

Department of Consumer & Business Services

**Oregon Insurance Division – 5**

350 Winter St. NE, Rm. 440

Salem, Oregon 97301-3883

Phone (503) 947-7983

**RATING ORGANIZATION LOSS COST  
STANDARDS FOR COMMERCIAL LINES MODIFICATION FACTORS**

This checklist must be submitted with your filing in compliance with OAR 836-010-0011(2). It will help insurers make a complete filing. The checklist includes relevant statutes, rules, and bulletins. The standards, in some cases, are summaries. Review of the entire statute or rule may be necessary. By each statement, on the line provided, identify the page, rate, rule or exhibit that satisfy the requirement or check the box to verify compliance. Not including required information or policy provision may result in disapproval of the filing. If the statement is not included and is not required to be included, an “N/A” may be indicated. *(If submitting your filing electronically, bookmark the provision in the policy, rules, or exhibits that satisfy the requirement.)*

**Checklist is NOT APPLICABLE to the following:**

For TOIs not listed, see our Web site for specific standards: [www.orgoninsurance.org/docs/serff/filing\\_requirements.htm](http://www.orgoninsurance.org/docs/serff/filing_requirements.htm).

**TOI (type of Insurance) code:**

- |  |  |
|--|--|
| <input type="checkbox"/> 05.0 Commercial multi-peril (liability & non-liability) | <input type="checkbox"/> 09.0 Inland marine            |
| <input type="checkbox"/> 17.0001 General liability                               | <input type="checkbox"/> 17.0004 Contractual liability |
| <input type="checkbox"/> 17.0019 Professional errors and omissions               | <input type="checkbox"/> 01.0 Property                 |
| <input type="checkbox"/> 11.0 Medical malpractice (claims made/occurrence)       | <input type="checkbox"/> 27.0 Boiler and Machinery     |
| <input type="checkbox"/> 19.2/21.2 Automobile                                    | <input type="checkbox"/> 03.0 Farm                     |
| <input type="checkbox"/> 26.0 Burglary and theft                                 | <input type="checkbox"/> Other (identify) _____        |

**Sub-type code:** \_\_\_\_\_ **Name of code:** \_\_\_\_\_

Review requirements	Reference	Description of review standards requirements	Location of standard in filing (or check the box)
<b>GENERAL REQUIREMENTS (FOR ALL FILINGS)</b>			
Product Locator		The forms in this filing were developed with the NAIC Product Locator, Oregon information. <i>(The requirements on this document are substantially the same as those on the Product Locator for consistency in drafting and meeting these filing requirements.)</i>	
Filing submission	OAR 836-010-0011 As required on SERFF or our Web site	Required forms are located on SERFF or on our Web site: <a href="http://www.oregoninsurance.org/docs/serff/filing_requirements.htm">www.oregoninsurance.org/docs/serff/filing_requirements.htm</a> . These must be submitted for your filing for it to be accepted as complete: 1. Adoption form for Rates (Form 440-3613) 2. Filing description on transmittal form (cover letter). 3. Third party filers' letter of authorization. 4. Certificate of compliance form signed by authorized person. 5. Product standards (this document). 6. Supporting information (Form 440-3614) 7. Rates, rating plans and rating systems with actuarial memorandum including the reasons and procedures used with reference to the rating organization rules and rates. 8. For mail filings, two self-addressed stamped envelopes, one in which the division can return approved forms.	Yes    N/A  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/>
Review	ORS 742.003(1) and 737.205	Check all that are submitted in this filing for review: 1. New program. 2. Revision to existing program	Yes    N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Applicability	ORS 737.205(1)	Requested effective date is after the filing is received by the Insurance Division.	Yes    No <input type="checkbox"/> <input type="checkbox"/>
	ORS 737.207	Prior approval of commercial liability if average annual rate increase or decrease exceeds 15 percent.	Yes    No <input type="checkbox"/> <input type="checkbox"/>
	Bulletin 2003-6	See bulletin for prospective lost cost filing procedures.	

<b>RATE, RULE, RATING PLAN, CLASSIFICATION, AND TERRITORY FILING REQUIREMENTS</b>					
Discrimination	ORS 746.015, OAR 836-081-0010	Rates, rating plans, and rating systems do not discriminate unfairly in the availability of insurance and application of rates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Fictitious groups	ORS 737.600	If filing a fictitious group for rate purposes, the group meets the requirements of ORS 737.600(3)(b) for mass-marketing plans.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Schedule rating	Division Bulletin 82-4	Schedule rating plans are limited to total credits or debits of 25 percent unless justified by statistical evidence.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Rebates	ORS 746.035 and 746.045	Are inducements or rebates specified in the policy? (If “yes,” explain in the cover letter and identify the location in the rule.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>Ratemaking generally</b>					
Fees, service charges, taxes	ORS 737.310 and OAR 836-010-0021	Provide cost-accounting justification on initial filings and subsequent changes.			
Loss valuation	ORS 737.310 and OAR 836-010-0021	Provide the following: 1. Premium data. 2. Loss and LAE data. 3. Expected loss ratio.			
Investment income	ORS 737.310 and OAR 836-010-0021	1. Cash flow method. <i>Or</i>			
		2. Alternative method showing amount of investment income earned on loss, LAE, and unearned premium reserve to earned premium.			
Underwriting profit & contingencies	ORS 737.310 and OAR 836-010-0021	1. Oregon data for commission and brokerage.			
		2. Countrywide data for general and other acquisition expenses as reported in the <i>Insurance Expense Exhibit</i> .			
		3. Oregon data for taxes, licenses, and fees.			