used.

South Carolina Department of Insurance Personal Lines Automobile Rate Filing	Auto-6 Page 1
Auto Annual Premiums by Territory	
Insurance Company: <input style="width: 150px;" type="text" value="Insert Company Name"/> Effective Date: <input style="width: 150px;" type="text" value="MM-DD-YYYY"/>	
COMPARISON OF <u>ANNUAL PREMIUMS</u> DO NOT ADD OR DELETE ANY COVERAGE OR MAKE ANY CHANGES TO THIS EXAMPLE	
1. Premiums shown are for an automobile which is driven to or from work less than ten miles one way, no business use 2. The driver is a single, male, age 34 3. BI and UMBI: \$25,000/\$50,000, PD and UMPD: \$25,000, OTC and COL: \$500 deductible 4. 2006 Ford Taurus SE (VIN: 1FAPP53U86A) 5. For counties with multiple territories, please provide the highest premium rate applicable in the county 6. Insurance Score value should equal 70% of the insurance score model's best score	
I certify that these premiums are correct South Carolina premiums in accordance with the above example.	
SIGNATURE _____ DATE _____ TITLE _____ PHONE _____ EMAIL _____	

South Carolina Department of Insurance Personal Lines Homeowners Rate Filing	Home-6 Page 1
Home Annual Premiums by Territory	
Insurance Company: <input style="width: 150px;" type="text" value="Insert Company Name"/> Effective Date: <input style="width: 150px;" type="text" value="MM-DD-YYYY"/>	
COMPARISON OF <u>ANNUAL PREMIUMS</u> DO NOT ADD OR DELETE ANY COVERAGE OR MAKE ANY CHANGES TO THIS EXAMPLE	
1. Premiums shown are for a single family, owner occupied home with \$150,000 amount of insurance written on Form HO-3 or equivalent with full replacement costs. If coverage form is substantially different, please footnote 2. Protection class = 5 3. The loss history is 5 years claim-free 4. Liability coverage = \$100,000 and Medical Payments = \$1,000 5. Deductible amount = \$500. If the company does not offer a deductible of \$500 for all perils, quote the closest to \$500 and footnote the actual deductible used for rating 5a. For coastal counties highlighted - use a 2% deductible, rather than flat \$500 6. For the territories that are subdivided, enter the highest applicable premiums on the attached form 7. Credit Score between 650-700 or equivalent. 8. * Include a Hurricane Deductible of 2 percent (2%) <i>for coastal counties only</i> 9. Year Built 2005 10. No mitigation 11. For highlighted counties please provide rates with wind and without wind	
I certify that these premiums are correct South Carolina premiums in accordance with the above example.	
SIGNATURE _____ DATE _____ TITLE _____ PHONE _____ EMAIL _____	

Exhibit-6 (Auto/Home)

South Carolina Insurance Department Homeowner Rates

Provide for masonry and frame separately.

Insurance Company:

Effective Date:

Coverage	Current Rate	Proposed Rate	\$ Change	% Change
County				
Abeville				
Aiken				
Allendale				
Anderson				
Bamberg				
Barnwell				
Beaufort				
Berkeley				
Calhoun				
Charleston				
Cherokee				
Chester				
Chesterfield				
Clarendon				
Colleton				
Darlington				
Dillon				
Dorchester				
Edgefield				
Fairfield				
Florence				
Georgetown				
Greenville				
Greenwood				
Hampton				
Horry				
Jasper				
Kershaw				
Lancaster				
Laurens				
Lee				
Lexington				
Marion				
Marlboro				
McCormick				
Newberry				
Oconee				
Orangeburg				
Pickens				
Richland				
Saluda				
Spartanburg				
Sumter				
Union				
Williamsburg				
York				

Insurer Notes:

- ▶ Auto: Specify whether the given rates are for standard or non-standard auto.
- ▶ Home: Provide rates by county or both masonry and frame homes.



Exhibit-7

Exhibit-7

South Carolina Department of Insurance Personal Lines Automobile Rate Filing			Auto-7																																																																																																																								
Histogram (Without Capping)																																																																																																																											
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<p>Notes:</p> <ol style="list-style-type: none"> 1. Enter the maximum proposed increase and maximum proposed decrease percentages in cell B13 and B25 2. Enter the maximum proposed increase and maximum proposed decrease dollars in cell G13 and G25 3. If policies will receive a rate change >+25.0% or <-25.0%, then list the actual percentage change, the actual dollar change, and the rating variable changes that are driving the rate change for the 5 policies receiving the largest increases and the 5 policies receiving the largest decreases 4. Complete exhibit without the use of capping 5. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc) 																																																																																																																											



Exhibit-7 (Auto/Home/Other)

South Carolina Department of Insurance Personal Lines Automobile Rate Filing			Auto-7		
Histogram (Without Capping)					
Insurance Company:		Insert Company Name			
Program:		Insert Program Type			
Effective Date:		MM-DD-YYYY			
Rate Change Interval	# Policies Affected	% Policies Affected	Rate Change Interval	# Policies Affected	% Policies Affected
25.1%	XX.X%		\$ 400.01	\$XXX.XX	
20.1%	25.0%		\$ 300.01	\$ 400.00	
15.1%	20.0%		\$ 200.01	\$ 300.00	
10.1%	15.0%		\$ 100.01	\$ 200.00	
5.1%	10.0%		\$ 50.01	\$ 100.00	
0.1%	5.0%		\$ 0.01	\$ 50.00	
No Change			No Change		
-0.1%	-5.0%		\$ (0.01)	\$ (50.00)	
-5.1%	-10.0%		\$ (50.01)	\$ (100.00)	
-10.1%	-15.0%		\$ (100.01)	\$ (200.00)	
-15.1%	-20.0%		\$ (200.01)	\$ (300.00)	
-20.1%	-25.0%		\$ (300.01)	\$ (400.00)	
-25.1%	XX.X%		\$ (400.01)	\$XXX.XX	
Total	0	0.0%	Total	0	0.0%
Insurer Notes:					
Notes:					
1. Enter the maximum proposed increase and maximum proposed decrease percentages in cell B13 and B25 2. Enter the maximum proposed increase and maximum proposed decrease dollars in cell G13 and G25 3. If policies will receive a rate change >+25.0% or <-25.0%, then list the actual percentage change, the actual dollar change, and the rating variable changes that are driving the rate change for the 5 policies receiving the largest increases and the 5 policies receiving the largest decreases 4. Complete exhibit without the use of capping 5. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)					

- ▶ This exhibit must be completed without taking capping into account. If the company is proposing a one-term cap, then details of the proposed capping plan must be provided.

Exhibit-7 (Auto/Home/Other)

South Carolina Department of Insurance
Personal Lines Automobile Rate Filing

Auto-7

Histogram (Without Capping)

Insurance Company:
 Program:
 Effective Date:

Rate Change Interval	# Policies Affected	% Policies Affected
25.1% <input type="text" value="XX.X%"/>		
20.1%	25.0%	
15.1%	20.0%	
10.1%	15.0%	
5.1%	10.0%	
0.1%	5.0%	
No Change		
-0.1%	-5.0%	
-5.1%	-10.0%	
-10.1%	-15.0%	
-15.1%	-20.0%	
-20.1%	-25.0%	
-25.1% <input type="text" value="XX.X%"/>		
Total	0	0.0%

Rate Change Interval	# Policies Affected	% Policies Affected
\$ 400.01 <input type="text" value="XXXXXX"/>		
\$ 300.01	\$ 400.00	
\$ 200.01	\$ 300.00	
\$ 100.01	\$ 200.00	
\$ 50.01	\$ 100.00	
\$ 0.01	\$ 50.00	
No Change		
\$ (0.01)	\$ (50.00)	
\$ (50.01)	\$ (100.00)	
\$ (100.01)	\$ (200.00)	
\$ (200.01)	\$ (300.00)	
\$ (300.01)	\$ (400.00)	
\$ (400.01) <input type="text" value="XXXXXX"/>		
Total	0	0.0%

Insurer Notes:

Notes:

1. Enter the maximum proposed increase and maximum proposed decrease percentages in cell B13 and B25
2. Enter the maximum proposed increase and maximum proposed decrease dollars in cell G13 and G25
3. If policies will receive a rate change >+25.0% or <-25.0%, then list the actual percentage change, the actual dollar change, and the rating variable changes that are driving the rate change for the 5 policies receiving the largest increases and the 5 policies receiving the largest decreases
4. Complete exhibit without the use of capping
5. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)

- ▶ The maximum proposed percentage and dollar increases and decreases should be entered in the appropriate cells.
- ▶ If the data is computed by re-rating, then 100% of policies must be re-rated.

Exhibit-7 (Auto/Home/Other)

South Carolina Department of Insurance
Personal Lines Automobile Rate Filing

Auto-7

Histogram (Without Capping)

Insurance Company:
 Program:
 Effective Date:

Rate Change Interval	# Policies Affected	% Policies Affected
25.1% - XX.X%		
20.1% - 25.0%		
15.1% - 20.0%		
10.1% - 15.0%		
5.1% - 10.0%		
0.1% - 5.0%		
No Change		
-0.1% - -5.0%		
-5.1% - -10.0%		
-10.1% - -15.0%		
-15.1% - -20.0%		
-20.1% - -25.0%		
-25.1% - XX.X%		
Total	0	0.0%

Rate Change Interval	# Policies Affected	% Policies Affected
\$ 400.01 - \$XXX.XX		
\$ 300.01 - \$ 400.00		
\$ 200.01 - \$ 300.00		
\$ 100.01 - \$ 200.00		
\$ 50.01 - \$ 100.00		
\$ 0.01 - \$ 50.00		
No Change		
\$ (0.01) - \$ (50.00)		
\$ (50.01) - \$ (100.00)		
\$ (100.01) - \$ (200.00)		
\$ (200.01) - \$ (300.00)		
\$ (300.01) - \$ (400.00)		
\$ (400.01) - \$XXX.XX		
Total	0	0.0%

Insurer Notes:

Notes:

1. Enter the maximum proposed increase and maximum proposed decrease percentages in cell B13 and B25
2. Enter the maximum proposed increase and maximum proposed decrease dollars in cell G13 and G25
3. If policies will receive a rate change >+25.0% or <-25.0%, then list the actual percentage change, the actual dollar change, and the rating variable changes that are driving the rate change for the 5 policies receiving the largest increases and the 5 policies receiving the largest decreases
4. Complete exhibit without the use of capping
5. Complete exhibit for each program type being filed (i.e. Auto, Motorcycle, etc)

- ▶ If any policies receive a rate change greater than +25.0% or less than -25.0%, then the actual percentage and dollar changes as well as the rating variable changes that are driving the rate changes for the 5 policies receiving the largest increases and the 5 policies receiving the largest decreases must be provided.

Contact Information

- ▶ For additional information, contact the Department's Market Services Division at:
 - ▶ P&Cmail@doi.sc.gov
 - ▶ (803) 737-6230