

Delaware Compensation Rating Bureau, Inc.



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January 10, 2001

**BUREAU CIRCULAR NO. 742**

To All Members of the Bureau:

Re: **REVISED WORKERS COMPENSATION RESIDUAL MARKET RATE  
AND VOLUNTARY MARKET LOSS COSTS  
EFFECTIVE MARCH 1, 2001  
BUREAU FILING NO. 0007**

Bureau Filing No. 0007 proposed average reductions of 4.94 percent in residual market rates and 2.87 percent in voluntary market loss costs to be effective on a new and renewal basis as of December 1, 2000. The Department of Insurance has disapproved that filing and has required that the Bureau file schedules of rating values producing average reductions in residual market rates and voluntary market loss costs of 11.15 percent and 9.21 percent, respectively.

After careful consideration by Bureau staff and the Governing Board, the Bureau has filed schedules of rating values that comply with the Department of Insurance's requirements. **These amended rating values have been approved by the Department of Insurance EFFECTIVE MARCH 1, 2001 on a new and renewal basis (note the change from the original filing's proposed effective date of December 1, 2000). For policies having normal anniversary rating dates between December 1, 1999 and March 1, 2001, the current schedules of Bureau rates and loss costs will continue to be applicable.**

Members are further advised that the Bureau has obtained Department of Insurance authorization for the next annual filing of residual market rates and voluntary market loss costs to be submitted with a proposed effective date of December 1, 2001.

The Bureau has filed these revised rating values in order to avoid potentially protracted, costly and counterproductive adversarial proceedings before the Department of Insurance and/or higher judicial bodies. The approved rating values effective March 1, 2001 differ significantly from the original Bureau filing and are not the result of agreed negotiations between the Bureau and the Department of Insurance. Accordingly and in contrast to circumstances that have applied to other recent Delaware filings, the Bureau is not in a position to appropriately address

possible questions regarding the rating values embodied in the amended filing. Questions about the analytical basis for the revised rating values should, therefore, be directed to the Delaware Department of Insurance at the address and/or telephone number shown below:

Rating Section  
 Department of Insurance  
 State of Delaware  
 841 Silver Lake Boulevard  
 Dover, DE 19901  
 (302) 739-4251

**Members must file an amended (or re-file their existing) Insurer Adoption of DCRB Workers' Compensation Loss Costs form with the Delaware Department of Insurance to adopt the revised loss costs on a new and renewal basis on or after March 1, 2001. A copy of the Department of Insurance's "FORMS AND RATES BULLETIN 14 INCORPORATED," which includes forms applicable to these filings, is attached for member reference and use.**

The following chart indicates the approved overall average changes in rating values:

<u>Rating Value(s)</u>	<u>Approved Overall Average Change</u>
Residual Market Rates - Collectible	-11.15%
Residual Market Rates - Manual	-10.05%
Voluntary Market Loss Costs - Collectible	-9.21%
Voluntary Market Loss Costs - Manual	-8.08%
Voluntary Market Loss Costs - Manual after Surcharge Offset	-8.28%

The approved residual market rates and voluntary market loss costs share common loss provisions based on the same loss development and trend analysis applied to statewide Delaware experience. The differences between residual market rate changes and voluntary market loss cost changes result from revisions in expense provisions based on recent indications, as compared to currently approved values.

The implied loss cost multiplier reflecting expense considerations for current residual market rates is approximately **1.2740**. On a comparable basis the implied loss cost multiplier for approved residual market rates effective March 1, 2001 is **1.2469**. (Note: Because voluntary market loss costs in the approved filing are nominally reduced to offset effects of the ongoing Delaware Insurance Plan surcharge program, calculation of residual market rates from approved voluntary market loss costs requires an effective multiplier of approximately 1.2497.)

A comparison of current and approved March 1, 2001 residual market expense provisions is shown below:

**RESIDUAL MARKET RATES**  
Expense Loading

	<u>Current Percentage</u>	<u>Approved March 1, 2001 Percentage</u>
<b>LOSS AND LOSS ADJUSTMENT EXPENSE</b>		
Losses	63.59	64.66
Loss Adjustment Expense	11.80	12.46 a
Loss & Loss Adjustment	75.39	77.12
<b>UNDERWRITING EXPENSES</b>		
Commission	5.17	5.59
Other Acquisition	2.57	2.60
General Expenses	3.49	3.85
Premium Discount	10.01	10.23
State Premium Tax	2.00	2.00
Other State Tax	0.30	0.30
Administrative Assessment	3.10	3.08 b
Workers Compensation Fund	2.00	3.50
Deviations	0.00	0.00
Policyholder Dividends	0.00	0.00
Underwriting Profit	-4.03	-8.27
Underwriting Expense Total	24.61	22.88

a As ratio to loss, loss adjustment expense = 0.1927

b As ratio to loss, administrative assessment = 0.0477

**Attached for member reference is a table of rates, loss costs and expected loss factors by classification consistent with the Insurance Commissioner's approval of Filing No. 0007 as amended.**

**BACKGROUND FOR BUREAU FILING NO. 0007 AND AMENDMENT THERETO**

As presented to the Department of Insurance, Bureau Filing No. 0007 originally proposed the following amendments to residual market rates and voluntary market loss costs effective on a new and renewal basis as of December 1, 2000:

<u>Proposed Rating Value(s)</u>	<u>Overall Average Change</u>
Residual Market Rates - Collectible	-4.94%
Residual Market Rates - Manual	-3.69%
Voluntary Market Loss Costs - Collectible	-2.87%
Voluntary Market Loss Costs - Manual	-1.60%
Voluntary Market Loss Costs - Manual Adjusted for DIP Surcharge	-1.82%

Residual market rate and voluntary market loss cost indications have been changed in compliance with Department of Insurance requirements as previously noted.

Other components of the filing as proposed were approved as filed but with **revised effective dates of March 1, 2001**. In particular, each of the following components of the filing were approved as originally presented:

- Amendments to the Rulings and Interpretations section of the Manual
- Revisions to the Temporary Staffing Classifications Cross-Reference Chart in the Manual
- Updates to corporate officer payroll minimums and maximums for premium computation purposes
- Continuation of the existing DIP surcharge program
- DCCPAP revisions to qualifying wage table effective March 1, 2001 (note change from proposed effective date of January 1, 2001)
- Residual market expense constant
- Residual market minimum premium
- Excess loss factors
- Excess loss premium factors
- Retrospective rating
- Small Deductible Program
- State and hazard group relativities
- Update to expected loss group ranges
- Workplace Safety Program
- Merit Rating Plan

#### **ADDITIONAL REVISIONS TO RATING VALUES**

The amended filing retained various rating values intact from the original presentation of Filing No. 0007. For ease of reference and to confirm the approved values for those items they are reproduced below.

Residual Market Premium Discount Table

<u>Premium Range</u>	<u>Schedule Y</u>
First \$ 5,000	0.0%
Next \$ 95,000	10.9%
Next \$400,000	12.6%
Over \$500,000	14.4%

Residual Market Expense Constant

The expense constant is increased from \$200 to **\$210**.

Retrospective Rating Values (Other than USL&HW Coverages)Residual Market Tax Multiplier

The residual market tax multiplier is **1.1233**.

Optional Loss Development Factors

First Adjustment	0.4657
Second Adjustment	0.3528
Third Adjustment	0.2906

State & Hazard Group Relativities

Hazard Group I	1.249
II	1.153
III	0.774
IV	0.547

Small Deductible Program Loss Elimination Ratios and Premium Credits

<u>Deductible Level</u>	<u>Loss Elimination Ratio</u>	<u>Premium Credit</u>
500	0.050	0.040
1,000	0.075	0.055
1,500	0.090	0.065
2,000	0.100	0.075
2,500	0.110	0.085
3,000	0.120	0.095
3,500	0.130	0.105
4,000	0.140	0.110
4,500	0.150	0.115
5,000	0.155	0.120

Delaware Construction Classification Premium Adjustment Program: **Effective March 1, 2001**

<u>DCCPAP Credit</u>	<u>Average Hourly Wage</u>	
0%	13.24	or less
5%	13.25	15.25
6%	15.26	15.50
7%	15.51	15.75
8%	15.76	16.00
9%	16.01	16.25
10%	16.26	16.50
11%	16.51	16.75
12%	16.76	17.00
13%	17.01	17.25
14%	17.26	17.50
15%	17.51	18.00
16%	18.01	18.50
17%	18.51	19.00
18%	19.01	19.50
19%	19.51	20.00
20%	20.01	20.50
21%	20.51	21.00
22%	21.01	21.75
23%	21.76	22.50
24%	22.51	23.25
25%	Over 23.25	

In addition to the above rating values, the amended filing included Excess Loss Premium Factors and Excess Loss Pure Premium Factors, both including and excluding Loss Adjustment Expense. Tables of the approved values (which are unchanged from the original values in Filing No. 0007) are attached to this circular. A revision to the Expected Loss Group Ranges is also attached.

Complete Manual pages presenting amendments consistent with the Insurance Commissioner's approval of Filing No. 0007 will be prepared and distributed in the usual fashion.

Any questions concerning this circular may be addressed Michael J. Doyle, Chief Actuary, or me.

Timothy L. Wisecarver  
President

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Attachments

***Remember to visit our web site at [www.dcrb.com](http://www.dcrb.com) for more information about this and other topics.***

**STATE OF DELAWARE  
DEPARTMENT OF INSURANCE**

**FORMS AND RATES BULLETIN 14 INCORPORATED**

Submission Date: \_\_\_\_\_

DCRB Reference Filing No.: \_\_\_\_\_

Applicable to policies effective on and after: \_\_\_\_\_

INSURER NAME: \_\_\_\_\_

INSURER NAIC NO.: \_\_\_\_\_ INDICATED MULTIPLIER: \_\_\_\_\_

The above insurer hereby declares that it is a member or subscriber of the Delaware Compensation Rating Bureau ("DCRB"). 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 DCRB loss costs approved by the Delaware Insurance Department and the company's indicated multiplier, as shown above, along with any expense contract, premium discount table, size-of-premium expense table for retrospective rating plans, and minimum premium formula specified in the company's attached manual exception pages.

The indicated multiplier, along with any expense constant, premium discount table and the minimum premium formula filed, represent a rate level increase \_\_\_\_\_ or decrease \_\_\_\_\_ of \_\_\_\_\_ % and a premium level increase \_\_\_\_\_ or decrease \_\_\_\_\_ of \_\_\_\_\_ %.

The indicated multiplier and the attached exception pages apply only to the DCRB reference filing indicated above. The insurer understands that this will necessitate the submission of a new adoption form and exception pages prior to the effective date of any future loss costs reference filing.

**CHECK ALL THAT APPLY:**

**Manual exception pages attached for:**

\_\_\_\_\_ **Minimum Premium Formula**

\_\_\_\_\_ **Expense Constant**

\_\_\_\_\_ **Discount Table**

\_\_\_\_\_ **Retro Expense Table**



**SUMMARY OF SUPPORTING INFORMATION  
WORKERS' COMPENSATION LOSS COST MULTIPLIER**

Insurer: \_\_\_\_\_ NAIC No.: \_\_\_\_\_  
 DCRB Reference Filing No.: \_\_\_\_\_  
 Effective Date of Multiplier: \_\_\_\_\_

Development of Expected Loss Ratio (Expressed as a percent of standard premium at company rate):

		AVERAGE
A.	Commission	_____ %
B.	Other Acquisition	_____ %
C.	General Expense	_____ %
D.	Taxes, Licenses and Fees	_____ %
E.	Underwriting Profit & Contingencies	_____ %
F.	Residual Market Costs	_____ %
G.	Premium Discount	_____ %
H.	Insurance Fund Assessment (Second Injury Fund)	_____ %
I.	Dividend Provision (Participating Plan)	_____ %
J.	Other (Explain)	_____ %
K.	Total	_____ %
Expected Loss Ratio (100%-K)		_____ %

Actual Incurred Expense Ratios for three (3) most recent available years. (Commission and General Expense expressed as a percent of written premium at company rates. Other components expressed as percents of standard earned premium at company rates).

	CY _____	CY _____	CY _____	AVERAGE
A.	Commission	_____	_____	_____
B.	Other Acquisition	_____	_____	_____
C.	General Expense	_____	_____	_____
D.	Taxes, Licenses & Fees	_____	_____	_____
E.	Underwriting Profit & Contingencies	_____	_____	_____
F.	Residual Market Costs	_____	_____	_____
G.	Premium Discount	_____	_____	_____
H.	Insurance Fund Assessment	_____	_____	_____
I.	(Second Injury Fund)	_____	_____	_____
J.	Dividend Plan (Participating Plan)	_____	_____	_____
K.	Other (Explain)	_____	_____	_____
L.	Total	_____	_____	_____

Indicated Company Loss Cost Multiplier: \_\_\_\_\_

Example: Assume Loss and Loss Adjustment Ratio is 0.650.  
 Loss Cost Multiplier with no deviation is 1.0/0.650 = 1.5385.  
 Loss Cost Multiplier with 15% downward deviation is 0.85/0.650 = 1.3077.  
 Loss Cost Multiplier with 15% upward deviation is 1.15/0.650 = 1.7692.

COMPLETED BY: \_\_\_\_\_ TELEPHONE NO.: \_\_\_\_\_

NOTE: If an insurer wishes to make any modifications to the loss costs led by DCRB (other than the application of a multiplier to represent the insurer's expenses, profit and contingencies), the resulting rates will be considered to be independent rates, and shall be subject to the 30 day review provision of Title 18 Del. C., Section 2610.

**REVISED LOSS COST MULTIPLIER CALCULATION  
SPREADSHEET TO BE INCORPORATED WITH  
BULLETIN 14**

Workers' Compensation Insurance  
Loss Cost Multiplier  
General Instructions

Commissions, premium tax and other state tax provisions are to reflect the ratio of commissions paid, premium tax paid and other state tax paid to company manual premium.

Other acquisition and general expense are to reflect the ratio of other acquisition expense paid and general expense paid to company standard earned premium. Standard earned premium is to reflect adjustment for expense constant premium schedule rating premium.

Dividend Provision (Participating Plan)

Loss cost multipliers for use with participating policies shall contain a provision for policyholder dividends. Policyholder dividends shall reflect the ratio of policyholder dividends paid to company standard earned premium adjusted to reflect expense constant premium and schedule rating premium.

Standard earned premium shall be adjusted reflecting an assumed underlying expense constant equal to the most recently filed expense constant by Delaware Compensation Rating Bureau.

Deviations

Deviation from indicated manual rates shall reflect adjusted company losses compared to Delaware Compensation Rating Bureau to the extent credible. Losses shall be provided separately for indemnity and medical coverages. Losses may be either calendar year losses with all IBNR or policy year incurred losses developed to ultimate settlement. If the company elects to submit policy year loss data, it is required to provide underlying loss development triangles for indemnity and medical coverages separately.

Insurance Fund Assessment (Second Injury Fund)

Insurance Fund Assessment to be used with revised rates will be provided by Delaware Compensation Rating Bureau in its circular letter detailing changes to loss costs and other rating elements.

Administrative Assessment

Administration Assessment will continue to be built into voluntary market loss costs.

Expense Exhibits identified as (I) or (II) shall be completed and underlying supporting data shall accompany the company loss cost multiplier filing. Multipliers shall be filed reflecting most recent expense data, with each Delaware Compensation Rating Bureau loss cost revision. Failure to provide complete expense exhibits and provide underlying support shall result in disapproval of the proposed company filing and company(s) will be filed by reference for residual market rates and rating elements. All reference filings of this type shall remain in effect until the next subsequent Delaware Compensation Rating Bureau revision of loss costs.

**NOTES:** (1) Commissions, premium tax, license and fees are to be calculated as a percentage of company manual premium. Other acquisition and general administrative expense are to be calculated as a percentage of standard earned premium and standard earned premium is required to be adjusted to reflect schedule rating and expense constant.

(2) Insurers having previously filed and are currently using rating tiers within the same company or have company rate differentials in effect may continue to use them until further notice.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS  
FOR DELAWARE COMPENSATION INSURANCE**

Approved Effective March 1, 2001 on New and Renewal Business

CODE NO	BUREAU* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP
				A-1	A-2	A-3	
005	15.24	19.04	2,700	7.18	8.29	9.07	III
0006	7.01	8.76	935	3.30	3.81	4.17	II
007	6.46	8.08	1,545	3.05	3.52	3.85	II
0008	2.62	3.28	750	1.24	1.43	1.56	II
009	25.48	31.84	2,700	12.01	13.85	15.16	III
0011	3.40	4.25	910	1.60	1.85	2.02	II
0013	4.37	5.46	1,110	2.06	2.38	2.60	II
0016	3.89	4.87	610	1.84	2.12	2.32	II
028	4.26	5.33	1,090	1.89	2.26	2.43	III
0034	5.15	6.44	740	2.43	2.80	3.07	II
0036	4.64	5.80	690	2.19	2.52	2.76	II
055	5.73	7.16	1,390	2.54	3.04	3.27	III
059	5.98	7.48	1,445	2.66	3.17	3.41	III
0083	6.38	7.98	870	3.01	3.47	3.80	II
101	5.27	6.58	1,295	2.28	2.68	2.81	III
104	3.76	4.70	985	1.63	1.92	2.01	II
105	4.69	5.86	1,175	2.03	2.39	2.50	III
106	5.90	7.38	1,430	2.56	3.00	3.15	II
107	3.73	4.66	980	1.62	1.90	1.99	I
108	5.77	7.21	1,400	2.50	2.94	3.08	II
109	5.40	6.74	1,320	2.34	2.75	2.88	III
110	3.09	3.86	845	1.34	1.57	1.65	II
111	4.74	5.93	1,190	2.06	2.42	2.53	II
112	9.20	11.49	2,105	3.98	4.68	4.91	II
113	6.22	7.76	1,490	2.69	3.16	3.32	II
114	9.41	11.76	2,150	4.08	4.79	5.02	III
115	2.38	2.97	700	1.03	1.21	1.27	I
119	6.78	8.47	1,610	2.94	3.45	3.62	II
130	5.55	6.94	1,355	2.40	2.83	2.96	III
132	2.69	3.37	765	1.17	1.37	1.44	II
134	3.08	3.85	845	1.34	1.57	1.65	II
135	1.77	2.21	575	0.77	0.90	0.95	I
136	2.38	2.97	700	1.03	1.21	1.27	II
139	5.62	7.03	1,370	2.44	2.86	3.00	II
141	4.66	5.82	1,170	2.02	2.37	2.49	II
142	2.35	2.93	695	1.02	1.19	1.25	II
161	2.78	3.47	785	1.20	1.41	1.48	II
163	2.94	3.68	815	1.27	1.50	1.57	II
165	4.91	6.13	1,220	2.12	2.50	2.62	III
166	2.36	2.95	695	1.02	1.20	1.26	II
185	3.76	4.70	985	1.63	1.92	2.01	II
187	3.73	4.66	980	1.62	1.90	1.99	I
191	2.78	3.47	785	1.20	1.41	1.48	II
201	4.70	5.87	1,180	2.03	2.39	2.51	II
204	2.96	3.70	820	1.28	1.51	1.58	II

\* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

\*\* Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS  
FOR DELAWARE COMPENSATION INSURANCE**

Approved Effective March 1, 2001 on New and Renewal Business

CODE NO	BUREAU* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP
				A-1	A-2	A-3	
205	2.69	3.37	765	1.17	1.37	1.44	I
221	4.90	6.12	1,220	2.12	2.49	2.61	II
222	4.99	6.24	1,240	2.16	2.54	2.67	II
225	4.90	6.12	1,220	2.12	2.49	2.61	II
227	4.25	5.32	1,090	1.84	2.17	2.27	II
255	4.44	5.54	1,125	1.92	2.26	2.37	II
257	6.67	8.34	1,585	2.89	3.40	3.56	II
259	3.47	4.34	925	1.51	1.77	1.86	II
261	5.48	6.85	1,340	2.38	2.79	2.93	II
263	3.53	4.42	940	1.53	1.80	1.89	II
265	3.47	4.34	925	1.51	1.77	1.86	II
275	4.90	6.12	1,220	2.12	2.49	2.61	II
276	4.99	6.24	1,240	2.16	2.54	2.67	II
281	3.05	3.82	840	1.32	1.56	1.63	II
282	4.32	5.40	1,100	1.87	2.20	2.31	III
297	3.05	3.82	840	1.32	1.56	1.63	II
301	7.26	9.08	1,710	3.15	3.70	3.88	III
305	6.69	8.36	1,590	2.90	3.41	3.57	II
306	4.55	5.69	1,150	1.97	2.32	2.43	II
309	3.74	4.67	980	1.62	1.90	2.00	II
311	3.79	4.73	990	1.64	1.93	2.02	II
319	3.91	4.89	1,015	1.69	1.99	2.09	II
323	2.89	3.61	805	1.25	1.47	1.54	II
327	3.47	4.34	925	1.51	1.77	1.86	II
402	6.79	8.49	1,610	2.94	3.46	3.63	III
403	3.76	4.70	985	1.63	1.92	2.01	II
404	4.66	5.83	1,170	2.02	2.37	2.49	III
406	6.10	7.61	1,465	2.64	3.10	3.25	II
407	4.65	5.81	1,170	2.01	2.37	2.48	II
411	8.99	11.24	2,065	3.90	4.58	4.80	III
413	8.26	10.32	1,915	3.58	4.20	4.41	III
415	6.01	7.51	1,450	2.60	3.06	3.21	III
416	9.41	11.76	2,150	4.08	4.79	5.02	II
421	8.88	11.09	2,040	3.85	4.52	4.74	III
425	8.40	10.50	1,945	3.64	4.28	4.49	III
427	4.44	5.54	1,125	1.92	2.26	2.37	III
429	5.68	7.09	1,380	2.46	2.89	3.03	III
431	7.57	9.47	1,775	3.28	3.86	4.04	II
433	4.93	6.16	1,225	2.13	2.51	2.63	II
435	5.55	6.94	1,355	2.40	2.83	2.96	II
439	5.26	6.57	1,295	2.28	2.67	2.81	II
441	2.12	2.65	645	0.92	1.08	1.13	II
445	7.07	8.83	1,665	3.06	3.60	3.77	II
447	4.37	5.46	1,110	1.89	2.22	2.33	III
449	4.01	5.00	1,035	1.73	2.04	2.14	III

\* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

\*\* Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

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				A-1	A-2	A-3	
451	4.93	6.16	1,225	2.13	2.51	2.63	II
454	6.81	8.51	1,615	2.95	3.47	3.64	II
456	4.78	5.97	1,195	2.07	2.43	2.55	II
457	8.23	10.27	1,905	3.56	4.19	4.39	II
458	1.97	2.46	615	0.85	1.00	1.05	II
459	1.69	2.11	560	0.73	0.86	0.90	I
461	4.66	5.83	1,170	2.02	2.37	2.49	II
463	2.72	3.40	770	1.18	1.39	1.45	II
464	4.31	5.39	1,100	1.87	2.19	2.30	II
465	5.63	7.04	1,370	2.44	2.87	3.01	III
467	3.26	4.07	880	1.41	1.66	1.74	II
472	1.76	2.20	575	0.76	0.90	0.94	II
473	2.53	3.17	735	1.10	1.29	1.35	II
475	4.39	5.49	1,115	1.90	2.24	2.35	III
483	1.62	2.03	545	0.70	0.83	0.87	II
486	2.03	2.53	625	0.88	1.03	1.08	II
487	0.94	1.18	405	0.41	0.48	0.50	II
489	0.98	1.23	415	0.43	0.50	0.53	II
491	3.76	4.70	985	1.63	1.92	2.01	II
495	4.93	6.16	1,225	2.13	2.51	2.63	II
497	1.76	2.20	575	0.76	0.90	0.94	II
499	4.39	5.49	1,115	1.90	2.24	2.35	III
501	3.51	4.38	935	1.52	1.79	1.87	III
502	3.13	3.91	855	1.36	1.59	1.67	I
505	7.66	9.58	1,790	3.32	3.90	4.09	IV
506	2.67	3.34	760	1.16	1.36	1.43	II
507	3.62	4.52	955	1.57	1.84	1.93	III
509	6.98	8.72	1,650	3.02	3.55	3.72	III
511	8.07	10.09	1,875	3.50	4.11	4.31	III
512	7.34 a	9.18 b	1,725	3.18	3.74	3.92	III
513	4.09 c	5.11 d	1,055	1.77	2.08	2.18	II
533	12.50	15.62	2,700	5.42	6.36	6.67	III
535	3.94	4.93	1,025	1.71	2.01	2.11	II
536	5.57	6.97	1,360	2.41	2.84	2.98	II
544	7.16	8.95	1,685	3.10	3.65	3.83	III
551	2.29	2.87	685	0.99	1.17	1.23	IV
553	5.21	6.52	1,285	2.26	2.65	2.78	IV
555	1.22	1.53	460	0.53	0.62	0.65	II
563	2.95	3.69	820	1.28	1.50	1.58	II
571	2.85	3.56	795	1.24	1.45	1.52	II
573	4.23	5.29	1,085	1.83	2.15	2.26	III

\* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

\*\* Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

a OD: \$1.46 Supplementary is not subject to experience or retrospective rating. Code as 0175.

b OD: \$1.83 Supplementary is not subject to experience or retrospective rating. Code as 0175.

c OD: \$0.41 Supplementary is not subject to experience or retrospective rating. Code as 0176.

d OD: \$0.51 Supplementary is not subject to experience or retrospective rating. Code as 0176.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS  
FOR DELAWARE COMPENSATION INSURANCE**

Approved Effective March 1, 2001 on New and Renewal Business

CODE NO	BUREAU* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP
				A-1	A-2	A-3	
581	2.52	3.14	730	1.09	1.28	1.34	III
587	2.95	3.69	820	1.28	1.50	1.58	II
601	11.48	14.35	2,305	4.51	5.38	5.79	III
602	8.54	10.67	1,835	3.50	4.18	4.50	III
603	12.17	15.22	2,510	4.95	5.91	6.36	III
605	9.93	12.40	2,105	4.08	4.87	5.24	III
607	9.68	12.09	2,055	3.97	4.74	5.11	III
608	5.67	7.08	1,260	2.26	2.70	2.90	III
609	6.39	7.98	1,375	2.50	2.99	3.22	III
611	12.55	15.68	2,605	5.15	6.15	6.62	III
615	19.58	24.47	2,700	8.01	9.56	10.29	IV
617	8.08	10.10	1,720	3.25	3.88	4.18	III
625	7.32	9.15	1,600	2.99	3.57	3.85	III
643	11.77	14.70	2,455	4.84	5.77	6.21	III
645	6.74	8.42	1,460	2.69	3.21	3.46	III
646	5.01	6.25	1,175	2.08	2.48	2.67	II
647	7.77	9.70	1,710	3.22	3.85	4.14	II
648	5.17	6.45	1,210	2.15	2.57	2.77	III
649	3.93	4.90	955	1.60	1.92	2.06	III
651	7.38	9.21	1,615	3.03	3.62	3.89	III
652	9.17	11.47	2,045	3.95	4.71	5.07	III
653	7.41	9.26	1,625	3.05	3.64	3.92	III
654	7.73	9.66	1,675	3.15	3.76	4.05	III
655	18.54	23.18	2,700	7.74	9.23	9.94	IV
656	10.22	12.77	2,145	4.17	4.98	5.36	III
657	12.08	15.09	2,510	4.96	5.92	6.37	IV
658	8.44	10.55	1,840	3.51	4.19	4.51	III
659	17.42	21.77	2,700	7.23	8.63	9.29	III
660	2.87	3.59	800	1.27	1.52	1.64	III
661	3.81	4.77	900	1.48	1.77	1.91	III
662	2.72	3.40	770	1.21	1.44	1.55	III
663	4.59	5.74	1,085	1.88	2.24	2.41	III
664	2.99	3.74	775	1.22	1.45	1.56	III
665	9.24	11.55	2,025	3.91	4.67	5.03	III
666	7.72	9.66	1,695	3.20	3.82	4.11	III
667	2.51	3.13	690	1.03	1.23	1.33	III
668	6.24	7.79	1,395	2.55	3.04	3.28	II
669	8.09	10.11	1,740	3.29	3.93	4.23	III
670	4.84	6.04	1,230	2.15	2.56	2.76	III
673	6.25	7.81	1,500	2.77	3.31	3.56	III
674	6.24	7.80	1,400	2.56	3.06	3.29	III
675	4.86	6.07	1,175	2.08	2.48	2.67	III
676	7.00	8.75	1,510	2.80	3.34	3.60	III
677	5.70	7.12	1,300	2.35	2.81	3.02	III
679	13.08	16.35	2,700	5.81	6.93	7.46	III

\* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

\*\* Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS  
FOR DELAWARE COMPENSATION INSURANCE**

Approved Effective March 1, 2001 on New and Renewal Business

CODE NO	BUREAU* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP
				A-1	A-2	A-3	
681	4.84	6.04	1,205	2.15	2.56	2.76	III
682	17.02	21.27	2,700	7.55	9.02	9.71	III
691	6.39	7.98	1,375	2.50	2.99	3.22	III
693	7.38	9.21	1,615	3.03	3.62	3.89	III
695	3.81	4.77	900	1.48	1.77	1.91	III
709	2.36	2.94	695	1.04	1.25	1.34	III
716	3.64	4.55	960	1.62	1.93	2.08	III
718	4.95	6.18	1,230	2.19	2.62	2.82	III
721	7.81	9.75	1,820	3.38	3.97	4.17	III
744	2.20	2.76	665	0.96	1.12	1.18	III
751	1.54	1.93	530	0.67	0.78	0.82	III
752	1.21	1.51	460	0.52	0.61	0.64	IV
753	4.73	5.91	1,185	2.05	2.41	2.53	III
755	2.89	3.61	805	1.25	1.47	1.54	III
757	1.31	1.64	480	0.57	0.67	0.70	III
759	4.17	5.20	1,070	1.80	2.12	2.22	III
801	5.82	7.27	1,410	2.74	3.16	3.46	II
803	15.02	18.77	2,700	7.08	8.17	8.94	III
804	3.30	4.12	890	1.55	1.79	1.96	III
805	4.72	5.90	1,185	2.23	2.57	2.81	III
806	9.27	11.59	2,120	4.37	5.04	5.52	II
807	7.67	9.59	1,790	3.62	4.17	4.57	III
808	7.34	9.18	1,725	3.46	3.99	4.37	III
809	4.62	5.78	1,165	2.18	2.51	2.75	III
811	8.73	10.91	2,010	4.12	4.75	5.20	III
812	6.75	8.43	1,600	3.18	3.67	4.02	III
813	5.75	7.18	1,395	2.71	3.12	3.42	II
814	4.79	5.99	1,200	2.26	2.61	2.85	III
815	3.80	4.74	990	1.79	2.06	2.26	III
816	2.37	2.96	700	1.12	1.29	1.41	II
817	7.28	9.10	1,710	3.43	3.96	4.33	III
818	2.55	3.19	735	1.20	1.39	1.52	III
819	1.19	1.49	455	0.56	0.65	0.71	III
821	6.41	8.01	1,530	3.02	3.49	3.82	III
825	3.10	3.88	850	1.46	1.69	1.85	III
855	5.61	7.02	1,370	2.65	3.05	3.34	III
857	8.20	10.24	1,900	3.86	4.46	4.88	III
860	9.48	11.84	2,165	4.47	5.15	5.64	III
861	5.55	6.94	1,355	2.62	3.02	3.30	III
862	7.20	9.00	1,695	3.40	3.92	4.29	II
865	3.72	4.65	975	1.75	2.02	2.22	II
867	5.75	7.18	1,395	2.71	3.12	3.42	II
877	2.61	3.27	750	1.23	1.42	1.56	II
879	3.60	4.50	955	1.70	1.96	2.14	II

\* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

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FOR DELAWARE COMPENSATION INSURANCE**

Approved Effective March 1, 2001 on New and Renewal Business

CODE NO	BUREAU* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP
				A-1	A-2	A-3	
881	3.03	3.79	835	1.43	1.65	1.81	II
883	2.48	3.10	720	1.17	1.35	1.48	II
884	1.15	1.43	445	0.54	0.62	0.68	II
885	3.07	3.84	845	1.45	1.67	1.83	II
886	2.96	3.70	820	1.39	1.61	1.76	II
889	0.32	0.40	275	0.15	0.17	0.19	II
891	0.72	0.90	360	0.34	0.39	0.43	II
895	0.59	0.74	330	0.28	0.32	0.35	II
896	2.86	3.58	800	1.35	1.56	1.70	II
897	2.95	3.69	820	1.39	1.60	1.76	II
898	2.96	3.70	820	1.39	1.61	1.76	II
899	2.56	3.20	740	1.21	1.39	1.52	II
907	6.05	7.56	1,455	2.85	3.29	3.60	II
910	6.40	8.00	1,530	3.02	3.48	3.81	II
911	4.68	5.85	1,175	2.21	2.54	2.79	II
914	2.61	3.27	750	1.23	1.42	1.56	II
915	3.37	4.21	905	1.59	1.83	2.01	II
916	1.38	1.73	495	0.65	0.75	0.82	II
917	3.66	4.57	965	1.72	1.99	2.18	II
918	2.34	2.92	690	1.10	1.27	1.39	II
919	2.83	3.53	790	1.33	1.54	1.68	I
920	0.60	0.76	335	0.29	0.33	0.36	II
922	2.72	3.40	770	1.28	1.48	1.62	II
923	3.60	4.50	955	1.70	1.96	2.14	II
924	3.90	4.88	1,015	1.84	2.12	2.32	II
925	1.71	2.14	565	0.81	0.93	1.02	II
926	3.03	3.79	835	1.43	1.65	1.81	II
927	1.02	1.28	420	0.48	0.56	0.61	II
928	2.48	3.10	720	1.17	1.35	1.48	II
929	5.53	6.91	1,350	2.61	3.01	3.29	II
932	1.12	1.39	440	0.53	0.61	0.66	II
933	4.01	5.01	1,035	1.89	2.18	2.39	II
934	2.49	3.11	725	1.17	1.35	1.48	II
935	1.71	2.14	565	0.81	0.93	1.02	II
936	0.82	1.02	380	0.39	0.45	0.49	III
937	16.03	20.04	2,700	7.56	8.72	9.54	II
939	5.79	7.23	1,405	2.73	3.15	3.44	III
940	5.05	6.31	1,250	2.38	2.75	3.01	II
941	1.94	2.42	610	0.91	1.05	1.15	II
942	1.95	2.44	615	0.92	1.06	1.16	II
943	6.83	8.54	1,620	3.22	3.72	4.07	II
944	2.98	3.73	825	1.41	1.62	1.78	II
945	3.28	4.10	885	1.55	1.78	1.95	II
946	3.97	4.97	1,030	1.87	2.16	2.37	II
947	6.76	8.45	1,605	3.19	3.68	4.03	II

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				A-1	A-2	A-3	
948	0.92	1.16	400	0.44	0.50	0.55	II
949	0.99	1.24	415	0.47	0.54	0.59	II
951	0.53	0.67	320	0.25	0.29	0.32	III
952	0.99	1.24	415	0.47	0.54	0.59	III
953	0.32	0.40	275	0.15	0.17	0.19	II
954	3.72	4.65	975	1.75	2.02	2.22	IV
955	1.08	1.34	430	0.51	0.58	0.64	III
956	0.13	0.16	235	0.06	0.07	0.08	II
957	0.33	0.41	280	0.15	0.18	0.20	III
958	1.39	1.74	495	0.66	0.76	0.83	III
959	1.58	1.97	535	0.74	0.86	0.94	II
960	4.62	5.78	1,165	2.18	2.51	2.75	II
961	1.33	1.67	485	0.63	0.73	0.80	III
962	0.19	0.25	250	0.09	0.11	0.12	III
963	0.55	0.69	325	0.26	0.30	0.33	II
964	2.15	2.68	650	1.01	1.17	1.28	II
965	0.59	0.74	330	0.28	0.32	0.35	II
966	2.76	3.44	780	1.22	1.46	1.57	III
967	1.01	1.27	420	0.48	0.55	0.60	III
968	2.38	2.97	700	1.12	1.29	1.41	II
969	3.91	4.89	1,015	1.84	2.13	2.33	II
970	5.40	6.74	1,320	2.54	2.93	3.21	II
971	4.31	5.39	1,100	2.03	2.34	2.57	II
972	19.46	24.32	2,700	9.17	10.58	11.58	IV
973	3.38	4.22	905	1.59	1.84	2.01	II
974	3.78	4.72	990	1.78	2.05	2.25	II
975	2.69	3.37	765	1.27	1.47	1.61	II
976	1.62	2.03	545	0.77	0.88	0.97	II
977	0.52	0.66	320	0.25	0.29	0.31	I
978	3.08	3.85	845	1.45	1.68	1.83	III
979	5.13	6.41	1,270	2.42	2.79	3.05	II
980	3.72	4.64	975	1.75	2.02	2.21	III
981	2.46	3.07	715	1.16	1.34	1.46	II
983	6.17	7.70	1,480	2.91	3.35	3.67	II
984	0.51	0.64	315	0.24	0.28	0.30	II
985	5.30	6.62	1,300	2.50	2.88	3.15	IV
986	1.58	1.98	535	0.75	0.86	0.94	II
988	0.23	0.29	260	0.11	0.12	0.14	II
991	5.40	6.74	1,320	2.54	2.93	3.21	II
992	6.16	7.69	1,480	2.90	3.35	3.66	III

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				A-1	A-2	A-3	
995	8.69	10.86	2,000	4.10	4.72	5.17	III
997	0.80	0.99	375	0.37	0.43	0.47	II
999	5.86	7.32	1,420	2.76	3.19	3.49	II
4773	11.59	14.47	2,700	5.02	5.90	6.18	IV
0773	3.58	4.47					IV
4774	8.24	10.30	2,335	3.57	4.19	4.40	IV
0774	2.07	2.58					IV
4775	3.30	4.13	1,000	1.43	1.68	1.76	IV
0775	0.52	0.66					IV
4776	9.90	12.36	2,700	4.29	5.04	5.28	IV
0776	2.77	3.46					IV
4777	8.73	10.91	2,010	4.12	4.75	5.20	III
4779	8.23	10.28	2,332	3.57	4.19	4.39	IV
0779	2.07	2.58					IV
7405	1.24	1.55	550	0.58	0.67	0.74	IV
7445	0.41	0.51					IV
7413	1.76	2.20	649	0.83	0.96	1.05	IV
7453	0.37	0.46					IV
7421	2.13	2.66	650	1.00	1.16	1.27	IV
7424	5.03	6.28	1,245	2.37	2.73	2.99	IV
7428	2.29	2.87	685	1.08	1.25	1.37	II
9108	81.97	102.44					I
<b>Per capita</b>							
0908	43.86	54.82	265	20.68	23.85	26.11	I
0909	49.43	61.76	272	23.30	26.87	29.42	II
0912	123.55	154.40	364	58.24	67.18	73.54	II
0913	156.16	195.14	405	73.61	84.90	92.94	I
<b>A rated</b>							
9985	A	A	A	A	A	A	

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  Associated classes- both codes must be applied. The second code is not subject to experience rating and applies to the full payroll of the associated class.

DELAWARE  
Approved Effective: 3/01/01

Excess Loss Premium Factors including ALAE

Loss Limit	Hazard Group			
	I	II	III	IV
\$10,000	0.536	0.541	0.590	0.623
\$15,000	0.490	0.498	0.554	0.596
\$20,000	0.453	0.461	0.526	0.575
\$25,000	0.421	0.433	0.502	0.556
\$30,000	0.397	0.407	0.483	0.539
\$35,000	0.373	0.388	0.463	0.525
\$40,000	0.353	0.366	0.448	0.508
\$50,000	0.321	0.336	0.423	0.484
\$75,000	0.262	0.281	0.370	0.441
\$100,000	0.225	0.241	0.332	0.407
\$125,000	0.195	0.212	0.301	0.373
\$150,000	0.172	0.190	0.274	0.347
\$175,000	0.154	0.170	0.249	0.323
\$200,000	0.140	0.156	0.230	0.298
\$225,000	0.128	0.143	0.214	0.280
\$250,000	0.120	0.133	0.200	0.263
\$275,000	0.111	0.124	0.187	0.246
\$300,000	0.104	0.117	0.176	0.234
\$325,000	0.098	0.109	0.167	0.223
\$350,000	0.093	0.104	0.158	0.209
\$375,000	0.088	0.099	0.149	0.200
\$400,000	0.084	0.094	0.143	0.192
\$425,000	0.081	0.090	0.137	0.182
\$450,000	0.076	0.086	0.132	0.176
\$475,000	0.073	0.083	0.126	0.169
\$500,000	0.071	0.079	0.121	0.162
\$600,000	0.062	0.070	0.106	0.142
\$700,000	0.055	0.062	0.094	0.125
\$800,000	0.050	0.055	0.085	0.114
\$900,000	0.046	0.051	0.077	0.104
\$1,000,000	0.0426	0.0475	0.0715	0.0950
\$2,000,000	0.0264	0.0288	0.0422	0.0555
\$3,000,000	0.0203	0.0223	0.0316	0.0408
\$4,000,000	0.0170	0.0184	0.0260	0.0331
\$5,000,000	0.0150	0.0163	0.0223	0.0284
\$6,000,000	0.0131	0.0147	0.0199	0.0250
\$7,000,000	0.0113	0.0131	0.0183	0.0227
\$8,000,000	0.0101	0.0116	0.0171	0.0212
\$9,000,000	0.0092	0.0102	0.0159	0.0193
\$10,000,000	0.0084	0.0095	0.0151	0.0183

DELAWARE  
Approved Effective: 3/01/01

Excess Loss Premium Factors

Loss Limit	Hazard Group			
	I	II	III	IV
\$10,000	0.466	0.470	0.513	0.542
\$15,000	0.422	0.427	0.476	0.515
\$20,000	0.385	0.394	0.449	0.493
\$25,000	0.355	0.365	0.424	0.470
\$30,000	0.329	0.339	0.405	0.454
\$35,000	0.308	0.318	0.385	0.440
\$40,000	0.288	0.299	0.368	0.424
\$50,000	0.257	0.268	0.341	0.399
\$75,000	0.200	0.215	0.290	0.355
\$100,000	0.163	0.178	0.250	0.317
\$125,000	0.138	0.151	0.220	0.285
\$150,000	0.120	0.132	0.198	0.257
\$175,000	0.105	0.117	0.179	0.237
\$200,000	0.095	0.105	0.163	0.218
\$225,000	0.087	0.098	0.150	0.202
\$250,000	0.080	0.089	0.139	0.187
\$275,000	0.074	0.083	0.129	0.176
\$300,000	0.069	0.078	0.121	0.165
\$325,000	0.065	0.073	0.115	0.156
\$350,000	0.061	0.069	0.107	0.147
\$375,000	0.059	0.066	0.102	0.140
\$400,000	0.056	0.063	0.098	0.134
\$425,000	0.054	0.061	0.094	0.128
\$450,000	0.051	0.057	0.090	0.122
\$475,000	0.049	0.055	0.086	0.118
\$500,000	0.047	0.053	0.083	0.114
\$600,000	0.041	0.046	0.072	0.098
\$700,000	0.037	0.041	0.064	0.088
\$800,000	0.033	0.037	0.058	0.079
\$900,000	0.031	0.034	0.053	0.072
\$1,000,000	0.0289	0.0320	0.0489	0.0661
\$2,000,000	0.0185	0.0203	0.0298	0.0390
\$3,000,000	0.0144	0.0159	0.0225	0.0295
\$4,000,000	0.0117	0.0128	0.0190	0.0243
\$5,000,000	0.0098	0.0108	0.0167	0.0212
\$6,000,000	0.0084	0.0093	0.0151	0.0188
\$7,000,000	0.0071	0.0084	0.0132	0.0172
\$8,000,000	0.0065	0.0074	0.0117	0.0161
\$9,000,000	0.0059	0.0066	0.0107	0.0147
\$10,000,000	0.0054	0.0062	0.0098	0.0137

DELAWARE  
Approved Effective: 3/01/01

Excess Loss Pure Premium Factors including ALAE

Loss Limit	Hazard Group			
	I	II	III	IV
\$10,000	0.667	0.673	0.735	0.775
\$15,000	0.609	0.620	0.689	0.742
\$20,000	0.564	0.574	0.654	0.715
\$25,000	0.524	0.539	0.624	0.692
\$30,000	0.493	0.507	0.601	0.670
\$35,000	0.464	0.482	0.576	0.653
\$40,000	0.438	0.455	0.557	0.632
\$50,000	0.399	0.418	0.526	0.603
\$75,000	0.325	0.349	0.460	0.549
\$100,000	0.279	0.299	0.412	0.507
\$125,000	0.241	0.263	0.374	0.464
\$150,000	0.213	0.235	0.340	0.432
\$175,000	0.190	0.211	0.310	0.401
\$200,000	0.173	0.193	0.285	0.370
\$225,000	0.159	0.178	0.266	0.348
\$250,000	0.148	0.164	0.249	0.327
\$275,000	0.137	0.153	0.232	0.305
\$300,000	0.129	0.144	0.218	0.291
\$325,000	0.121	0.134	0.207	0.276
\$350,000	0.115	0.128	0.196	0.259
\$375,000	0.108	0.122	0.185	0.249
\$400,000	0.104	0.116	0.177	0.239
\$425,000	0.099	0.111	0.170	0.226
\$450,000	0.094	0.106	0.163	0.218
\$475,000	0.090	0.102	0.156	0.209
\$500,000	0.087	0.098	0.150	0.201
\$600,000	0.076	0.086	0.131	0.176
\$700,000	0.067	0.076	0.116	0.155
\$800,000	0.062	0.068	0.105	0.141
\$900,000	0.056	0.063	0.095	0.128
\$1,000,000	0.0519	0.0580	0.0880	0.1172
\$2,000,000	0.0317	0.0347	0.0514	0.0679
\$3,000,000	0.0241	0.0266	0.0382	0.0497
\$4,000,000	0.0199	0.0217	0.0312	0.0401
\$5,000,000	0.0175	0.0191	0.0266	0.0341
\$6,000,000	0.0158	0.0172	0.0236	0.0300
\$7,000,000	0.0140	0.0158	0.0215	0.0270
\$8,000,000	0.0126	0.0144	0.0201	0.0252
\$9,000,000	0.0114	0.0128	0.0186	0.0228
\$10,000,000	0.0104	0.0117	0.0176	0.0216

DELAWARE  
Approved Effective: 3/01/01

Excess Loss Pure Premium Factors

Loss Limit	Hazard Group			
	I	II	III	IV
\$10,000	0.580	0.584	0.638	0.674
\$15,000	0.524	0.531	0.592	0.641
\$20,000	0.478	0.489	0.559	0.614
\$25,000	0.441	0.453	0.526	0.584
\$30,000	0.409	0.422	0.503	0.564
\$35,000	0.382	0.395	0.479	0.547
\$40,000	0.358	0.372	0.457	0.527
\$50,000	0.319	0.333	0.423	0.496
\$75,000	0.248	0.266	0.360	0.441
\$100,000	0.202	0.221	0.310	0.393
\$125,000	0.170	0.186	0.273	0.353
\$150,000	0.148	0.164	0.246	0.319
\$175,000	0.130	0.144	0.222	0.294
\$200,000	0.117	0.130	0.202	0.270
\$225,000	0.107	0.120	0.186	0.250
\$250,000	0.098	0.110	0.172	0.231
\$275,000	0.091	0.102	0.160	0.219
\$300,000	0.085	0.096	0.150	0.205
\$325,000	0.080	0.090	0.142	0.193
\$350,000	0.075	0.085	0.132	0.182
\$375,000	0.072	0.081	0.126	0.173
\$400,000	0.069	0.077	0.120	0.165
\$425,000	0.065	0.074	0.115	0.158
\$450,000	0.062	0.070	0.111	0.151
\$475,000	0.060	0.067	0.106	0.145
\$500,000	0.057	0.065	0.102	0.140
\$600,000	0.050	0.056	0.089	0.120
\$700,000	0.044	0.050	0.078	0.108
\$800,000	0.040	0.045	0.071	0.097
\$900,000	0.037	0.041	0.065	0.088
\$1,000,000	0.0347	0.0388	0.0597	0.0811
\$2,000,000	0.0218	0.0240	0.0359	0.0474
\$3,000,000	0.0170	0.0185	0.0268	0.0355
\$4,000,000	0.0146	0.0156	0.0224	0.0290
\$5,000,000	0.0122	0.0134	0.0196	0.0252
\$6,000,000	0.0104	0.0116	0.0176	0.0222
\$7,000,000	0.0089	0.0104	0.0160	0.0202
\$8,000,000	0.0080	0.0090	0.0146	0.0188
\$9,000,000	0.0072	0.0083	0.0134	0.0173
\$10,000,000	0.0068	0.0078	0.0122	0.0163

## Delaware Compensation Rating Bureau, Inc

### 2000 - TABLE OF EXPECTED LOSS RANGES

The following Table of Expected Loss Ranges is effective March 1, 2001

NCCI ITEM R - 1365 - 2000 UPDATE TO RETROSPECTIVE RATING PLAN PARAMETERS

Expected Loss Group	Range Rounded Value		Expected Loss Group	Range Rounded Value		Expected Loss Group	Range Rounded Value	
95	402---	626	65	33631---	36323	35	419451---	470946
94	627---	927	64	36324---	39232	34	470947---	528766
93	928---	1224	63	39233---	42371	33	528767---	602953
92	1225---	1618	62	42372---	45763	32	602954---	693056
91	1619---	2106	61	45764---	49426	31	693057---	796625
90	2107---	2542	60	49427---	53394	30	796626---	915671
89	2543---	3069	59	53395---	57731	29	915672---	1088470
88	3070---	3563	58	57732---	62333	28	1088471---	1301574
87	3564---	4135	57	62334---	67161	27	1301575---	1556401
86	4136---	4797	56	67162---	72363	26	1556402---	1918720
85	4798---	5424	55	72364---	77967	25	1918721---	2441627
84	5425---	6133	54	77968---	84304	24	2441628---	3107041
83	6134---	6926	53	84305---	91180	23	3107042---	3970253
82	6927---	7706	52	91181---	98620	22	3970254---	5080315
81	7707---	8574	51	98621---	106663	21	5080316---	6500743
80	8575---	9537	50	106664---	115100	20	6500744---	8318316
79	9538---	10611	49	115101---	124185	19	8318317---	10644071
78	10612---	11710	48	124186---	134052	18	10644072---	14600542
77	11711---	12892	47	134053---	145841	17	14600543---	21594085
76	12893---	14195	46	145842---	158667	16	21594086---	31937480
75	14196---	15598	45	158668---	172621	15	31937481---	47235279
74	15599---	17078	44	172622---	188637	14	47235280---	69860602
73	17079---	18696	43	188638---	206410	13	69860603---	103323273
72	18697---	20470	42	206411---	225858	12	103323274---	161740386
71	20471---	22346	41	225859---	248980	11	161740387---	255938066
70	22347---	24374	40	248981---	275148	10	255938067---	404996525
69	24375---	26585	39	275149---	304065	9	404996526---	& over
68	26586---	28825	38	304066---	336022			
67	28826---	31135	37	336023---	373583			
66	31136---	33630	36	373584---	419450			