

Department of Consumer & Business Services
Oregon Division of Financial Regulation - 5
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**RATING ORGANIZATION LOSS COST
STANDARDS FOR PERSONAL LINES MODIFICATION FACTORS**

This checklist has been designed to assist insurers by providing the pertinent statutes, rules and bulletins that may apply. It must be reviewed and completed in compliance with OAR 836-010-0011(2). However, it does not need to be included with a submission. The standards, in some cases, are summaries. Review of the entire statute or rule may be necessary. Please review each statement for compliance and mark the appropriate box. If the statement is not included and is not required to be included, an "N/A" may be indicated. If this checklist is needed to facilitate the review of the filing, the reviewer may request the completed checklist (product standards) at any time. Please see ORS 731.296 and ORS 731.016.

TOI (type of Insurance) code:

- 01.0 Property
- 03.0 Personal Farmowners
- 04.0 Homeowners

- 09.0 Inland Marine
- 12.0 Earthquake
- 17.1 Other Liability – Occurrence Only

- 19.0 Personal Automobile

- 26.0 Burglary and Theft
- 30.1 Dwelling Fire/Personal Liability

Sub-TOI:

- 1.0002 Personal Property – Fire and Allied Lines
- 03.0000 Personal Farmowners
- 04.0000 Homeowners Sub-TOI Combo
- 04.0001 Condominium Homeowners
- 04.0002 Mobile Homeowner
- 04.0003 Owner Occupied Homeowners
- 04.0004 Tenant Homeowners
- 04.0005 Other Homeowners
- 09.0006 Other Personal Inland Marine
- 12.0002 Personal Earthquake
- 17.1003 Comprehensive Personal Liability
- 17.1021 Personal Umbrella & Excess
- 19.0000 Personal Auto Combo
- 19.0001 Private Passenger Auto
- 19.0002 Motorcycle
- 19.0003 Recreational Vehicle
- 19.0004 Other
- 26.0002 Personal Burglary and Theft
- 30.1000 Dwelling Fire/Personal Liability

Review requirements	Reference	Description of review standards requirements	Check Answer	
GENERAL REQUIREMENTS (FOR ALL FILINGS)				
Filing submission	OAR 836-010-0011 As required on SERFF or our website	Required forms are located on SERFF or on our website: http://dfr.oregon.gov/rates-forms/Pages/index.aspx . These must be submitted for your filing for it to be accepted as complete: 1. Adoption form for Rates (Form 440-3613) (Required for paper filings only.) 2. Filing description under the General Information tab or a Cover letter under the Supporting Documentation tab. 3. Third party filers' letter of authorization. 4. Certificate of compliance form. 5. Supporting information (Form 440-3614) 6. Rates, rating plans and rating systems with actuarial memorandum including the reasons and procedures used with reference to the rating organization rules and rates. 7. For paper filings, two self-addressed stamped envelopes, one in which the division can return approved forms. NOTE: This checklist does not need to be submitted with the filings. However, it may be requested by the reviewer. This tool may be used to assist you in complying with our requirements.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
Review	ORS 742.003(1), ORS 737.205	Check all that are submitted in this filing for review: 1. New program. 2. Revision to existing program	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
Applicability	ORS 737.205(1)	Requested effective date is on or after the filing is received by the Insurance Division.	Yes <input type="checkbox"/>	
	Bulletin 2003-6	See bulletin for prospective lost cost filing procedures.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>

RATE, RULE, RATING PLAN, CLASSIFICATION, AND TERRITORY FILING REQUIREMENTS				
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"/>
Rebates	ORS 746.035, ORS 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"/>

Ratemaking generally				
Fees, service charges, taxes	ORS 737.310, OAR 836-010-0021	Provide cost-accounting justification on initial filings and subsequent changes.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
Loss valuation	ORS 737.310, OAR 836-010-0021	Provide the following: 1. Premium data. 2. Loss and LAE data. 3. Expected loss ratio.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
Investment income	ORS 737.310, OAR 836-010-0021	1. Cash flow method. <i>Or</i>	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
		2. Alternative method showing amount of investment income earned on loss, LAE, and unearned premium reserve to earned premium.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
Underwriting profit & contingencies	ORS 737.310, OAR 836-010-0021	1. Oregon data for commission and brokerage.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
		2. Countrywide data for general and other acquisition expenses as reported in the <i>Insurance Expense Exhibit</i> .	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
		3. Oregon data for taxes, licenses, and fees.	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>