

Department of Consumer & Business Services
Oregon Division of Financial Regulation – 5

350 Winter St. NE
Salem, Oregon 97301-3883
Phone (503) 947-7983

WORKERS COMPENSATION
Reference Filing Adoption Form
Adoption of Advisory Organization
Prospective Loss Costs

Department action:

Approved;

limitations: _____

Disapproved;

reason: _____

Action date: _____

Effective date: _____

Analyst: _____

Filing no.: _____

Date: _____ 2. NAIC no.: _____

1. Insurer name: _____

Contact person: _____

Title _____

Filing entity (if not insurer)*: _____

*Requires letter of authorization

Mailing address: _____

City

State

ZIP

Toll-free/collect phone no.: _____

Fax no. and e-mail address: _____

3. ADVISORY ORGANIZATION _____

4. ADVISORY ORGANIZATION REFERENCE FILING # _____

5. The above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files to be deemed to have independently submitted as its own filing the prospective loss costs in the captioned Reference Filing.

The insurer's rates will be the combination of the prospective loss costs and the loss costs multipliers and, if utilized, the expense constants specified in the attachments.

6A. PROPOSED RATE LEVEL CHANGE _____% EFFECTIVE DATE _____

6B. PROPOSED PREMIUM LEVEL CHANGE* _____% EFFECTIVE DATE _____

7A. PRIOR RATE LEVEL CHANGE _____% EFFECTIVE DATE _____

7B. PRIOR PREMIUM LEVEL CHANGE* _____% EFFECTIVE DATE _____

* The premium level change is the change in the insurer's annual collectible premium.

8. ATTACH "SUMMARY OF SUPPORTING INFORMATION FORM"
(Use a separate Summary for each insurer-selected loss cost multiplier.)

9. CHECK ONE OF THE FOLLOWING:

The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants are applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurers rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and, if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the rating organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or amended or withdrawn by the insurer.

The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants are applicable only to the above Rating Organization Reference Filing.