Massachusetts Private Passenger Automobile Statistical Plan

Containing the Instructions and Codes Applicable to the Vehicles Rated in the Massachusetts Private Passenger Automobile Insurance Manual

Printed and Distributed by

Commonwealth Automobile Reinsurers

100 Summer Street, Boston, MA 02110

(617) 338-4000

FAX: (617) 338-5422 TTY: (617) 880-7848

www.commauto.com

Original Effective January 1, 1981 Contains Revisions Through January 1, 2005

Massachusetts Private Passenger Automobile Statistical Plan Table of Contents

Table of Contents

			Page
Ι	Overv	iew	I:1
II	Gener	al Rules	II:1
III	Genera A. B.	al Reporting Requirements Pemiums Losses	
IV	Repor A. B. C.	ting Instructions – Premiums Liability No-Fault Physical Damage	IV:7
V	Repor A. B. C.	ting Instructions – Losses Liability No-Fault Physical Damage	V:7
VI	Codin	g Section	VI:1
VII	Statist A. B.	ical Data Quality Program Statistical Data Quality Components Statistical Data Quality Penalties	
VIII	Recor	d Layouts	VIII:1
Appene Appene Index .	dix B	Classification and Coverage Code Decision Tables Premium and Accident Town Tables	B:1

Massachusetts Private Passenger Automobile Statistical Plan Part I - Overview

A. <u>SCOPE OF THE PLAN</u>

★

The Massachusetts Private Passenger Automobile Statistical Plan is applicable to total automobile direct business written by a company on vehicles rated in accordance with the Massachusetts Private Passenger Automobile Insurance Manual. This Plan also applies to vehicle classifications or coverages for which companies may file their own rates (e.g. antique automobiles). The Massachusetts Private Passenger Automobile Insurance Manual, which is published by the Automobile Insurers Bureau of Massachusetts, should be used in conjunction with both the Private Passenger Automobile Statistical Plan and the various informational Accounting and Statistical Notices published periodically by Commonwealth Automobile Reinsurers. In order to assure that the statistical data reported to CAR is of the highest level of quality, the Massachusetts Private Passenger Automobile Statistical Plan provides companies with the necessary requirements, instructions and codes for reporting detailed statistical data for the following automobile insurance coverages to CAR:

Bodily Injury to Others Personal Injury Protection (No-Fault) Bodily Injury Caused by an Uninsured Automobile Damage to Someone Else's Property Optional Bodily Injury to Others Medical Payments Collision Limited Collision Comprehensive Substitute Transportation Towing and Labor Bodily Injury Caused by an Underinsured Automobile

B. ORGANIZATION OF THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan is organized in the following major divisions:

- Part I Overview
- Part II General Rules
- Part III General Reporting Requirements (Premiums and Losses)
- Part IV Reporting Instructions Premiums
- Part V Reporting Instructions Losses
- Part VI Coding Section
- Part VII Statistical Data Quality Program
- Part VIII Record Layouts
- Appendix A Decision Tables Classification Code and Coverage Code
- Appendix B Premium and Accident Town Tables

The Overview Section introduces the Massachusetts Private Passenger Automobile Statistical Plan. It identifies the coverages for which this Plan is applicable, details the organization of this Plan, specifies the Statistical Plan's effective date and identifies how CAR informs users of updates to this Plan.

The General Rules Section of this Plan describes company reporting requirements and the proper method for reporting data to CAR. The General Reporting Requirements Section of this Plan contains general information relative to the reporting of premium, and loss data to CAR. The Reporting Instructions Sections of this Plan contain specifications for reporting each of the data fields required on the various premium and loss record layouts.

★

Massachusetts Private Passenger Automobile Statistical Plan Part I - Overview

B. ORGANIZATION OF THE PLAN (Continued)

The Coding Section of this Plan identifies the possible values or codes that are valid for each of the data fields contained on the premium and loss record layouts. Data fields apply to all record layouts unless otherwise noted. If a specific data field only applies to a specific record layout or coverage, this will be indicated in the Coding Section. The Coding Section is divided into four subsections. The first section contains codes that are applicable to all record layouts. The remaining sections contain codes that are applicable to the individual liability, no-fault and physical damage record layouts.

The Statistical Data Quality Program Section of this Plan details the specifics of the Statistical Data Quality Program. The purpose of the Statistical Data Quality Program is to assure the quality and completeness of the data reported to CAR. This data is subsequently used for statistical, reinsurance and ratemaking functions. The Program is subdivided into two sections. The Statistical Data Quality Components Section contains CAR's expectations for reporting quality and timely statistical data and the Statistical Data Quality Penalties Section contains associated reporting penalties.

The Record Layouts Section of this Plan identifies the required record layout format including appropriate field positions for statistical records reported to CAR. A Private Passenger Record Layout Modification Key precedes the record layouts and identifies the fields to which modifications have been made in prior years.

Appendix A of this Plan contains detailed Classification and Coverage Code Decision Tables. These Decision Tables shall be used to determine whether specific data fields are required for a particular classification or coverage code.

Appendix B of this Plan contains two tables of valid Premium and Accident Town Codes. One table is listed in alphabetical order and the other is listed in numerical order. These towns correspond to the rating towns listed in the Massachusetts Private Passenger Automobile Insurance Manual.

C. EFFECTIVE DATE OF THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan is applicable to policies with effective dates of January 1, 1981 and subsequent and contains revisions through the date noted on the cover page of this Plan. All policies and endorsements to such policies must contain the Statistical Plan coding and must be reported on the record format that was in effect for the particular policy effective year. Refer to the Private Passenger Automobile Statistical Plan applicable to the particular policy effective year.

★ D. <u>UPDATES TO THE PLAN</u>

The Massachusetts Private Passenger Automobile Statistical Plan, initially published in loose-leaf form, is available for viewing or downloading from CAR's website (www.commauto.com). The current year version, as well as prior year versions of the Plan are available. Since the Private Passenger Statistical Plan is now available electronically, paper copies of revised pages are no longer distributed to companies. Instead, CAR will publish an Accounting and Statistical Notice to notify companies of the revised pages and companies will be directed to CAR's website for further information. The revised pages will be available on CAR's website and will be incorporated in the electronic version of the applicable Plan.

The <u>revised</u> pages will be applicable to all new and renewal policies with effective dates on or after the date indicated in the lower left corner of the reprinted pages. Note that specific revisions will be indicated by a star (\bigstar) to the left of the line containing the revision. The date in the lower right corner of the page represents the date that the revised page was approved by the Massachusetts Division of Insurance. Any special reporting instructions will be provided to companies via an Accounting and Statistical Notice published by CAR.

Massachusetts Private Passenger Automobile Statistical Plan Part II - General Rules

A. DATA REQUIREMENTS

All premium, paid loss and outstanding loss transactions (both ceded to CAR and voluntarily written) must be reported with the accounting month that corresponds to the month in which the transaction was booked by the company. Submissions for a particular accounting month must be received in statistically acceptable condition at the offices of CAR by the close of business on the established due date. Refer to the Statistical Data Quality Program Section of the Plan for additional information and potential penalties associated with this requirement.

1. Reporting Thresholds

When the Massachusetts automobile writings of a company or company group which currently does not report statistical data to CAR exceeds the established reporting thresholds for statistically reportable coverages, statistical data beginning with that policy effective year must be reported to CAR on a monthly basis. Although the determination of whether a company exceeds the established thresholds is based upon the writings of an affiliated company group, statistical data must be reported to CAR on an individual company basis. Refer to item B. of this section. The thresholds for private passenger business are \$100,000 in written premiums or \$50,000 in paid losses. Statistically reportable coverages are those coverages specified in the Massachusetts Private Passenger Automobile Statistical Plan. CAR verifies this data via the information recorded on the Exhibit of Premiums and Losses for the state of Massachusetts, which is contained on Page 15 of a company's Annual Statement for that calendar year. The reporting thresholds may be subject to yearly adjustments to reflect rate revisions and inflation. Refer to the Statistical Data Quality Components Section of the Statistical Data Quality Program for specific information on shipment reporting dates.

However, if a company cedes any business to CAR (refer to item C. of this section), then statistical data for all of the company's business, both ceded and voluntarily written, must be reported to CAR. This data must be reported regardless of whether the company's writings are below the reporting thresholds noted above.

\star

2. Low Volume Companies

Subject to CAR's approval, small companies may be permitted to report statistical data to CAR on a quarterly basis, rather than monthly. Companies or company groups that write less than \$500,000 in written premiums and less than \$500,000 in paid losses for statistically reportable coverages will be considered eligible for quarterly statistical reporting and are referred to as low volume companies. CAR verifies a company's volume of writings via the data recorded on the company's Massachusetts Annual Statement Page 15 for the most recent calendar year. Refer to the Statistical Data Quality Program Section of this Plan for additional information and potential reporting penalties applicable to low volume companies.

Massachusetts Private Passenger Automobile Statistical Plan Part II - General Rules

A. DATA REQUIREMENTS (Continued)

4. Companies in a Run-Off Position

Companies in a run-off position that have stopped writing Massachusetts automobile business must continue to statistically report run-off premium, paid loss and outstanding loss activity on all ceded policies. Statistical data must continue to be reported until all ceded premium has been reported and all ceded losses have been paid or closed without payment or CAR has closed-out the ceded premium and/or loss statistical reporting for the particular policy effective year. Additionally, companies in a run-off position must continue to report statistical data for voluntarily written business, but only until their total written premiums and paid losses (both voluntary and ceded combined) are less than the reporting thresholds noted above.

★ 5. Reconciliation of Massachusetts Annual Statement Data

In addition to the above statistical reporting requirements, all companies that are licensed to write automobile insurance in the state of Massachusetts are required to submit an electronic copy of their NAIC Annual Statement filings to CAR on a yearly basis. Additionally, for each of the other three calendar quarters, companies must submit Massachusetts Annual Statement data via CAR's on-line Annual Statement Reconciliation System. This data must be submitted to CAR even if the company has no actual writings. On a quarterly basis, CAR reconciles a company's Massachusetts Annual Statement data to the data that the company has statistically reported to CAR. The reconciliation process is performed to verify the accuracy and completeness of the database utilized for statistical, ratemaking and reinsurance purposes. Specific information regarding the submission of Massachusetts Annual Statement data is detailed in a quarterly Accounting and Statistical Notice distributed by CAR and in the Technical User Guide for CAR's Online Annual Statement Reconciliation System. Refer to the Statistical Data Quality Program Section of this Plan for additional information and potential reporting penalties associated with the Massachusetts Annual Statement process.

6. Filing of Massachusetts Automobile Insurance Expense Call

Additionally, on an annual basis, each member of CAR is required to file a calendar year Massachusetts Automobile Insurance Expense Call. The Expense Call identifies expenses for the following general categories: Loss Adjustment Expenses, Commissions, Acquisition, Field Supervision and Collection Expenses, Taxes, Licenses and Fees and General Expenses. The Expense Call identifies the portion of total company expenses that are attributable to the cost of transacting automobile insurance business in Massachusetts. On a yearly basis, CAR distributes an Accounting and Statistical Notice that contains specific instructions relative to the Massachusetts Automobile Insurance Expense Call. Refer to the Statistical Data Quality Program Section of the Plan for additional information and potential reporting penalties associated with the Expense Call process.

B. <u>REPORTING METHOD</u>

The instructions that are set forth in the Reporting Instructions – Premiums and Reporting Instructions – Losses Sections of this Plan refer to records reported to CAR on magnetic tape, tape cartridge, or via File Transfer Protocol (FTP) transmission. To obtain complete and detailed reporting instructions, refer to the CAR Statistical Edit Package that contains Accounting/Statistical Submission Reporting Instructions.

Massachusetts Private Passenger Automobile Statistical Plan Part II - General Rules

B. <u>REPORTING METHOD (Continued)</u>

The following general instructions apply:

- 1. Each premium and loss shall be reported on an individual transaction-by-transaction basis in accordance with the instructions and codes contained in this Plan.
- 2. Companies are responsible for the completeness and accuracy of their own data. Prior to the submission of statistics, the company shall perform an audit of the statistics being reported to detect and correct any error in the assignment of statistical codes contained in the Coding Section of this Plan.
- 3. All coding must be numeric except for the following fields: Producer Code, Policy Identification Number, Vehicle Identification Number and Company Use fields on premium records and Producer Code, Policy Identification Number, Claim Identification Number, Vehicle Identification Number and Company Use fields on loss records. These fields may be reported with any combination of alphanumeric codes. Fields reserved for future use must be reported with spaces or zero filled.
- 5. Data should be reported to CAR as follows:
 - a. Each submission must be filed on a monthly basis with the exception of outstanding loss records, which should be filed quarterly in the March, June, September and December shipments. The records must be submitted in accordance with the Call Schedule that is published annually as an Accounting and Statistical Notice.
 - b. For those companies affiliated with a group, statistical data must be reported to CAR at the individual company number level, rather than at the group company number level.
 - c. In order to assure that a company's submission of data for a particular accounting month is complete, all premium and paid loss data for each accounting month must be submitted to CAR in a single mailing. However, it is acceptable for quarterly outstanding loss data to be submitted separately.

If a company is not able to consolidate their shipments for mailing to CAR, a request for waiver from this requirement must be filed with CAR. If CAR grants a waiver to this requirement, it is necessary for the company to continue to submit their data shipments to CAR in the same manner for each subsequent accounting month.

d. Companies that have no statistical data to report to CAR must report a Nil Submission Form. This report will indicate that a company has no premium, paid loss and/or outstanding loss transactions to report for a specific month.

*

B. <u>REPORTING METHOD (Continued)</u>

- 5. Data should be reported to CAR as follows (continued):
 - e. Each shipment of statistics must contain several control records that include control and summary totals relating to the statistics submitted. These totals must be in agreement with the data submitted for the period covered.
 - f. All reported data must be submitted on the appropriate record format as specified in the Record Layout Section of this Plan.

C. <u>RISKS CEDED TO COMMONWEALTH AUTOMOBILE REINSURERS</u>

All premiums and losses that are associated with risks ceded to Commonwealth Automobile Reinsurers must be reported to CAR. Premium and loss transactions for such ceded risks must be identified by the appropriate CAR Identification Code specified in the Coding Section of this Plan.

CAR's Plan and Rules of Operation require that the premium on ceded policies be reported at the full policy premium for cedable or total limits, regardless of the date of cession. Although only cedable limits or coverages will be covered by CAR, the full policy premium must be reported. When the total limits premium for a policy exceeds CAR's cedable limits, the portion that exceeds the cedable limit must be reported as a separate record utilizing the special non-cedable Classification Code. This code is identified in the Coding Section of this Plan as a Special Rating and Adjustment classification. The record also must be reported with the appropriate voluntary business CAR Identification Code. The premium amount reported would be the portion of premium that exceeds the cedable limit.

Risks that are initially written as voluntary business, but then ceded to CAR during the policy's term must be ceded as CAR business for the entire policy period. That is, offset and reenter adjustment entries must be reported to remove the record as voluntary business and replace it as CAR business, using the appropriate ceded CAR Identification Code and the <u>total</u> premium and exposure for the risk.

D. ADJUSTMENTS (ENDORSEMENTS)

An adjustment to a previously reported statistical record is made by reporting a complete offset of the original record and a new record that shows the proper (adjusted) statistical codes, exposure and/or dollar amounts. For adjustments (including endorsements) to premium records, the dollar amounts and exposure of the original and offsetting records must net to zero. For adjustment to loss records, the dollar amount and claim count of the original and offsetting records must net to zero.

For additional explanation and examples regarding the method for reporting adjustments or endorsements on premium records, refer to Section A – Premiums of the General Reporting Requirements Section of this Plan.

E. <u>REINSURANCE – OTHER THAN CAR</u>

Experience is to be reported on direct business only. Therefore, the reports of experience shall not include premiums received from or losses paid to other companies on account of reinsurance assumed by the reporting company, nor shall any deductions be made by the reporting company for reinsured premiums or for losses recovered from other companies on account of reinsurance.

Section A – Premiums

1. <u>REPORTING OF PREMIUMS</u>

A separate premium record must be reported for each unique set of data elements contained in this Plan. Premiums are reported on statistical records by coverage (liability, personal injury protection (PIP) or no-fault, and physical damage). All bodily injury liability premium records must contain the combined premium of each separately developed bodily injury liability premium (i.e. compulsory bodily injury, optional bodily injury, medical payments, bodily injury caused by an underinsured auto and bodily injury caused by an underinsured auto and bodily injury caused by an underinsured auto). All other premium records (property damage liability, PIP (no-fault), other than collision and collision) should contain the individually developed premium.

Companies have the option to report combined bodily injury liability premiums apart from property damage liability premiums, on separate statistical records. Similarly, other than collision and collision premiums may be reported on separate statistical records if desired. Note that if Original Equipment Manufacturer (OEM) coverage exists on a policy, but is only applicable to one of the written physical damage coverages, separate collision and other than collision physical damage statistical records must be reported.

2. <u>REPORTING OF EXPOSURE</u>

Exposure is required as outlined in the Coding Section of this Plan. Exposure must be separately reported for each of the subdivisions of experience for which separate classification codes and exposure basis are shown. If the Classification and Coverage Code Decision Tables contained in Appendix A of this Plan indicate that exposure is not required for certain classification codes or coverage codes, then spaces or zeros must be reported in the Exposure field.

Refer to the Reporting Instructions and Coding Sections of this Plan for further instructions regarding the reporting of exposure.

3. <u>CHANGES IN COVERAGE BY ENDORSEMENT</u>

a. Endorsements Effective as of the Policy Effective Date

All original records affected by the change in coverage must be offset and new records must be reported with the revised codes. On the new record, all codes not impacted by the change in coverage shall remain the same. Both the offset and reenter records must be fully coded. The Transaction Effective Date should always equal the Policy Effective Date on the offset and reenter records.

The following is an example of liability endorsement records that would be reported to CAR due to adding a new driver. The rate calculation would be affected, as indicated by the following premium adjustments:

Record	Тх- Туре	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium	Class Code
Original	11	06-00	06-00	06-01	+12	\$527	\$190	1101
Offset	12	06-00	06-00	06-01	-12	-\$527	-\$190	1101
Reenter	12	06-00	06-00	06-01	+12	\$812	\$289	1269

Section A – Premiums

3. <u>CHANGES IN COVERAGE BY ENDORSEMENT (Continued)</u>

b. Endorsements Effective Subsequent to the Policy Effective Date

All original records affected by the change must be offset to cancel the unearned premium and exposure. New records must be reported with the to-be-earned premium and exposure for the endorsed coverage and the revised codes. On the new record, all codes not impacted by the change in coverage shall remain the same. Both the offset and reenter records must be fully coded. The Transaction Effective Date on the offset and reenter records should be the effective date of the endorsement.

The following is an example of physical damage endorsement records that would be reported to CAR due a change in vehicle subsequent to the effective date:

Record	Тх- Туре	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Ехр	OTC Prem	Coll Prem	VIN
Original	11	06-00	06-00	06-01	+12	\$72	\$250	JT3FJ62G1L1121580
Offset	12	06-00	12-00	06-01	- 6	-\$36	-\$125	JT3FJ62G1L1121580
Reenter	12	06-00	12-00	06-01	+6	\$88	\$494	1J4HI52K6TH450117

Changes by endorsement may be statistically reported on a coverage basis. For example, if the change is only for the bodily injury coverage, it is not necessary to include the corresponding property damage coverage information on the statistical record. However, any change to bodily injury pemium must reflect the compulsory bodily injury, optional bodily injury, medical payments, bodily injury caused by an uninsured auto and bodily injury caused by an underinsured auto premiums, even if the change is limited to only one or some of the bodily injury coverages.

4. <u>CANCELLATION OF PREMIUMS</u>

When canceling premiums for a policy, all affected records must be individually offset (i.e. record by record) with the appropriate Transaction Type Code included on the cancellation record.

a. Flat Cancellation

For detailed information regarding flat cancellations, refer to the Massachusetts Private Passenger Automobile Insurance Manual. For a flat cancellation, the entry must be identical to the original entry except:

- i. The Exposure and Premium field(s) shall be shown as a credit
- ii. The Accounting Date shall be the month and year that the company booked the cancellation
- iii. The Transaction Type Code shall be 15

Record	Tx- Type	Actg- Date	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium
Original	11	04-00	01-00	01-00	01-01	+12	\$828	\$317
Cancellation	15	11-00	01-00	01-00	01-01	-12	-\$828	-\$317

Section A – Premiums

4. <u>CANCELLATION OF PREMIUMS (Continued)</u>

b. Pro Rata Cancellation

For detailed information regarding pro rata cancellations, refer to the Massachusetts Private Passenger Automobile Insurance Manual. For a pro rata cancellation, the entry must be identical to the original entry except:

- i. The unearned portion of the premium and exposure shall be shown as a credit
- ii. The Transaction Effective Date shall be the effective date of the cancellation
- iii. The Accounting Date shall be the month and year that the company booked the cancellation
- iv. The Transaction Type Code shall be 13

Record	Tx- Type	Actg- Date	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium
Original	11	04-00	01-00	01-00	01-01	+12	\$716	\$269
Cancellation	13	11-00	01-00	06-00	01-01	-7	-\$403	-\$152

Refer to the Coding Section for the reporting of exposure on such transactions.

c. Short Rate Cancellation

For detailed information regarding short rate cancellations, refer to the Massachusetts Private Passenger Automobile Insurance Manual. For a short rate cancellation, the entry must be identical to the original entry except:

- i. The unearned portion of the premium, calculated on the basis of the applicable short rate table (located in the Massachusetts Private Passenger Automobile Insurance Manual), and the exposure shall be shown as a credit
- ii. The Transaction Effective Date shall be the effective date of the cancellation
- iii. The Accounting Date shall be the month and year that the company booked the cancellation
- iv. The Transaction Type Code shall be 13

Record	Тх- Туре	Actg- Date	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium
Original	11	04-00	01-00	01-00	01-01	+12	\$716	\$269
Cancellation	13	11-00	01-00	06-00	01-01	-7	-\$338	-\$130

Refer to the Coding Section for the reporting of exposure on such transactions.

Section A – Premiums

5. EXTRA-RISK RATING

Physical damage premium records should be coded to identify the appropriate extra-risk category, and if applicable, should reflect the extra-risk rate charged to the insured. Note that extra-risk rating does not apply to limited collision coverage. Refer to the Coding Section of this Plan for specific instructions.

In cases where separate other than collision and collision records are reported for the same vehicle, and a rate adjustment is made to one coverage and not the other, the extra-risk coding must be provided for both records. For example, when coding records with an extra-risk category that only provides for a rate adjustment to the other than collision but not the collision portion of the insured's physical damage premium, each record should contain the applicable extra-risk rate code.

In this example, the collision record reported must contain extra-risk coding, even though the rate adjustment to the collision premium is zero. The extra-risk rate for two or more fire claims or two or more total theft claims only affects the other than collision coverage as shown below:

Record	Other Than Collision Extra-Risk Rate Code	Collision Extra-Risk Rate Code	Rate Adjustment to Base Premium	
Other Than Collision	4	0	1.5	
Collision	0	8	None	

6. <u>SAFE DRIVER INSURANCE PLAN RECORDS</u>

The portion of bodily injury liability, property damage liability, PIP (no-fault) and physical damage collision premium attributable to the Safe Driver Insurance Plan surcharge or credit amounts must be reported separately on the applicable liability, no-fault or physical damage premium record format. Note that SDIP does not apply to the other than collision or limited collision coverages. Refer to the Coding Section of this Plan for specific instructions. The SDIP statistical record must be fully coded.

The SDIP statistical record shall contain only surcharge or credit premium. The fifth and sixth positions of the Classification Code indicate the SDIP status of the operator. On all other premium and loss records, the fifth and sixth position of the Classification code must be zeros.

The sign of the exposure, reported on both SDIP surcharge and credit records, must be positive (+). That is, the exposure must be reported as positive (+) for SDIP records representing a premium increase or a premium decrease. Therefore, an SDIP credit record would contain a positive (+) exposure amount and a negative (-) premium amount, and an SDIP surcharge record would contain a positive (+) exposure amount and a positive (+) premium amount.

If the status of an operator changes during the policy term, only the credit or surcharge record must be corrected. Follow the normal endorsement instructions. If a cancellation occurs, follow the normal cancellation instructions.

<u>Section A – Premiums</u>

7. <u>RATE DEVIATIONS</u>

Under Sections 113B and 193R of Chapter 175 of the Massachusetts General Laws, companies may request approval from the Massachusetts Division of Insurance to deviate from the approved fixed and established private passenger automobile rates. Statistical records reported on policies for which rate deviations have been applied must be coded with the appropriate Type of Risk and Rate Departure Factor Codes. Additionally, the premium reported on statistical records must reflect the policy premium <u>after</u> the application of rate deviations.

Refer to the Coding Section for applicable codes and examples.

8. <u>MULTIPLE YEAR POLICIES AND INSTALLMENT POLICIES</u>

Multiple year polices rated on an annual basis shall be reported in the same manner as one year policies. If the policy is written and rated for a period longer than one year, report the total policy premium for the full policy period and the total exposure for the full policy period.

The statistical reporting of policies written on an installment basis for terms not longer than one year is the same for policies written on a prepayment basis. Any interest or finance charge shall not be included in the premium reported for the policy.

9. RULES FOR EXTENDING A POLICY

A policyholder may request that his or her policy be extended. The statistical reporting for such extensions may be done by either of two methods: extension by endorsement or extension by cancellation and rewrite.

If the extension by endorsement method is used, the additional premium must be reported under the original policy number coded with Transaction Type Code 12. The Transaction Effective Date should be the date the extension took effect and the Policy Expiration Date should be the new expiration date.

If the extension is by cancellation and rewrite, a new policy number must be used and the unearned premium on the original policy must be credited in the same manner as any cancelled policy, coded with Transaction Type Code 13. All of the coding for the new policy shall be done in the usual manner under the new policy, coded with Transaction Type Code 11.

Section B – Losses

1. <u>REPORTING OF LOSSES</u>

Losses and allocated loss adjustment expenses must be reported on separate records with the applicable codes used to report the corresponding premium records in addition to the loss codes contained in the Coding Section of this Plan.

Allocated loss adjustment expenses must be submitted for all liability and PIP (no-fault) losses. For physical damage losses, allocated loss adjustment expenses are required only for ceded paid losses. However, allocated loss adjustment expenses for voluntary paid physical damage losses may be optionally reported.

★ 2. <u>DEFINITION OF A CLAIM</u>

a. Claim Definition

★

For the purpose of this Plan, a claim shall be defined as:

- i. the loss incurred on account of bodily injury to any one individual arising out of any one accident for a particular coverage,
- ii. the loss for damage to the property, including loss of use, of any one individual (or legal entity) arising out of any one accident for which there is property damage coverage,
- iii. each individual loss arising under a physical damage coverage.

Section B – Losses

3. <u>ACCIDENT REPORTING</u>

Each accident must be uniquely identified within a given accident year. The Claim Identification Number must be used to uniquely identify the accident and claimant. If multiple coverages are involved, each coverage must be uniquely identified through the use of Coverage and Type of Loss codes. Refer to the Reporting Instructions – Losses Section of this Plan for additional information on Claim Identification Number.

The following example illustrates several scenarios for reporting Claim Identification Number. Note that in all cases, the Claim Identification Number must be consistent for the liability and no-fault lines of business. Refer to methods 1, 2, and 3 of the example. However, it is not required for the physical damage Claim Identification Numbers to be consistent either with liability and no-fault or within physical damage. Refer to methods 2 and 3 of the example.

Sample Loss Scenario:

Company A's insured was in an accident for which he was at fault. The insured suffers injuries (\$9,000) plus lost wages (\$500) and his vehicle was damaged (\$2,100). The insured was also reimbursed for substitute transportation (\$900). The other driver was seriously injured (\$8,000), and his car was damaged (\$3,500). Company B paid for their driver's medical bills under PIP coverage and paid collision damage waiving the deductible. Company B then subrogated against the at-fault insured's insurance company. Company B also paid for a police report (\$10) and an independent medical exam (\$350) under PIP, which was included in their subrogation figure to Company A. Company B's insured then took court action against the at-fault driver for pain and suffering, etc. (\$10,000). Below is a summary of Company A's statistical reporting.

	Subline	Type of	Coverane	Loss	Claim	on Number	
Claimant	ant Code		Coverage Code	Amount	Method 1	Method 2	Method 3
	621	05		\$1,500	ABC010	ABC010	ABC010
1	625	24		\$7,500	ABC010	ABC010	ABC010
(Drivor A)	625	34		\$500	ABC010	ABC010	ABC010
(Driver A)	628	11	016	\$1,600	ABC010	ABC019	ABC019
	628	09	083	\$900	ABC010	ABC019	ABC018
2	621	03		\$3,500	ABC020	ABC020	ABC020
_	621	01		\$10,000	ABC020	ABC020	ABC020
(Driver B)	621	11		\$9,160	ABC020	ABC020	ABC020

Section B – Losses

4. <u>REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES</u>

a. Allocated Loss Adjustment Expenses (ALAE)

Allocated loss adjustment expenses are the following types of expenses paid by a company in connection with the adjustment of a specific claim. ALAE are to be reported as separate records, in the same detail as indemnity losses, using the appropriate Transaction Type Code. Transaction Type Code 27 represents paid legal expenses, Transaction Type Code 29 represents paid medical expenses, and Transaction Type Code 24 represents all other paid expenses. Transaction Type Code 22 represents outstanding allocated loss adjustment expenses.

Note that salvage pool expenses should not be reported as allocated loss adjustment expenses. Refer to the Subrogation Recoveries/Expenses portion of this section for additional details.

i. Transaction Type Code 27

The following are allowable legal allocated loss adjustment expenses:

- a) Arbitration, court, and other specific items of expense, such as stenography, witnesses, summonses (excluding medical), and examinations under oath
- b) External attorney fees for claims in suit
- c) House counsel fees for claims in suit, excluding fees incurred to effect subrogation, provided that:
 - 1) The fees are computed at the same rate and by the same method as non-ceded claims,
 - 2) The fees reflect the total operating cost, including labor, on an individual suit basis and are substantiated by time statistics. (Operating costs are defined as expenses which are normally contained in company overhead, such as rent, heat, electricity, benefits, etc., but excludes any items of profit)

ii. Transaction Type Code 29

The following are allowable medical allocated loss adjustment expenses:

- a) Medical examinations to determine the extent of the company's liability
- b) Preferred provider network/organization service fee expenses incurred on a particular claim
- c) Expert medical or other evidence
- d) Laboratory and x-ray
- e) Autopsy
- f) Cost of medical records

Section B – Losses

4. <u>REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES</u> (Continued)

a. Allocated Loss Adjustment Expenses (ALAE) (Continued)

iii. Transaction Type Code 24

The following are allowable all other allocated loss adjustment expenses:

- a) Accident reconstruction
- b) Copies of documents
- c) Public records/police/fire reports (to the limit provided for by law)
- d) Motor vehicle registration search fees
- e) Appraisals of property (excluding motor vehicles)
- f) Special investigation of a claimant's background (including asset/credit reports)
- g) Engine oil, fluid analysis

b. Unallocated Loss Adjustment Expenses

Unallocated loss adjustment expenses are expenses paid by a company in settling a claim, that can not be directly allocated to a specific claim. Unallocated loss adjustment expenses are <u>not</u> to be reported. Examples of these expenses include:

- i. Overhead, salaries, and traveling expenses of company employees (other than amounts allocated as attorney fees for claims in suit)
- ii. Special investigations concerning the facts of the loss
- iii. Adjuster's fees, including those paid to independent adjusters and/or attorneys for adjusting claims (The term "adjusting" includes the investigation and adjustment of claims, the disposition of salvage, and the recovery of subrogation claims not in suit)
- iv. Fees for appraisals of motor vehicles, including preinspections and intensified appraisals
- v. Fees for retrieval of preinspection reports

5. <u>INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS</u>

The intercompany settlement reduces the dollars of loss charged against the insured to the extent he or she is free of fault by allowing his or her insurance company to recover from the company insuring the at-fault party.

When a PIP (no-fault) claim is established by a company (company #1) to cover damages caused by an atfault third party to one of its insureds, and the company subsequently takes subrogation action against the company (company #2) insuring the at-fault party, the PIP claim reported by company #1 must follow the no-fault reporting and coding instructions set forth in this Plan.

Section B – Losses

5. <u>INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS (Continued)</u>

The company being subrogated against (company #2) must establish a bodily injury liability claim to cover the amount of reimbursement to company #1. The reimbursement outstanding reserve and/or payment shall be coded to the vehicle at fault and shall be reported as an outstanding and/or paid loss with Type of Loss Code 11 or 14, depending upon the particulars of the claim. The amount of the reimbursement outstanding reserve and/or payment reported by company #2 shall include any reimbursement for allocated loss adjustment expense incurred by company #1 on its PIP claim, for medical, wage, and other economic loss, and for unallocated loss adjustment expense equal to 10% of the total amount of indemnity reimbursed. The sample loss scenario depicted previously in this section illustrates this reporting requirement under Claimant 2.

The reimbursement recovery received by company #1 shall be reported as a credit entry against the PIP claim using subrogation Transaction Type Code 26 and Type of Loss Code 45. Any allocated loss adjustment expense included in the recovery shall be reported as a separate record using the applicable allocated loss adjustment expense Transaction Type Code and Type of Loss Code 45. Any unallocated loss adjustment expense included in the recovery must not be reported.

6. <u>INTRACOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS</u>

When multiple PIP (no-fault) claims are established by the same company as the result of one accident involving two or more of its insureds, the company must determine the at-fault party and then establish a separate bodily injury claim to reimburse the insured not at fault. The statistical reporting requirements for these claims are identical to those explained for company #2 above.

7. <u>SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING</u> <u>FROM INTER/INTRACOMPANY REIMBURSEMENTS</u>

When reporting the following types of subrogation recoveries, the records must contain all codes identical to the original entries, with the exception of the Transaction Type Code and the Accounting Date.

a. Indemnity Recoveries

★

Subrogation recoveries of previously reported indemnity transactions must be identified by subrogation Transaction Type Code 26. Certain expenses incurred in effecting the recovery, not to exceed the original loss amount, can be deducted from the recovery amount or reported separately with a subrogation Transaction Type Code. Such expenses include:

- i. Attorney's fees and associated costs for claims in suit
- ii. Court costs
- iii. Location/address reports

Section B – Losses

7. <u>SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING</u> <u>FROM INTER/INTRACOMPANY REIMBURSEMENTS) (Continued)</u>

a. Indemnity Recoveries (Continued)

The following are expenses that can neither be deducted from the recovery amount nor reported separately:

- i. Cost of company employees
- ii. Collection agency fees
- iii. Subrogation recovery services

b. Allocated Loss Adjustment Expense Recoveries

Subrogation recoveries of a previously reported allocated loss adjustment expense transaction must be reported as offsets to the original entries, using applicable allocated loss adjustment expense Transaction Type Codes.

8. <u>SALVAGE RECOVERIES/EXPENSES</u>

Salvage recovery adjustments to previously reported collision, comprehensive, and property damage entries must be identified by salvage Transaction Type Code 25, and must contain all codes identical to the original entry, with the exception of the Transaction Type Code and the Accounting Date.

The following expenses incurred to effect salvage may be netted from the recovery amount or reported as a separate record with salvage Transaction Type Code 25:

- a. Original towing and storage charges, excluding losses resulting from towing and labor
- b. Haul fees to salvage yard
- c. Pool fees of commission
- d. Auction fees
- e. Salvage title fees (to the limit provided for by law)
- f. Salvage pool expenses

9. AMOUNT OF PAID LOSS AND EXPENSE

The loss to be reported shall be the amount of paid indemnity, medical, wage, or other economic loss pertaining to a single coverage of the policy for a particular claimant. In the case of PIP (no-fault), amounts reported must be prior to recovery via intracompany or intercompany reimbursements.

Liability and PIP expense reported is the allocated loss adjustment expense paid and/or outstanding for the particular claim or coverage/accident. Paid allocated loss adjustment expense on physical damage losses is only required for ceded business, but may be optionally reported for voluntary business.

Section B – Losses

10. EXTENT OF VEHICLE LOSS FOR PAID LOSSES

For each property damage liability and physical damage paid loss record reported, identify whether the loss is a total or a partial vehicle loss within the Partial/Total Loss Indicator field.

Regarding vehicle claims, a total loss is any loss where the insurer takes title to the damaged vehicle and gains the salvage value of the insured vehicle. (In certain cases the policyholder may retain title to the vehicle, but the estimated salvage value is deducted from the settlement. This satisfies the definition in that the insurer in fact took title and returned it to the insured upon being reimbursed for the estimated salvage value).

A partial loss is any loss where the insurer makes payment to a policyholder of a dollar amount for the repair of the insured vehicle. The insured retains title to the vehicle. The partial/total loss status will remain as determined at first payment. All non-vehicle claims should be coded as partial losses.

Refer to the Coding Section of this Plan for specific instructions on reporting the Partial/Total Loss Indicator.

11. OUTSTANDING LOSSES (EXCLUDING PHYSICAL DAMAGE)

Outstanding losses shall be evaluated as of each quarter ending date and shall be reported in the method prescribed in the Annual Call Schedule.

Outstanding PIP (no-fault) losses may be subdivided between medical, wage, or all other economic losses, using applicable Type of Loss Codes, or outstanding PIP losses may be reported in total, using a non-split outstanding Type of Loss Code 23.

12. GLASS LOSSES

All glass losses should be reported with the appropriate Coverage Code and Type of Loss Code. Specifically,

- a. Individual glass damage losses should be reported with an other than collision Coverage Code and Type of Loss Code 03.
- b. Glass damage resulting from a collision should be reported with a collision Coverage Code and the appropriate Type of Loss Code.
- c. Glass damage resulting from an other than collision loss should be reported with an other than collision Coverage Code and the appropriate Type of Loss Code.

13. EXTRA-RISK RATING

Physical damage loss records should be coded to identify the appropriate extra-risk category as reported on the corresponding premium record. Refer to Section A – Premiums of the General Reporting Requirements Section of this Plan for additional information relative to extra-risk rating.

Section A – Liability

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year of the entry being reported. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

Report the month and year of the effective date of the transaction.

Transaction effective month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Transaction effective year requires a two (2) digit code in positions 12-13. Use the third and fourth positions of the transaction effective year of the entry being reported. For example, a transaction effective year of 2001 shall be reported as 01 in positions 12-13.

Section A – Liability

6. POLICY EXPIRATION DATE (Positions 14-16)

Report the month and year of the expiration date of the policy.

Policy expiration month requires a one (1) digit code in position 14. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy expiration year requires a two (2) digit code in positions 15-16. Use the third and fourth positions of the policy expiration year of the entry being reported. For example, a policy expiration year of 2002 shall be reported as 02 in positions 15-16.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town).

If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state Premium Town Code.

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 621.

Section A – Liability

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. BODILY INJURY LIMITS CODE (Positions 37-38)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

16. PROPERTY DAMAGE LIMIT CODE (Positions 39-40)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

17. MEDICAL PAYMENTS LIMIT CODE (Positions 41-42)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

18. <u>BODILY INJURY CAUSED BY AN UNINSURED AUTO LIMITS CODE</u> (Positions 43-44)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

19. <u>BODILY INJURY CAUSED BY AN UNDERINSURED AUTO LIMITS CODE</u> (Positions 45-46)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

20. Reserved for Future Use (Position 47)

Report space or zero.

★ 21. <u>ANNUAL MILEAGE CODE (Positions 48-50)</u>

Report the three (3) digit numeric code rounded to the nearest hundred miles.

Refer to the Coding Section for examples.

Section A – Liability

22. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

★ 23. <u>Reserved for Future Use (Positions 53-55)</u>

Report spaces or zeros.

24. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

25. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

26. <u>Reserved for Future Use (Positions 58-60)</u>

Report spaces or zeros.

★ 27. <u>PRODUCER CODE (Positions 61-66)</u>

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

28. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

Section A – Liability

29. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) digit ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

30. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

31. RATE DEPARTURE FACTOR CODE (Positions 88-90)

Report the three (3) digit numeric code. The Rate Departure Factor Code must be numeric and within the range of the current approved rate deviations.

If the transaction does not have a rate deviation report Rate Departure Factor Code 100. Any spaces or non-numeric characters will be converted to zeros.

Refer to the Coding Section for examples.

32. <u>Reserved for Future Use (Positions 91-95)</u>

Report spaces or zeros.

BODILY INJURY PREMIUM AMOUNT (Positions 96-103)

Report the combined premium for Bodily Injury, Optional Bodily Injury, Medical Payments, Bodily Injury Caused by an Uninsured Auto and Bodily Injury Caused by an Underinsured Auto rounded to the nearest whole dollar.

The Bodily Injury Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

Section A – Liability

34. <u>PROPERTY DAMAGE PREMIUM AMOUNT (Positions 104-111)</u>

Report the property damage premium rounded to the nearest whole dollar.

The Property Damage Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

35. <u>Reserved for Future Use (Positions 112-114)</u>

Report spaces or zeros.

36. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

37. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

38. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section B – No-Fault

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. <u>ACCOUNTING DATE (Positions 6-7)</u>

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year of the entry being reported. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

Report the month and year of the effective date of the transaction.

Transaction effective month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Transaction effective year requires a two (2) digit code in positions 12-13. Use the third and fourth positions of the transaction effective year of the entry being reported. For example, a transaction effective year of 2001 shall be reported as 01 in positions 12-13.

Section B – No-Fault

6. POLICY EXPIRATION DATE (Positions 14-16)

Report the month and year of the expiration date of the policy.

Policy expiration month requires a one (1) digit code in position 14. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy expiration year requires a two (2) digit code in positions 15-16. Use the third and fourth positions of the policy expiration year of the entry being reported. For example, for a policy expiration year of 2002 shall be reported as 02 in positions 15-16.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town).

If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state Premium Town code.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 625.

Section B – No-Fault

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. PIP COVERAGE CODE (Position 37)

Report the one (1) digit numeric code. Refer to the Coding Section for the applicable code.

16. PIP DEDUCTIBLE CODE (Positions 38-39)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

17. <u>Reserved for Future Use (Positions 40-47)</u>

Report space or zeros.

★ 18. <u>ANNUAL MILEAGE CODE (Positions 48-50)</u>

Report the three (3) digit numeric code rounded to the nearest hundred miles. Refer to the Coding Section for examples.

19. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

20. <u>Reserved for Future Use (Positions 53-55)</u>

Report spaces or zero.

Section B – No-Fault

21. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

22. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

23. <u>Reserved for Future Use (Positions 58-60)</u>

Report spaces or zeros.

★ 24. <u>PRODUCER CODE (Positions 61-66)</u>

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

25. <u>RESERVED FOR FUTURE USE (Positions 67-71)</u>

Report spaces or zeros.

26. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) digit ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

27. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

Section B – No-Fault

28. <u>RATE DEPARTURE FACTOR CODE (Positions 88-90)</u>

Report the three (3) digit numeric code. The Rate Departure Factor Code must be numeric and within the range of the current approved rate deviations.

If the transaction does not have a rate deviation report Rate Departure Factor Code of 100. Any spaces or non-numeric characters will be converted to zeros.

Refer to the Coding Section for examples.

29. <u>Reserved for Future Use (Positions 91-95)</u>

Report spaces or zeros.

30. PIP (NO-FAULT) PREMIUM AMOUNT (Positions 96-103)

Report the PIP premium rounded to the nearest whole dollar.

The PIP Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

31. <u>Reserved for Future Use (Positions 104-114)</u>

Report spaces or zeros.

32. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

Section B – No-Fault

33. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen 17 characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

34. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section C – Physical Damage

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. <u>ACCOUNTING DATE (Positions 6-7)</u>

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth position of the policy effective year of the entry being reported. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

Report the month and year of the effective date of the transaction.

Transaction effective month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Transaction effective year requires a two (2) digit code in positions 12-13. Use the third and fourth positions of the transaction effective year of the entry being reported. For example, a transaction effective year of 2001 shall be reported as 01 in positions 12-13.

<u>Section C – Physical Damage</u>

6. POLICY EXPIRATION DATE (Positions 14-16)

Report the month and year of the expiration date of the policy.

Policy expiration month requires a one (1) digit code in position 14. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy expiration year requires a two (2) digit code in positions 15-16. Use the third and fourth positions of the policy expiration year of the entry being reported. For example, a policy expiration year of 2002 shall be reported as 02 in positions 15-16.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town).

If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state Premium Town Code.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 628.

Section C – Physical Damage

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. OTHER THAN COLLISION COVERAGE CODE (Positions 37-39)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

16. COLLISION COVERAGE CODE (Positions 40-42)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

17. <u>Reserved for Future Use (Positions 43-44)</u>

Report spaces or zeros.

18. <u>SYMBOL CODE (Positions 45-46)</u>

Report the two (2) digit numeric code assigned to the vehicle for the transaction being reported. Refer to the Coding Section for applicable codes and examples.

19. <u>PRE-INSURANCE INSPECTION IDENTIFICATION CODE (Position 47)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes

20. ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code rounded to the nearest hundred miles.

Refer to the Coding Section for examples.

21. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

★ 22. <u>ANTI-THEFT DEVICE DISCOUNT CODE (Position 53)</u>

Report the one (1) digit alphanumeric code. Refer to the Coding Section for applicable codes.

Section C – Physical Damage

★ 23. <u>Reserved for Future Use (Positions 54-55)</u>

Report spaces or zeros.

24. <u>OEM COVERAGE CODE (Position 56)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

25. <u>DISCOUNT CODE (Position 57)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

26. VALUE CODE (Positions 58-60)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

★ 27. <u>PRODUCER CODE (Positions 61-66)</u>

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

28. <u>HIGH-THEFT VEHICLE CODE (Position 67)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

29. <u>Reserved for Future Use (Position 68)</u>

Report space or zero.

30. EXTRA-RISK RATING CODE – OTHER THAN COLLISION (Position 69)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

31. <u>Reserved for Future Use (Position 70)</u>

Report space or zero.

Section C – Physical Damage

32. EXTRA-RISK RATING CODE - COLLISION (Position 71)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

33. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) position ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

34. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

35. <u>RATE DEPARTURE FACTOR CODE (Positions 88-90)</u>

Report the three (3) digit numeric code. The Rate Departure Factor Code must be numeric and within the range of the current approved rate deviations.

If the transaction does not have a rate deviation report Rate Departure Factor Code 100. Any spaces or non-numeric characters will be converted to zeros.

Refer to the Coding Section for examples.

36. <u>Reserved for Future Use (Positions 91-95)</u>

Report spaces or zeros.

37. OTHER THAN COLLISION PREMIUM AMOUNT (Positions 96-103)

Report the other than collision premium rounded to the nearest whole dollar.

The Other Than Collision Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

<u>Section C – Physical Damage</u>

38. COLLISION PREMIUM AMOUNT (Positions 104-111)

Report the collision premium rounded to the nearest whole dollar.

The Collision Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

39. <u>Reserved for Future Use (Positions 112-114)</u>

Report spaces or zeros.

40. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

41. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

42. <u>COMPANY USE (Positions 148-150)</u>

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section A – Liability

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy for which the loss transaction is being reported.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. ACCIDENT DATE (Positions 11-15)

Report the month, day, and year of the date on which the accident occurred.

Accident month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accident day requires a two (2) digit code in positions 12-13.

Section A – Liability

5. ACCIDENT DATE (Positions 11-15) (Continued)

Accident year requires a two (2) digit code in positions 14-15. Use the third and fourth positions of the year in which the accident occurred. For example, an accident that occurred in the year 2001 shall be reported as 01 in positions 14-15.

6. <u>Reserved for Future Use (Position 16)</u>

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. <u>PREMIUM TOWN CODE (Positions 19-21)</u>

Report the three (3) digit numeric code. The Premium Town Code on the loss record must match the Premium Town Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. The CAR Identification Code on the loss record must match the CAR Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

10. <u>TYPE OF RISK CODE (Position 23)</u>

Report the one (1) digit numeric code. The Type of Risk Code on the loss record must match the Type of Risk Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. <u>SUBLINE CODE (Positions 27-29)</u>

Report Subline Code 621.

Section A – Liability

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. LIABILITY LIMITS CODE (Positions 37-38)

Report the two (2) digit numeric code for the limit under which the loss was incurred.

Refer to the Coding Section for applicable codes.

16. <u>Reserved for Future Use (Position 39)</u>

Report space or zero.

17. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

18. <u>Reserved for Future Use (Positions 43-47)</u>

Report spaces or zeros.

★ 19. <u>ANNUAL MILEAGE CODE (Positions 48-50)</u>

Report the three (3) digit numeric code. The Annual Mileage Code on the loss record must match the Annual Mileage Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

Section A – Liability

20. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

★ 21. <u>Reserved for Future Use (Positions 53-54)</u>

Report spaces or zeros.

22. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

Report the one (1) digit numeric code that indicates the damage to the vehicle involved in the accident. Refer to the Coding Section for applicable codes.

23. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. The Passive Restraint Device Discount Code on the loss record must match the Passive Restraint Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

24. <u>DISCOUNT CODE (Position 57)</u>

Report the one (1) digit numeric code. The Discount Code on the loss record must match the Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

25. <u>Reserved for Future Use (Positions 58-60)</u>

Report spaces or zeros.

26. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

27. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

Section A – Liability

28. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

29. <u>RESERVED FOR FUTURE USE (Position 81)</u>

Report space or zero.

30. <u>REPORTING DATE (Positions 82-84)</u>

Report the month and year in which the claim was established. Reporting month requires a one (1) digit code in position 82. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Reporting year requires a two (2) digit code in positions 83-84. Use the third and fourth positions of the year in which the claim was established. For example, a claim established in the year 2001 shall be reported as 01 in positions 83-84.

31. <u>Reserved for Future Use (Positions 85-86)</u>

Report spaces or zeros.

32. <u>TYPE OF LOSS CODE (Positions 87-88)</u>

Report the two (2) digit numeric code that describes the liability type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 33. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

Section A – Liability

34. LOSS AMOUNT (Positions 91-98)

Report the amount of the liability loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

35. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

36. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

37. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

38. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section B - No Fault

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. POLICY EFFECTIVE DATE (Positions 8-10)

Report the month and year of the effective date of the policy for which the loss transaction is being reported.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. <u>ACCIDENT DATE (Positions 11-15)</u>

Report the month, day, and year of the date on which the accident occurred.

Accident month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accident day requires a two (2) digit code in positions 12-13.

Section B – No Fault

5. <u>ACCIDENT DATE (Positions 11-15) (Continued)</u>

Accident year requires a two (2) digit code in positions 14-15. Use the third and fourth positions of the year in which the accident occurred. For example, an accident that occurred in the year 2001 shall be reported as 01 in positions 14-15.

6. <u>Reserved for Future Use (Position 16)</u>

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code. The Premium Town Code on the loss record must match the Premium Town Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. The CAR Identification Code on the loss record must match the CAR Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

10. <u>TYPE OF RISK CODE (Position 23)</u>

Report the one (1) digit numeric code. The Type of Risk Code on the loss record must match the Type of Risk Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. <u>SUBLINE CODE (Positions 27-29)</u>

Report Subline Code 625.

Section B – No Fault

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. <u>PIP COVERAGE CODE (Position 37)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable code.

16. PIP DEDUCTIBLE CODE (Positions 38-39)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

17. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

18. <u>Reserved for Future Use (Positions 43-47)</u>

Report spaces or zeros.

★ 19. <u>ANNUAL MILEAGE CODE (Positions 48-50)</u>

Report the three (3) digit numeric code. The Annual Mileage Code on the loss record must match the Annual Mileage Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

20. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Section B – No Fault

21. <u>TYPE OF CLAIMANT CODE (Position 53)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for the applicable codes.

★ 22. <u>Reserved for Future Use (Positions 54-55)</u>

Report spaces or zeros.

23. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. The Passive Restraint Device Discount Code on the loss record must match the Passive Restraint Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

24. DISCOUNT CODE (Position 57)

Report the one (1) digit numeric code. The Discount Code on the loss record must match the Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

25. <u>Reserved for Future Use (Positions 58-60)</u>

Report spaces or zeros.

26. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

27. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

Section B – No Fault

28. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

29. <u>Reserved for Future Use (Positions 81-86)</u>

Report spaces or zeros.

30. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the PIP (no-fault) type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 31. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

32. LOSS AMOUNT (Positions 91-98)

Report the amount of the PIP loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

33. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

Section B – No Fault

34. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

35. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

36. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

<u>Section C – Physical Damage</u>

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. POLICY EFFECTIVE DATE (Positions 8-10)

Report the month and year of the effective date of the policy for which the loss transaction is being reported.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. <u>ACCIDENT DATE (Positions 11-15)</u>

Report the month, day, and year of the date on which the accident occurred.

Accident month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accident day requires a two (2) digit code in positions12-13.

<u>Section C – Physical Damage</u>

5. ACCIDENT DATE (Positions 11-15) (Continued)

Accident year requires a two (2) digit code in positions 14-15. Use the third and fourth positions of the year in which the accident occurred. For example, an accident that occurred in the year 2001 shall be reported as 01 in positions 14-15.

6. <u>Reserved for Future Use (Position 16)</u>

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code. The Premium Town Code on the loss record must match the Premium Town Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. The CAR Identification Code on the loss record must match the CAR Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

10. <u>TYPE OF RISK CODE (Position 23)</u>

Report the one (1) digit numeric code. The Type of Risk Code on the loss record must match the Type of Risk Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. <u>SUBLINE CODE (Positions 27-29)</u>

Report Subline Code 628.

<u>Section C – Physical Damage</u>

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. <u>COVERAGE CODE (Positions 37-39)</u>

Report the three (3) digit numeric code for the coverage under which the loss was incurred. Refer to the Coding Section for applicable codes.

16. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

17. <u>Reserved for Future Use (Positions 43-44)</u>

Report spaces or zeros.

18. SYMBOL CODE (Positions 45-46)

Report the two (2) digit numeric code. The Symbol Code on the loss record must match the Symbol Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

19. INTENSIFIED APPRAISAL IDENTIFICATION CODE (Position 47)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

★ 20. <u>ANNUAL MILEAGE CODE (Positions 48-50)</u>

Report the three (3) digit numeric code. The Annual Mileage Code on the loss record must match the Annual Mileage Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

<u>Section C – Physical Damage</u>

21. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

★ 22. <u>ANTI-THEFT DEVICE DISCOUNT CODE (Position 53)</u>

Report the one (1) digit alphanumeric code. The Anti-Theft Device Discount Code on the loss record must match the Anti-Theft Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

23. <u>Reserved for Future Use (Position 54)</u>

Report space or zero.

24. <u>PARTIAL/TOTAL LOSS INDICATOR (Position 55)</u>

Report the one (1) digit numeric code that indicates the damage to the vehicle involved in the accident. Refer to the Coding Section for applicable codes.

25. OEM COVERAGE CODE (Position 56)

Report the one (1) digit numeric code. The OEM Coverage Code on the loss record must match the OEM Coverage Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

26. <u>DISCOUNT CODE (Position 57)</u>

Report the one (1) digit numeric code. The Discount Code on the loss record must match the Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

27. VALUE CODE (Positions 58-60)

Report the three (3) digit numeric code. The Value Code on the loss record must match the Value Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

Section C – Physical Damage

28. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

29. HIGH-THEFT VEHICLE CODE (Position 67)

Report the one (1) digit numeric code. The High-Theft Vehicle Code on the loss record must match the High-Theft Vehicle Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

30. <u>Reserved for Future Use (Position 68)</u>

Report space or zero.

31. EXTRA-RISK RATING CODE – OTHER THAN COLLISION (Position 69)

Report the one (1) digit numeric code. The Extra-Risk Rating Code - Other Than Collision on the loss record must match the Extra-Risk Rating Code - Other Than Collision as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

32. <u>Reserved for Future Use (Position 70)</u>

Report space or zero.

33. EXTRA-RISK RATING CODE - COLLISION (Position 71)

Report the one (1) digit numeric code. The Extra-Risk Rating Code - Collision on the loss record must match the Extra-Risk Rating Code - Collision as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

34. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

35. <u>Reserved for Future Use (Positions 81-84)</u>

Report spaces or zeros.

<u>Section C – Physical Damage</u>

36. <u>CATASTROPHE CODE (Positions 85-86)</u>

Catastrophe Code is a serial number assigned by the Insurance Services Offices (ISO) to a natural disaster. Report the applicable two (2) digit numeric Catastrophe Code. If not applicable, report spaces or zeros.

Refer to CAR's Statistical Edit Package for a list of applicable codes.

37. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the physical damage type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 38. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

39. LOSS AMOUNT (Positions 91-98)

Report the amount of the physical damage loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

40. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. For physical damage claims, it is acceptable to use a different claim number to identify payments under more than one physical damage coverage. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

<u>Section C – Physical Damage</u>

41. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

42. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

43. <u>COMPANY USE (Positions 148-150)</u>

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Liability, No-Fault, and Physical Damage

This section applies to all records

TRANSACTION TYPE CODE

Premium Codes						
Transaction Type	Liability Subline 621	No-Fault Subline 625	Physical Damage Subline 628			
New or Renewal	11	11	11			
Endorsement or Audit or Policy Extension	12	12	12			
Cancellation of Policy Pro Rata or Short Rate	13	13	13			
Reinstatement	14	14	14			
Cancelled Flat	15	15	15			

Loss Codes						
Transaction Type	Liability Subline 621	No-Fault Subline 625	Physical Damage Subline 628			
Outstanding Loss	21	21				
Outstanding Allocated Loss Adjustment Expense	22	22				
Paid Loss	23	23	23			
Paid All Other Allocated Loss Adjustment Expense	24	24	24 *			
Salvage Recoveries	25		25			
Subrogation Recoveries	26	26	26			
Paid Legal Allocated Loss Adjustment Expense	27	27	27 *			
Paid Medical Allocated Loss Adjustment Expense	29	29				

* Reporting Paid Allocated Loss Adjustment expenses on physical damage losses is required for ceded business and optional for voluntary business.

STATE CODE

State	Code			
Massachusetts	20			

CAR IDENTIFICATION CODE

Description (Policy Effective Years 1995 and subsequent)		
Voluntary Business (retained) from Voluntary Agents or written directly by the company (Representative Producers)	0	
Voluntary Business (retained) from Exclusive Representative Producers (No Voluntary Contract)	1	
Ceded Business from Voluntary Agents or written directly by the company (Representative Producers)	4	
Ceded Business from Exclusive Representative Producers (No Voluntary Contract)	5	

Description (Policy Effective Years 1994 and prior)				
Voluntary Business from Voluntary AgentsVoluntary Business (not ceded) from Voluntary Agents or written directly by the company	0			
 Voluntary Business from Representative Producers (No Voluntary Contract) Voluntary Business (not ceded) from a Representative Producer that does not have a voluntary motor vehicle insurance contract with their assigned Servicing Carrier, but does not meet the criteria for CAR ID Code 3 as defined below. 	1			
 Voluntary Business from Subsidiary (Affiliated) Agencies Voluntary Business (not ceded) from a subsidiary agency whose parent agency has a voluntary motor vehicle insurance contract with the Servicing Carrier, pursuant to Rule 14 of the CAR Rules of Operation. 	2			
 Ceded Business from a Former Designated Broker Ceded Business from a producer, appointed to the Servicing Carrier as a Designated Broker (as defined in the Facility Rules of Operation) prior to January 1, 1984, and that producer has not had a voluntary motor vehicle insurance contract with that Servicing Carrier subsequent to the date of the appointment as a Designated Broker. This status survives a change of Servicing Carrier, which has been granted pursuant to Rule 14 of the CAR Rules of Operation. 	3			
Ceded Business from Voluntary Agents Ceded Business from Voluntary Agents or written directly by the company 	4			
Ceded Business from Representative Producers (No Voluntary Contract) • Ceded Business as defined for CAR ID Code 1	5			
Ceded Business from Subsidiary (Affiliated) Agencies Ceded Business from a subsidiary agency, as defined for CAR ID Code 2 	6			
Voluntary Business from a Former Designated BrokerVoluntary Business (not ceded) from a former Designated Broker, as defined for CAR ID Code 3	7			
 Voluntary Business from Representative Producers (No Voluntary Contract) Voluntary Business (not ceded) from a Representative Producer where the producer had a voluntary contract with its Servicing Carrier, and the contract was cancelled on or after November 22, 1988. 	8			
 Ceded Business from Representative Producers (No Voluntary Contract) Ceded Business from a Representative Producer where the producer had a voluntary contract with its Servicing Carrier, and the contract was cancelled on or after November 22, 1988. 	9			

TYPE OF RISK CODE

Description	Code
Regular Business (Massachusetts Motor Vehicle Policies and Risks not coded below)	1
Business Written at Rate DeviationsApproved under Section 193R of Chapter 175 of the General Laws	3
 Business Written at Rate Deviations Approved under Section 113B of Chapter 175 of the General Laws Business written at compounded rate deviations approved under both Sections 113B and 193R. 	4
 Business Written at Rate Deviations (Risks Not Subject to the Compulsory Law) Approved under Section 193R of Chapter 175 of the General Laws 	5
 Business Written at Rate Deviations (Risks Not Subject to the Compulsory Law) Approved under Section 113B of Chapter 175 of the General Laws Risks Not Subject to Compulsory Law written at compounded rate deviations approved under both Sections 113B and 193R. 	6
Business Not Subject to the Compulsory Law and Not Written at Rate Deviations	7
 Business Endorsed with a Company Specific Coverage Managed Medical Care Endorsement (Applicable to PIP and Medical Payments Coverages only) 	9

 \star

ANNUAL STATEMENT LINE OF BUSINESS CODE

Description	Line of Business	Code
Private Passenger Auto No-Fault (Personal Injury Protection)	19.1	191
Other Private Passenger Auto Liability	19.2	192
Commercial Auto No-Fault (Personal Injury Protection)	19.3	193
Other Commercial Auto Liability	19.4	194
Private Passenger Auto Physical Damage	21.1	211
Commercial Auto Physical Damage	21.2	212

SUBLINE CODE

Subline	Code
Liability	621
PIP (No-Fault)	625
Physical Damage	628

CLASSIFICATION CODE

STATISTICAL CLASS CODE ASSIGNMENT

- Statistical Class Code assignments should be based on the characteristics of the individual used to rate the vehicle.
- For single vehicle policies, the statistical class must correspond to the rate class based upon the characteristics of the individual being rated.
- For multiple vehicle policies, when an inexperienced operator is the principal operator of a specific automobile, an inexperienced principal operator classification shall apply to that automobile and the operator shall be disregarded from any further inexperienced operator classification assignment. Additional automobiles owned by such operator, if such operator is the only listed operator on the policy, will be classified in the same inexperienced operator classification as the first automobile but as an occasional operator.
- In all other cases, the operator with the highest inexperienced occasional operator rate classification shall be assigned to the automobile with the highest "Total Base Premium" (as defined in the Massachusetts Private Passenger Automobile Insurance Manual which is published by the Automobile Insurers Bureau of Massachusetts). Each remaining inexperienced occasional operator shall be assigned in the order of highest remaining rate classification to the remaining automobile with the highest "Total Base Premium" until all inexperienced occasional operators are assigned to an automobile.

Any automobiles remaining after assignment of all inexperienced operators shall be assigned an experienced operator rate classification.

The assignment of operators to automobiles applies regardless of the number of policies involved.

 \star

★

•

╈

For example: On a policy with two vehicles and two operators, one of which is under 25, the statistical class for the highest rated vehicle will reflect the youthful operator unless that operator is the principal driver of the other vehicle. The remaining vehicle should be reported with Classification Code 1101## where the fifth and sixth positions of the Classification Code (represented by ##) indicate the SDIP status of the vehicle.

On a policy with two vehicles and one inexperienced operator, if the inexperienced operator is the principal operator of one of the vehicles, an inexperienced principal operator classification will apply to that automobile. The other automobile will be classified with an inexperienced occasional operator classification.

• Below is a list of Statistical Class Code definitions that follow on the subsequent pages:

Private Passenger Miscellaneous Rated as Private Passenger Private Passenger Motorcycles Non-Owned Automobiles Special Rating and Adjustment

CLASSIFICATION CODE

PRIVATE PASSENGER DEFINITION

Description: First Three Positions (Statistical Class)	Code
For single vehicle policies, there is no operator of the automobile under 25 years of age residing in the same household as the applicant or employed as a chauffeur for the automobile or who customarily operates the automobile and the automobile is not customarily used in business. Refer to the General Reporting Requirement section for information regarding multi-vehicle policies.	110
Qualifies for Class 110 except the principal operator of the automobile is age 65 through 74.	115
Qualifies for Class 110 except the principal operator of the automobile is age 75 or over.	116
There is a male operator under 25 years of age that is not principal operator of the automobile.	120
There is a male operator under 25 years of age that is principal operator of the automobile.	122
There is a female operator of the automobile under 25 years of age.	124
Qualifies for Class 124 except all female operators of the automobile who are under 25 years of age have completed a satisfactory Driver Training Program as defined in the Massachusetts Private Passenger Automobile Insurance Manual.	126
The automobile is owned by an individual and is used in business	130
Qualifies for Class 120 except all male operators of the automobile who are under 25 years of age have completed a satisfactory Driver Training Program as defined in the Massachusetts Private Passenger Automobile Insurance Manual.	140
Qualifies for Class 122 except all male operators of the automobile who are under 25 years of age have completed a satisfactory Driver Training Program as defined in the Massachusetts Private Passenger Automobile Insurance Manual.	142

Description: Fourth Position (Rating Class)				
Rate Class 10: Experienced Operator - licensed at least 6 years				
Rate Class 15: Experienced Operator - Licensed at least 6 years - Age sixty-five (65) or more	2			
Rate Class 17: Inexperienced Principal Operator - Licensed at least 3 years and less than 6 years	3			
Rate Class 18: Inexperienced Occasional Operator - Licensed at least 3 years and less than 6 years	4			
Rate Class 30: Business Use	5			
Rate Class 20: Inexperienced Principal Operator - Licensed less than 3 years - No Driver Training	6			
Rate Class 21: Inexperienced Occasional Operator - Licensed less than 3 years - No Driver Training	7			
Rate Class 25: Inexperienced Principal Operator – Licensed less than 3 years - Driver Training	8			
Rate Class 26: Inexperienced Occasional Operator - Licensed less than 3 years - Driver Training	9			

Description: Fifth and Sixth Positions (SDIP Status) *			
Regular Premium, Loss and Outstanding Loss Records	00		
Safe Driver Insurance Plan Credit Records (Premium Only)	09 - 14		
Safe Driver Insurance Plan Surcharge Records (Premium Only)	16 - 35		

* Do not report records with SDIP Step 15

★

Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section CLASSIFICATION CODE

PRIVATE PASSENGER DEFINITION (continued)

Valid Statistical Class Code Reporting Table

Stat	Rate Class (Fourth position of Class Code)								
Class	10 (1)	15 (2)	17 (3)	18 (4)	30 (5)	20 (6)	21 (7)	25 (8)	26 (9)
110	1101		1103	1104		1106	1107	1108	1109
115		1152	1153			1156		1158	
116		1162	1163			1166		1168	
120	1201			1204			1207		
122	1221		1223			1226			
124	1241		1243	1244		1246	1247		
126	1261		1263	1264				1268	1269
130					1305				
140	1401			1404					1409
142	1421		1423					1428	

Last Revision Date: 01/01/2005

 \star

CLASSIFICATION CODE

MISCELLANEOUS RATED AS PRIVATE PASSENGER DEFINITION

	Code	
Description (SDIP does not apply)	Liability	Physical Damage
Snowmobiles	042600	042600
Antique Motor Cars and Antique Motorcycles	048300	048300
Golfmobiles (motorized)	049500	049500
Lawnmowers (motorized)	049500	049500

	Code	
Description: First Four Positions (SDIP does apply)	Liability	Physical Damage
Electric (Private Passenger)	0400	0400
Trailers designed for use with Private Passenger Motor Vehicles		0453
Travel Trailers – Including Mobile Home Trailers not on an enclosed foundation		0459
Motor Homes (Self Propelled) – Not including Camping Trailers, Travel Trailers and Mobile Homes	0455	0455
Vehicles Carrying School Children (Seating 0-9 passengers) Not registered for Carrying Passengers for hire	0539	0539

Description: Fifth and Sixth Positions (SDIP Status) *	Code
Regular Premium, Loss and Outstanding Loss Records	00
Safe Driver Insurance Plan Credit Records (Premium Only)	09 - 14
Safe Driver Insurance Plan Surcharge Records (Premium Only)	16 – 35

* Do not report records with SDIP Step 15.

CLASSIFICATION CODE

PRIVATE PASSENGER MOTORCYCLE DEFINITION

- Motorcycles (including Motorbikes)
- Motorscooters (including Scootmobiles, Safticycles, Motorglides)
- Mopeds
- Similar Motor Vehicles

Description: First Four Positions (Statistical Class)		Code		
Rating	Cubic Centimeter Engine Displacement	Standar	d Class	Age sixty-five (65) or more
Group		Experienced Operator ★	Inexperienced Operator ★	
Group A	C.C. Displacement to 70	0408	0508	0608
	C.C. Displacement 71 – 100	0409	0509	0609
Group B	C.C. Displacement 101 – 125	0410	0510	0610
	C.C. Displacement 126 – 200	0411	0511	0611
	C.C. Displacement 201 – 275	0412	0512	0612
	C.C. Displacement 276 – 350	0413	0513	0613
Group C	C.C. Displacement 351 – 500	0414	0514	0614
	C.C. Displacement 501 – 650	0415	0515	0615
★ Group D	C.C. Displacement 651 – 750	0416	0516	0616
	C.C. Displacement 751 – 850	0417	0517	0617
	C.C. Displacement 851 - 950	0418	0518	0618
	C.C. Displacement 951 – 1050	0419	0519	0619
	C.C. Displacement 1051 – 1150	0420	0520	0620
	C.C. Displacement 1151 – 1250	0421	0521	0621
	C.C. Displacement 1251 – 1350	0422	0522	0622
	C.C. Displacement 1351 – 1450	0423	0523	0623
	C.C. Displacement 1451 – 1550	0424	0524	0624
	C.C. Displacement 1551 – 1650	0425	0525	0625
	C.C. Displacement 1651 – 1750	0427	0527	0627
	C.C. Displacement 1751 – 1850	0428	0528	0628
	C.C. Displacement 1851 – 1950	0429	0529	0629
	C.C. Displacement 1951 – 2050	0430	0530	0630
	C.C. Displacement over 2050	0431	0531	0631

Last Revision Date: 01/01/2005

CLASSIFICATION CODE

★ PRIVATE PASSENGER MOTORCYCLE DEFINITION (continued)

Description: Fifth and Sixth Positions (SDIP Status) *	Code
Regular Premium, Loss and Outstanding Loss Records 00	
Safe Driver Insurance Plan Credit Records (Premium Only)	09 - 14
Safe Driver Insurance Plan Surcharge Records (Premium Only)	16 - 35

* Do not report records with SDIP Step 15

CLASSIFICATION CODE

NON-OWNED AUTOMOBILES DEFINITION

	Code	
Description	Liability Phy Da	
Use of Other Automobiles Coverage	902000	902000
Named Non-Owner Automobiles Policy	902000	902000
All Other	700000	700000

SPECIAL RATING AND ADJUSTMENT DEFINITION

	Code	
Description	Liability Physic Dama	
Public Transit Discount (Commuter Discount)	190000	190000
Non-Cedable Limits	800000	
All Other	998000	998000

MODEL YEAR CENTURY CODE

• Model Year Century Code is a one digit numeric code that corresponds to the century of the model year of the vehicle which is denoted by the first position of the model year

Examples:

Vehicle	Model Year	Century	Code
Dodge Colt	1989	1900	1
Ford Escort	1996	1900	1
Toyota Camry	2000	2000	2

★ ANNUAL MILEAGE CODE

- The Annual Mileage Code is a three digit numeric code that shall be reported on all Private Passenger records
- The vehicle's annual mileage shall be rounded to the nearest hundred miles and the rounded miles are used to develop the Annual Mileage Code
- If the annual mileage is 100,000 or greater, report Annual Mileage Code 999
- If the annual mileage is not available, report Annual Mileage Code 999

Annual Mileage	Annual Mileage (rounded to the nearest hundred miles)	Code
100,000	100,000	999
15,065	15,100	151
5,000	5,000	050
500	500	005
Not Available	Not Available	999

MODEL YEAR CODE

• Model Year Code is a two digit numeric code that corresponds to the third and fourth positions of the model year of the vehicle

Vehicle	Model Year	Code
Dodge Colt	1989	89
Ford Escort	1996	96
Toyota Camry	2000	00

CLASS GROUP CODE

- ★ This code is valid for Policy Effective Years 2002 and prior.
 - For voluntary business, companies may optionally use Class Group Code 1.

Description	Code
Voluntary	0
Ceded – Private Passenger	1

PARTIAL/TOTAL LOSS INDICATOR

- This field applies to Property Damage Liability and Physical Damage Losses only
- Non-vehicle claims should be coded as a partial loss (Partial/Total Loss Indicator 1)
- For additional information regarding reporting the extent of vehicle loss, refer to Section B Losses of the General Reporting Requirements Section of this Plan

Description	Code
Partial Loss	1
Total Vehicle Loss	2

PASSIVE RESTRAINT DEVICE DISCOUNT CODE

• This discount applies to Medical Payments, Uninsured and Underinsured Liability and PIP (No-Fault) coverage only

Description	Code
No Discount	0
 Category I Applies Vehicle contains occupant safety features approved by the Massachusetts Division of Insurance 	1

DISCOUNT CODE

Description	Multi-Car Status * Exists	Multi-Car Status * Does Not Exist
Multi-Car Discount Applies (Rate Class 10 and 15 only)	1	
Annual Mileage Discount Applies **	2	3
Multi-Car Discount (Rate Class 10 and 15 only) and Annual Mileage Discount Apply	4	
Motorcycle Rider Training Discount Applies		6
No Discount Applies	5	9

- * Multi-Car Status is defined as "An individual, (or husband and wife resident in the same household) who owns two or more automobiles ... At least two of the automobiles must be classified as use class 10, 15 or 30. The premium reduction applies only to Class 10 and 15 automobiles". Therefore Multi-Car Status may exist but the Multi-Car Discount may not be applicable.
- ** The Annual Mileage Discount does not apply to other than collision coverage, therefore, when only other than collision coverage is afforded and no other discounts apply, code space or zero (0) for the Discount Code.

★

PRODUCER CODE

- Producer Code is a six position alphanumeric code
- Producer Code should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- \star Note that a unique Producer Code is required to be reported for each agency office location.

Producer Code	Code
A1234	A1234 <i>b</i>
987	987 <i>bbb</i>
AB5678	AB5678

ZIP CODE

- ZIP Code is a nine position numeric code
- It is mandatory to report the first five positions of the ZIP Code
- The ZIP Code extension (occupying the last four positions) is optional
- ZIP Code should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)

ZIP Code	Code
01463-8735	014638735
01463	01463 <i>bbbb</i>
02135-9822	021359822

EXPOSURE

Mar 16 Apr 16 to to Apr 15 May 15		Mar 16 to Apr 15
		c
	0	
0	•	2 1 0
-	2	3 2 1
2	3 2	
e	4	
4		
ъ	6 5	9
9		7
7	8 7	
8	_	6
6	_	_
10		=
11	_	5
12	13 12	5
13		
14	-	15
15		1 6
16	_	17
17		8
8	19	Ð
19		
₹ ₹		3 6
3 5	3 5	3 8
1 2		24
77		
5	5	

Last Revision Date: 01/01/2000

RATE DEPARTURE FACTOR CODE

- The Rate Departure Factor Code is a three digit numeric code reflecting the decimal complement of the deviation percentage approved by the Division of Insurance for the policy
- If multiple deviation percentages exist for a vehicle, the decimal complements of the deviation percentages must be multiplied and then use the rounded product to develop the Rate Departure Factor Code
- If no rate deviation exists, report Rate Departure Factor Code 100

For Single Deviations:

Examples:

Deviation Percentage	Decimal Complement	Code
3.0	.970	970
10.0	.900	900
12.5	.875	875
None	None	100

For Multiple Deviations:

Deviation Percentage #1	Decimal Complement	Deviation Percentage #2	Decimal Complement	Product of Complements	Code
3.0	.970	10.0	.900	.873000	873
5.0	.950	7.5	.925	.878750	879
7.5	.925	12.5	.875	.809375	809

CLAIM IDENTIFICATION NUMBER

- Claim Identification Number is a sixteen position alphanumeric code
- It is mandatory to report at least three characters
- Claim ID should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- Refer to Section B Losses of the General Reporting Requirements Section for additional information on accident reporting

Claim Identification Number	Code
CL014638735	CL014638735bbbbb
123456789	123456789 <i>bbbbbbb</i>
ABCDEF1234567890	ABCDEF1234567890

POLICY IDENTIFICATION NUMBER

- Policy Identification Number is a sixteen position alphnumeric code
- It is mandatory to report at least three characters
- Policy ID should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)

Policy Identification Number	Code	
PL014638735	PL014638735bbbbb	
123456789	123456789 <i>bbbbbbb</i>	
ABCDEF1234567890	ABCDEF1234567890	

VEHICLE IDENTIFICATION NUMBER

- Vehicle Identification Number (VIN) is a five to seventeen position alphanumeric code
- VIN should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- For Losses: If a claim is incurred on an insured's policy, that does not involve a vehicle named on said policy, the losses may be coded as 97 followed by fifteen zeros (9700000000000000)

Vehicle Identification Number	Code
1FABP28A6FF143890	1FABP28A6FF143890
1C3BH41J6MN109186	1C3BH41J6MN109186
ZC2FP1101KB202230	ZC2FP1101KB202230
GV5VK3212B	GV5VK3212Bbbbbbbb
MA12345	MA12345bbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbbb

Liability Only

This section applies to liability records only

LIABILITY LIMITS CODE

 \star

BODILY INJURY		
Limits of Liability		Code
Per Claim	Per Accident	Code
\$ 20,000	\$ 40,000	01
20,000	40,000	04 *
20,000	50,000	11
25,000	60,000	05
25,000	50,000	06
30,000	70,000	12
35,000	80,000	13
50,000	100,000	07
100,000	300,000	08
250,000	500,000	09
500,000	1,000,000	10 ***
1,000,000	1,000,000	14 ***
All Other Limits Not Above		49
No Bodily Injury		00

UNINSURED AUTO		
Limits of Liability		Code
Per Claim	Per Accident	Code
\$ 20,000	\$ 40,000	04
20,000	50,000	11
25,000	60,000	05
25,000	50,000	06
30,000	70,000	12
35,000	80,000	13
50,000	100,000	07
100,000	300,000	08
250,000	500,000	09
500,000	1,000,000	10 ***
1,000,000	1,000,000	14 ***
All Other Limits Not Above		49
No Uninsured Auto	0	00

PROPERTY DAMAGE		
Limits of Liability	Code	
\$ 5,000	01	
10,000	02	
15,000	03	
25,000	04	
35,000	05	
50,000	06	
100,000	07	
250,000	11	
500,000	10 ***	
750,000	12 ***	
1,000,000	13 ***	
All Other Limits Not Above	09	
No Property Damage	00	

MEDICAL PAYMENTS	
Limits of Liability	Code
\$ 500	01
750	02
1,000	03
2,000	04
5,000	05
10,000	06
15,000	07
20,000	08
25,000	09
50,000	10 ***
100,000	11 ***
All Other Limits Not Above	49 ****
No Medical Payments	00

UNDERINSURED AUTO		
Limits of Liability		Code
Per Claim	Per Accident	Code
\$ 20,000	\$ 40,000	04 **
20,000	50,000	11
25,000	60,000	05
25,000	50,000	06
30,000	70,000	12
35,000	80,000	13
50,000	100,000	07
100,000	300,000	08
250,000	500,000	09
500,000	1,000,000	10 ***
1,000,000	1,000,000	14 ***
All Other Limits Not Above		49
No Underinsured Auto		00

- * If both mandatory (code 01) and optional (code 04) Bodily Injury coverage are purchased, Limits Code 04 must be reported.
- ** If the 20/40 limit of Underinsured Auto coverage is purchased, although there is no associated cost, Limits Code 04 must be reported.
- *** This limit is available for voluntary business only.
- ★ **** Optional for policies effective 1/1/05 12/31/05 and mandatory for policies effective 1/1/06 and subsequent.

TYPE OF LOSS CODE - LIABILITY

Description	Code
Bodily Injury to Others – Excluding claims covered under Type of Loss Code 02	01
Bodily Injury to Others – Guest claims, claims arising out of accidents occurring off the ways of the Commonwealth or claims out of Massachusetts	02
Damage to Someone Else's Property (Property Damage Liability)	03
Medical Payments	05
Bodily Injury Caused by an Uninsured Automobile	06
Bodily Injury Caused by an Underinsured Automobile	07
Bodily Injury to Others – Inter or Intra Company Reimbursements resulting from PIP (No-Fault) claims (excluding claims covered under Type of Loss Code 14)	11
Bodily Injury to Others – Inter or Intra Company Reimbursements resulting from PIP (No-Fault) claims arising out of accidents occurring off the ways of the Commonwealth or claims out of Massachusetts	14

No-Fault Only

This section applies to no-fault records only

PIP COVERAGE CODE

Description	Code
Basic PIP (No-Fault) Coverage Only	1

PIP DEDUCTIBLE CODE

Description	Deductible Amount	Code
Full Coverage	\$ 0	01
	\$ 100	12
	250	13
	500	14
Named Insured	1,000	15
	2,000	16
	4,000	17
	8,000	18
Named Insured and Members of Household	\$ 100	22
	250	23
	500	24
	1,000	25
	2,000	26
	4,000	27
	8,000	28

TYPE OF CLAIMANT CODE

Description	Code
Named Insured	1
Member of Insured's Household	2
Other Occupant	3
Pedestrian	4

TYPE OF LOSS CODE – PIP (NO-FAULT)

Description	Code
Non-Split Outstanding Loss	23
Medical Loss	24
Wage Loss	34
Other Economic Loss	44
Subrogation Recovery	45

Physical Damage Only

This section applies to physical damage records only

OTHER THAN COLLISION COVERAGE CODE

★ The \$100 Towing and Labor Costs Coverage codes are optional for policies effective 1/1/2002 – 12/31/2002 and mandatory for policies effective 1/1/2003 and subsequent.

OTC Coverage with Full Glass Coverage			
Description	Code Towing and Labor Costs Coverage		
Description			
	\$50 Included	★ \$100 Included	Excluded
Comprehensive Coverage			
\$ 300 Deductible	234	434	035
\$ 500 Deductible	236	436	037
\$1,000 Deductible	238	438	039
\$2,000 Deductible	222	422	023
All Other Deductibles with Full Glass Coverage	264	464	004
Fire Only	265	465	005
Fire and Theft	266	466	006
Fire, Theft and Combined Additional Coverage	268	468	008
Stated Amount	060		
Agreed Amount	063		

OTC Coverage with Optional \$100 Glass Deductible			
Description	Code		
Description	Towing and Labor Costs Coverage		Coverage
	\$50 ± \$100 Excluded		
Comprehensive Coverage			
\$ 300 Deductible	334	534	135
\$ 500 Deductible	336	536	137
\$1,000 Deductible	338	538	139
\$2,000 Deductible	322	522	123
All Other Deductibles with Optional \$100 Glass Deductible	364	564	104
Fire Only	365	565	105
Fire and Theft	366	566	106
Fire, Theft and Combined Additional Coverage	368	568	108

OTHER THAN COLLISION COVERAGE CODE

MISCELLANEOUS COVERAGES

Description	Code
Non-Owned Automobiles – Broad Form	056
Non-Owned Automobiles – Limited Form	057
 Towing and Labor – \$100 per disablement No other comprehensive coverage afforded Optional for policies effective 1/1/2002 – 12/31/2002. Mandatory for policies effective 1/1/2003 and subsequent. 	080
 Towing and Labor – \$50 per disablement No other comprehensive coverage afforded 	082
Substitute Transportation - \$15 per day/ \$450 maximum	083
 Substitute Transportation - \$45 per day/\$1,350 maximum Optional for policies effective 1/1/2001 – 12/31/2001. Mandatory for policies effective 1/1/2002 and subsequent. 	084
Substitute Transportation - \$30 per day/ \$900 maximum	085
Substitute Transportation - \$100 per day/ \$3,000 maximum	086
Sound Receiving and Transmitting Equipment	087
All Other Coverages – excluding Collision	089

 \star

COLLISION COVERAGE CODE

Collision Coverage Without Waiver of Deductible				
Description Code Type of Loss Code				
\$ 300 Deductible	076	10		
\$ 500 Deductible	077	10		
\$1,000 Deductible	078	10		
\$2,000 Deductible	072	10		
All Other Deductibles	079	10		

Collision Coverage With Waiver of Deductible				
Description Code Type of Loss Code				
\$ 300 Deductible	015	11 or 12		
\$ 500 Deductible	016	11 or 12		
\$1,000 Deductible	017	11 or 12		
\$2,000 Deductible	012	11 or 12		
All Other Deductibles	019	11 or 12		

Limited Collision Coverage			
Description	Code	Type of Loss Code	
Full Coverage	040	12	
\$ 300 Deductible	045	10	
\$ 500 Deductible	042	10	
\$1,000 Deductible	043	10	
\$2,000 Deductible	046	10	
All Other Deductibles	049	10	

Miscellaneous Coverages		
Description	Code	
Stated Amount – Limited Collision	041	
Stated Amount – Collision	092	
Non-Owned Automobiles – Broad Form	096	
Non-Owned Automobiles – Limited Form	097	
All Other	099	

Last Revision Date: 01/01/2000

Print Date: 01/01/2000

SYMBOL CODE

PRIVATE PASSENGER VEHICLES

• For records with Stated Amount coverage, use the value of Stated Amount coverage in the chart below, rather than the Cost New dollar value, to determine the Symbol Code

Model Years 1989 & Prior			
Symbol			
1	\$ 0-1,600	01	
2	1,601 – 2,100	02	
3	2,101 – 2,750	03	
4	2,751 – 3,700	04	
5	3,701 – 5,000	05	
6	5,001 – 6,500	06	
7	6,501 – 8,000	07	
8	8,001 – 10,000	08	
10	10,001 – 12,500	10	
11	12,501 – 15,000	11	
12	15,001 – 17,500	12	
13	17,501 – 20,000	13	
14	20,001 - 24,000	14	
15	24,001 - 28,000	15*	
16	28,001 - 33,000	16*	
17	33,001 - 39,000	17*	
18	39,001 – 46,000	18*	
19	46,001 – 55,000	19*	
20	55,001 - 65,000	20*	
21	65,001 & above	21*	
Pick-ups, Sedans and Panel Deliveries rated as Private Passenger cars		09**	

* Applies to Model Years 1981 and subsequent only. For Model Years 1980 and prior, to indicate \$20,001 and above, use Symbol Code 14.

** Symbol Code 09 should only be used when no Symbol exists in the Symbol and Identification Section of the Massachusetts Private Passenger Automobile Insurance Manual.

Model Years 1990 & Subsequent		
Symbol	Cost New	Code
1	\$ 0-6,500	01
2	6,501 – 8,000	02
3	8,001 - 9,000	03
4	9,001 - 10,000	04
5	10,001 – 11,250	05
6	11,251 – 12,500	06
7	12,501 – 13,750	07
8	13,751 – 15,000	08
10	15,001 – 16,250	10
11	16,251 – 17,500	11
12	17,501 – 18,750	12
13	18,751 – 20,000	13
14	20,001 – 22,000	14
15	22,001 – 24,000	15
16	24,001 – 26,000	16
17	26,001 – 28,000	17
18	28,001 – 30,000	18
19	30,001 - 33,000	19
20	33,001 – 36,000	20
21	36,001 - 40,000	21
22	40,001 - 45,000	22
23	45,001 – 50,000	23
24	50,001 - 60,000	24
25	60,001 - 70,000	25
26	70,001 - 80,000	26
27	80,001 & above	27
	edans and Panel ated as Private cars	09**

★ VALUE CODE

PRIVATE PASSENGER MOTORCYCLES

- Motorcycles (including Motorbikes), Motorscooters (including Scootmobiles, Safticycles, Motorglides), Mopeds and similar Motor Vehicles
- Motorcyle Value is a three digit numeric code that shall be reported on all Private Passenger Motorcycle records
- The motorcycle's value shall be rounded up to the nearest hundred dollars and the rounded value is used to develop the Value Code
- If the motorcycle value is \$99,900 or greater, report Value Code 999

Motorcycle Value	Motorcycle Value (rounded up to the nearest hundred dollars)	Code
\$101	\$200	002
\$2,550	\$2,600	026
\$15, 225	\$15,300	153
\$24,786	\$24,800	248
\$102, 322	\$102,400	999

PRE-INSURANCE INSPECTION IDENTIFICATION CODE

Description	Code
Eligible for Pre-Insurance Inspection and Inspected	1
Eligible for Pre-Insurance Inspection and Not Inspected	2
Not Eligible or Waived	9

INTENSIFIED APPRAISAL IDENTIFICATION CODE

• This code is valid for Policy Effective Years 1995 and prior

Description	Claims <= \$4,000	Claims > \$4,000
Eligible for Intensified Appraisal and Appraised	3	5
Eligible for Intensified Appraisal and Not Appraised	4	6
Not Eligible	9	8

ANTI-THEFT DEVICE DISCOUNT CODE

• Applies to other than collision coverage only

 \star

 \star

★

 \star

- Refer to the Anti-Theft Device Standards and Discounts Rule which is contained in the Massachusetts Private Passenger Automobile Insurance Manual for detailed descriptions of each category
- Reporting Anti-Theft Discount Codes which pertain to a Category V anti-theft device or a Category V device in combination with another device is optional for policies effective January 1, 2004 through June 30, 2004 and mandatory for policies effective July 1, 2004 and subsequent.

Description	Code
No Discount Applies	0
Category I Applies	1
Category II Applies	2
Category III Applies	3
Category IV Applies	4
Category IV plus Category I Apply	5
Category IV plus Category II Apply	6
Category IV plus Category III Apply	7
Category V Applies	8
Category V plus Category I Apply	9
Category V plus Category II Apply	A
Category V plus Category III Apply	В

OEM COVERAGE CODE

★ • If OEM Coverage exists on a policy, but is only applicable to one of the written physical damage coverages, separate collision and other than collision physical damage statistical records must be reported.

Description	Code
OEM Coverage Applies	1
OEM Coverage Does Not Apply	0

HIGH-THEFT VEHICLE CODE

• Applies to other than collision coverage only

 \star

• Refer to the High Theft Vehicle List section of the Massachusetts Private Passenger Automobile Insurance Manual for a list of such vehicles

Description	Code
Not Applicable	0
High-Theft Vehicle	1
High-Theft Vehicle – No Rate Adjustment Vehicle contains Category III, IV or V Anti-Theft Device or Vehicle Recovery System	2

EXTRA-RISK RATING CODE

OTHER THAN COLLISION

- When multiple categories of extra-risk rating apply, code the lowest of the applicable codes
- For additional information regarding reporting extra-risk rating, refer to Section A Premiums of the General Reporting Requirements Section of this Plan

Description	Code
Not Applicable	0
Convicted of motor vehicle theftWithin the last five years	1
Convicted of auto insurance related fraudWithin the last five years	2
 Material misrepresentation of a Physical Damage claim Within the last five years Rated at 1.5 times the otherwise applicable total rate 	3
Two or more total fire claims OR two or more total theft claimsWithin the last three years	4
 Material misrepresentation of a Physical Damage claim Within the last five years Rated at 1.2 times the otherwise applicable total rate 	5
Convicted of vehicular homicideWithin the last five years	6
Convicted of driving under the influence of alcohol or drugsWithin the last three years	7
Four or more greater than 50% at-fault accidentsWithin the last three years	8
Salvage Title – No new certificate issued	9

EXTRA-RISK RATING CODE

COLLISION

- When multiple categories of extra-risk rating apply, code the lowest of the applicable codes
- For additional information regarding reporting extra-risk rating, refer to Section A Premiums of the General Reporting Requirements Section of this Plan

Description	Code
Not Applicable	0
Convicted of vehicular homicideWithin the last five years	1
Convicted of motor vehicle theft Within the last five years 	2
Convicted of auto insurance related fraudWithin the last five years	3
 Material misrepresentation of a Physical Damage claim Within the last five years Rated at 1.5 times the otherwise applicable total rate 	4
 Material misrepresentation of a Physical Damage claim Within the last five years Rated at 1.2 times the otherwise applicable total rate 	5
Convicted of driving under the influence of alcohol or drugsWithin the last three years	6
Four or more greater than 50% at-fault accidentsWithin the last three years	7
Two or more total fire claims OR two or more total theft claimsWithin the last three years	8
Salvage Title – No new certificate issued	9

TYPE OF LOSS CODE – PHYSICAL DAMAGE

OTHER THAN COLLISION

Description	Code
Fire	01
Theft	02
 Glass For additional information on Glass Losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan 	03
Malicious Mischief and Vandalism	05
Cyclone, Earthquake, Explosion, Hail, Tornado, Water Damage and Windstorm	06
Flood and Rising Water	07
 Towing and Labor Costs Refer to the Coverage Code Decision Table in Appendix A for reportable fields 	08
All other types – excluding Collision	09

COLLISION

Description	Code
 Without Waiver of Deductible – Collision loss payment when deductible is applied Limited Collision with a deductible 	10
 With Waiver of Deductible – Collision loss payment when deductible is applied 	11
 With Waiver of Deductible – Collision loss payment when deductible is waived Limited Collision with full coverage 	12

Section A - Statistical Data Quality Components

The Statistical Data Quality Program consists of the components noted below. Each component identifies a specific company requirement or responsibility relative to the reporting of statistics to CAR and is intended to assure that CAR receives complete and accurate statistical data on a timely basis. This Section also describes the special edits or methods used by CAR to verify the quality of reported statistical data.

1. STATISTICAL SUBMISSIONS

Companies are responsible for assuring that all of the data for a particular accounting month is received at CAR on or before the submission due date, and that the data is in processable and statistically acceptable condition. For those companies affiliated with a group, data must be reported at the individual company number level, rather than at the group level, as described in Part II – General Rules of the Plan. If any portion of the submission does not meet these requirements, Statistical Data Quality Penalties will be assessed. The key date to be used for determining penalty amounts will be the date upon which the last portion of the particular accounting month's shipment is received at CAR in processable and statistically acceptable condition. Refer to Section B - Statistical Data Quality Penalties Section of the Statistical Data Quality Program for specific penalty information.

In order to assure that a company's submission of data for a particular accounting month is complete, all premium and paid loss data for each accounting month must be submitted to CAR in a single mailing. However, it is acceptable for quarterly outstanding loss data to be submitted separately.

If a company is not able to consolidate their shipments for mailing to CAR, a request for waiver from this requirement must be filed with CAR. If CAR grants a waiver to this requirement, it is necessary for the company to continue to submit their data shipments to CAR in the same manner for each subsequent accounting month.

Companies may request the ability to report a supplemental submission to CAR after their original shipment for the accounting month has been submitted. Such supplemental submissions will not be accepted unless CAR has agreed in advance to accept the shipment. If CAR agrees to accept the supplemental submission, but it is not received by CAR until after the shipment due date, the shipment will be subject to applicable Statistical Data Quality Penalties in the same manner as other statistical submissions. Refer to Section B - Statistical Data Quality Penalties of the Statistical Data Quality Program for specific penalty information.

a. Compliance For Newly Reporting Companies

If a company or company group exceeds the established private passenger reporting thresholds of \$100,000 in written premiums or \$50,000 in paid losses, as identified through the Annual Statement Reconciliation Process, statistical reporting to CAR must commence. Although the determination of whether a company exceeds the established thresholds is based upon the writings of an affiliated company group, statistical data must be reported to CAR on an individual company basis. Companies identified as exceeding the reporting thresholds will be required to report detailed statistical data no later than the December shipment of the second following year.

Example: The 2000 Massachusetts Annual Statement Page 15 indicates that a company has exceeded the reporting thresholds. This company will be instructed to begin reporting to CAR no later than the December, 2002 submission.

 \star

Massachusetts Private Passenger Automobile Statistical Plan Part VII – Statistical Data Quality Program

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (continued)

b. Low Volume Company

A company or company group that has written less than \$500,000 in premium <u>and</u> \$500,000 in paid losses for reportable coverages during the prior calendar year, based on the information contained on their Massachusetts Annual Statement Page 15, is referred to as a low volume company. A low volume company may request the option of reporting data to CAR on a quarterly, rather than monthly, basis.

c. Due Date

 \star

The due date is generally the first CAR business day 45 days after the close of each accounting month. CAR will notify the industry on a yearly basis of the specific submission due dates that will be in effect for the upcoming calendar year via the Call Schedule, which is issued as an Accounting and Statistical Notice. All premium, paid loss and outstanding loss submissions for a particular accounting month must be received in processable and statistically acceptable condition at the offices of CAR by the close of business on the established due date.

d. Turnaround Time Commitment

CAR provides companies with a turnaround time commitment relative to the receipt and processing of monthly submissions. The turnaround time commitment guarantees that all shipments received at CAR prior to the first business day of each month will be processed such that the company will be notified of any reporting problems or rejections no later than the fifth business day of that calendar month. In addition, if required by the company, these rejected tapes will be sent back to the company via Federal Express, no later than the fifth business day of the month, for the receipt by the company no later than the sixth business day of the month. The turnaround time commitment is subject to modification by CAR's Operations Committee.

If the established turnaround time commitment cannot be met by CAR, and as a result, a company's shipment is rejected and cannot be resubmitted by the shipment due date, the key dates used to calculate Statistical Data Quality Penalties for the affected shipments would be adjusted accordingly. However, the cut-off dates for monthly accounting/statistical shipments to be included in CAR's processing cycles would not be adjusted. For those companies that are financially impacted due to the exclusion of their monthly accounting/statistical shipment from a processing cycle because CAR did not meet its turnaround time commitment, CAR will reimburse the company for loss of investment income or provide another appropriate financial remedy.

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (Continued)

e. Acceptable Shipments

★

For a shipment to be accepted by CAR, it must be received in processable condition as specified in the Accounting/Statistical Submission Reporting Instructions contained in the CAR Statistical Edit Package. In addition, the shipment must be in balance with its corresponding statistical and accounting summary control totals, and in statistically acceptable condition such that its statistical error content must be less than 15% of the shipment or less than 100 records. Note that the statistical error criteria will apply separately for premiums, paid losses, and outstanding losses, and on a subline basis. Additionally, for those companies affiliated with a group, statistical data must be reported at the individual company number level or the shipment will be considered incomplete and unacceptable.

A record is considered to be a statistical error record when it has one or more statistical errors (S01-S49). A record is considered to be a verification only error record when it has no statistical errors, but has one or more verification errors (V50-V53). Refer to CAR's Statistical Edit Package for a description of these error records. Verification errors are not included in the determination of error percentages or error record counts. The statistical error criteria will be waived for a particular shipment if the company confirms in writing to CAR that the shipment's error content exceeds the 15% tolerance because the submission contains offsets for previously reported error records, and consequently these offsets have caused the error percentage to exceed 15%.

Companies that have not reported complete and acceptable shipments to CAR by the shipment due date will be subject to Statistical Data Quality Penalties. Note that penalties are based on the receipt date at CAR of the last acceptable portion of the particular accounting month's shipment, and will therefore be the same if one portion of the shipment or the entire shipment is late or unacceptable. In addition, note that shipments received on weekends or holidays will be assigned the receipt date of the next CAR business day following the weekend or holiday. Refer to Section B – Statistical Data Quality Penalties of the Statistical Data Quality Program for specific penalty information.

f. Limits In Excess (LEX) Records

Any record with an extremely high exposure, premium dollar amount, or loss dollar amount (according to the chart below) will be identified for CAR Staff to review. Note that for the premium dollar tolerances, bodily injury and property damage premium amounts are checked separately for liability records and collision and other than collision premium amounts are checked separately for physical damage records. Also, note that Commuter Discount records are excluded from the relevant exposure checks.

LEX Tolerance Levels										
Field	Tolerance									
Exposure	-120 to +120 exposures									
Premium Dollar Amount	-\$10,000 to +\$10,000									
Loss Dollar Amount	-\$500,000 to +\$500,000									

Massachusetts Private Passenger Automobile Statistical Plan Part VII – Statistical Data Quality Program

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (Continued)

f. Limits In Excess (LEX) Records (Continued)

CAR Staff will review records that exceed the established LEX tolerance levels. If it is determined that the records will significantly distort CAR's database, CAR will reject the affected shipments(s) and instruct the company to correct the records and resubmit the data immediately (prior to the shipment due date). Otherwise, CAR will accept the data and instruct the company to offset the records in a future submission.

2. <u>STATISTICAL ERRORS</u>

a. Due Date

★ On a weekly basis, CAR updates its On-Line Telecommunications System, provides companies with statistical error files and establishes a due date for the necessary corrections to be completed. The established due date for the completion of on-line corrections is approximately 60 calendar days from the date the listings are available on-line.

b. Acceptability

★ Companies are responsible for assuring that statistical errors are corrected in a timely manner so that the number of uncorrected error records within an error file is reduced to no greater than 5%. Verification errors will be identified separately and will not be included in the determination of error percentages. If the submitted number of error corrections does not reduce the error content within the error file to the 5% tolerance by the due date, the error records will be re-listed on-line with a new due date. The company is required to make additional corrections to the error file until the 5% tolerance has been met.

★ Companies that are provided with statistical error files for several accounting months at the same time will be provided with additional time to correct these errors as long as the pertinent shipments were received at CAR in a timely and acceptable manner. Such cases will be handled on an individual basis. Taken into consideration will be the reason that several accounting months' files were provided at the same time, the volume of error records and any extenuating circumstances that may affect the timely correction of data.

c. Low Volume

★

A statistical error file is considered low volume if both the total number of error records contained within the file and the total exposures, premiums or losses in error fall within the ranges indicated below. Statistical error files that meet this criteria will not be considered in an overdue status and will not be required to be corrected to reduce the error content to the 5% tolerance level.

Massachusetts Private Passenger Automobile Statistical Plan Part VII – Statistical Data Quality Program

Section A - Statistical Data Quality Components

2. STATISTICAL ERRORS (Continued)

c. Low Volume (Continued)

Statistical E	Statistical Error Tolerance Levels													
Private Passenger	Total Number Of Error Records	Total Exposures or Loss Dollars In Error												
Liability, No-Fault and Physical Damage Premiums	1 to 25	-60 to +60 exposures												
Liability Losses	1 to 20	-\$5,000 to +\$5,000 losses												
No-Fault Losses	1 to 20	-\$2,000 to +\$2,000 losses												
Physical Damage Losses	1 to 20	-\$2,000 to +\$2,000 losses												

3. <u>RATE EDIT</u>

CAR will edit voluntary and ceded private passenger premium data for the latest two policy effective years to assure that it has been rated properly. Only data that has successfully passed CAR's statistical edits will be rate edited, and companies will be notified by CAR of the rate edit results of their data.

a. Tolerance

Companies are responsible for assuring that their cumulative percentage of rate errors, for each line of business and policy effective year, remains below the established rate edit error tolerance of 2%. Once a company exceeds the rate edit error tolerance, and provided that there is a minimum of two hundred error records per line of business, the company will be provided with six accounting months from the error listing cycle in which the tolerance was exceeded to reduce their cumulative rate edit error percentage, for that line of business and policy effective year, to within the established tolerance. In order to correct rate edit errors, companies are required to submit offset and re-enter adjustment records. Refer to the General Rules and Section A – Premiums of the General Reporting Requirements Sections of this Plan for information on reporting adjustment records.

b. Appeal Process For Exceeding Established Tolerance

Companies with errors in excess of the established tolerance may appeal to CAR for a reduction of the Statistical Data Quality Penalty if it can be clearly demonstrated that the rate error condition does not impact the ratemaking database. The granting of an appeal will be allowed for one policy year only, and companies will be required to correct their reporting systems for the next reporting year in order to prevent the assessment of rate edit penalties in the subsequent reporting year.

Section A - Statistical Data Quality Components

★ 4. <u>MASSACHUSETTS ANNUAL STATEMENT</u>

For each calendar year, all companies licensed to write automobile insurance in Massachusetts are required to submit an electronic copy of their NAIC Annual Statement filings to CAR by approximately March 15th of the following year. CAR also requires that companies submit a hard copy of their Annual Statement. For each of the other three calendar quarters, CAR collects Massachusetts' statutory Page 14 data (also known as Page 15 or Page 24 data) from companies. Note that for all quarters, Annual Statement data must be submitted for each individual company within a group via CAR's on-line Annual Statement Reconciliation System. CAR will inform the industry on an annual basis, via the Annual Call Schedule, of the exact quarterly and final Annual Statement due dates on a calendar year basis.

On a quarterly basis, CAR reconciles each company's Massachusetts Annual Statement data to the statistical data reported by the company through the particular quarter. The reconciliation is performed at the individual company level, not on a group company basis. The reconciliation is performed each quarter in an effort to identify, as soon as possible, reporting problems that may impact the quality of CAR's statistical database. Companies are provided with the results of their reconciliation. If it is determined that a company's statistically reported totals for a given quarter and their quarterly Annual Statement totals vary by more than 5% for any premium or loss line of business, CAR requests that the company provide a satisfactory written response explaining the difference(s). Additionally, if the difference is due to missing statistical data, then the company will be expected to provide an action plan that details when the missing data will be rectified. Company responses must be provided to CAR within (30) calendar days from the date that the reconciliation results were initially provided to the company.

5. <u>MASSACHUSETTS AUTOMOBILE INSURANCE EXPENSE CALL</u>

The Massachusetts Automobile Insurance Expense Call pertaining to a particular calendar year will be due at CAR by approximately June 1 of the following year. CAR will notify the industry each year via an Accounting and Statistical Notice of the exact due date of the Massachusetts Automobile Insurance Expense Call for the particular calendar year.

<u>Section B – Statistical Data Quality Penalties</u>

In order to encourage companies to report complete and accurate statistical data on a timely basis, CAR has established the Statistical Data Quality Penalties described below. The Statistical Data Quality Program only establishes those penalties that will apply for statistical purposes. Additional penalties may result due to accounting errors on ceded data, and these penalty provisions are contained in the CAR Manual of Administrative Procedures.

Mandated legislative changes and other contingencies that would delay the reporting or processing of data or require substantial operational changes will be reviewed as to their impact on the Statistical Data Quality Program. If sufficient lead time is not available to the companies to submit any of the required reportings to CAR, the Operations Committee will consider the potential need for temporary revisions or suspensions to the provisions of the Statistical Data Quality Program and its associated penalties.

1. STATISTICAL SUBMISSIONS

This section details the Statistical Data Quality Penalty amounts assessed for late or unreported statistical submissions.

a. Compliance for Newly Reporting Companies

Companies that fail to report statistical submissions to CAR, after being identified as exceeding the established private passenger reporting thresholds for written premiums and/or paid losses, will be assessed a \$10,000 Statistical Data Quality Penalty the first calendar year. If non-compliance continues, a \$25,000 penalty will be assessed after the second calendar year, and a \$50,000 penalty will be assessed each calendar year thereafter until statistical data reporting begins. Although the determination of whether a company exceeds the established thresholds is based upon the writings of the entire group, this penalty will be assessed on an individual company basis. It will be applied to each company within the identified group, regardless of whether the company on an individual basis has exceeded the reporting thresholds. In addition, the Division of Insurance will be notified of the company's non-compliance.

Example: The 2000 Massachusetts Annual Statement Page 15 indicates that a company has exceeded the reporting thresholds. The company must begin reporting to CAR no later than the December 2002 submission. If a submission is not reported to CAR on or before this deadline, the company will be assessed a \$10,000 Statistical Data Quality Penalty. If the company again fails to report by the December 2003 submission, the company will be assessed a \$25,000 penalty. If the company fails to report by December 2004 submission, the company will be assessed a \$50,000 penalty, and the Division of Insurance will be notified of the company's non-compliance.

Section B – Statistical Data Quality Penalties

1. STATISTICAL SUBMISSIONS (Continued)

b. Low Volume Company

Low volume companies have a maximum penalty amount of \$1,000 for any one submission. Accordingly, low volume companies reporting on a quarterly basis will never be assessed more than \$4,000 in a calendar year, and low volume companies electing to report on a monthly basis will never be assessed more than \$12,000 in a calendar year.

c. Late And Unacceptable Shipments

The Statistical Data Quality Penalty amounts accumulate based on the receipt date of the shipment. Statistical Data Quality penalty amounts accrue up to \$2,000 for a particular range of shipment receipt dates as shown in the chart below. An additional \$2,000 penalty is incurred for each additional calendar month that passes until the shipment is received. Since each company that is affiliated with a group is required to report their statistical data on an individual company basis, these penalties are also assessed on an individual company basis. For the shipment in the example below, a penalty of \$2,000/month would be added to the \$2,000 amount previously accrued on the shipment since the displayed receipt date had passed.

Receipt Date at CAR of Last Acceptable Portion	Penalty Amount
After the shipment due date, but before the end of the month in which the shipment due date occurs	\$ 300
After the end of the month in which the shipment due date occurs, but on or before the due date of the next month's shipment	\$ 800
After the due date of the next accounting month's shipment, but before the end of the month in which this due date occurs	\$ 2,000
Each additional calendar month	\$ 2,000/month

Example: January Monthly Account	Example: January Monthly Accounting Shipment Due 3/15												
Receipt Date of Shipment Calculation of Penalty Penalty Dollars													
3/16 – 3/31	\$300	\$300											
4/1 - 4/15	\$800	\$800											
4/16 - 4/30	\$2,000	\$2,000											
5/1	\$2,000 + \$2,000	\$4,000											
6/1	\$4,000 + \$2,000	\$6,000											

Massachusetts Private Passenger Automobile Statistical Plan Part VII – Statistical Data Quality Program

Section B – Statistical Data Quality Penalties

★ 2. <u>STATISTICAL ERRORS</u>

This section details the Statistical Data Quality Penalty amounts that companies will be assessed if an insufficient volume of statistical error corrections are applied.

Statistical Error Files Meeting the Following Criteria	Penalty Amount
The initial due date has expired and the error percentage has not been reduced to less than or equal to 5%	\$ 100
The error file has been re-listed, the second due date has expired, and the error percentage has not been reduced to less than or equal to 5%	\$ 400
Each additional re-listing with error percentages not less than or equal to 5%	\$ 800

	Example: Statistical Error Percentage Not Reduced to Less Than or Equal to 5%: Error Corrections Due 4/30												
Due Date Calculation of Penalty Penalty Dollars													
4/30	\$100	\$100											
6/30	\$400	\$400											
8/30	\$800	\$800											
10/30	\$800 + \$800	\$1,600											

3. <u>RATE EDIT</u>

This section details the Statistical Data Quality Penalties assessed for Rate Edit errors.

a. Error Penalties

Any company that does not reduce their error percentage to no greater than established rate edit tolerance within the six month timeframe will be assessed a Statistical Data Quality Penalty of \$1 per error record in excess of the tolerance level, with a minimum penalty of \$2,000 assessed. Additionally, a penalty of \$2,000 per month will be assessed for each subsequent month that the error percentage remains uncorrected and a company remains over the rate edit tolerance.

b. Penalty Reduction

A penalty reduction will be granted only if it can be verified that the reported premiums and exposures are correct on a policy or summary level and are not in violation of the Massachusetts Private Passenger Statistical Plan. A penalty will be assessed based upon \$1 per error record for each error record over the established rate edit tolerance with a minimum penalty of \$2,000 being assessed. However, the \$2,000 per month penalty for each subsequent month will not be assessed in this situation.

Section B – Statistical Data Quality Penalties

★ 4. <u>MASSACHUSETTS ANNUAL STATEMENT</u>

A Statistical Data Quality Penalty of \$50 per CAR business day will be assessed for the late submission of Fourth Quarter NAIC Annual Statement filings and corresponding copy of the Massachusetts Annual Statement. Also, a Statistical Data Quality Penalty of \$50 per CAR business day will be assessed for a late Fourth Quarter Massachusetts Annual Statement Reconciliation response until CAR receives the response. Since each company that is affiliated with a group is required to report their statistical data on an individual company number level and is required to report separate Massachusetts Annual Statement data, the Annual Statement penalties will also be assessed on an individual company basis.

5. <u>MASSACHUSETTS AUTOMOBILE INSURANCE EXPENSE CALL</u>

A Statistical Data Quality Penalty of \$50 per CAR business day will be assessed for the late submission of the Massachusetts Automobile Insurance Expense Call.

6. DISPUTED PENALTY FEES

CAR shall maintain its own records for the purpose of determining whether or not a company has submitted all required data. In case of a disagreement regarding whether a company is delinquent in submitting data, the records of CAR shall become the deciding factor. Statistical Data Quality Penalties may be appealed to CAR's Operations Committee. However, it is necessary for the company to pay the penalty amount before such an appeal can be considered. Any company aggrieved by the findings of the Operations Committee may appeal the decision to CAR's Governing Committee. All decisions of the Governing Committee shall be final.

PRIVATE PASSENGER RECORD LAYOUT MODIFICATION KEY

The Private Passenger Record Layout Modification Key should be used in conjunction with the Private Passenger Record Layouts contained on the following pages. The key identifies those fields to which modifications were made in prior policy years. For example, the field may have been reported in an alternate field position, or the field was added to or eliminated from the Private Passenger Record Layout. For reporting instructions for prior effective years, refer to the Massachusetts Private Passenger Automobile Statistical Plan in effect for the specific year (which can be found on CAR's website (www.commauto.com)).

No.	Valid Policy Effective Date(s)	Field	Subline Codes	Reporting Position		
1	1989 through 1995	Intensified Appraisal ID Code	628 Losses	47		
2	1991 and subsequent	Producer Code	All	61 – 66		
3	1995 and prior	Model Year Code	628	43 – 44		
	1995 and subsequent	ZIP Code	All	72 – 80		
4	1995 and subsequent	Vehicle Identification Number	All	131 – 147		
		Model Year Code	All	51 – 52		
5	1996 and subsequent	Rate Departure Factor Code	All Premiums	88 – 90		
6	2001 and subsequent	OEM Coverage Code	628	56		
7	2001 and subsequent Optional 1/1/1999-12/31/2000	Model Year Century Code	All	36		
	2001 and subsequent	Property Damage Limit Code	621	39 – 40		
8	2000 and prior	Property Damage Limit Code	021	40		
	2002 and prior	Class Group Code	All	54		
9	2003 and subsequent	Reserved for Future Use				
60	2002 and prior	Claim Count	All Losses	90		
10	2003 and subsequent	Reserved for Future Use	, 200000			
1	2002 and prior 2003 and subsequent	Estimated Annual Mileage Code Annual Mileage Code	All	48-50		

×

LIABILITY PREMIUM

[.]		1			461	
1	COMPANY OR		51	MODEL YEAR CODE (5)	101	BODILY INJURY
2	GROUP NUMBER C	ODE	52		102	PREMIUM (Continued)
3			53	Reserved for Future Use	103	
4	TRANSACTION TYPE	CODE	54	9	104	
5			55		105	
6	ACCOUNTING	Month	56	PASSIVE RESTRAINT DISC. CODE	106	
7	DATE	Year	57	DISCOUNT CODE	107	PROPERTY DAMAGE
8	POLICY	Month	58		108	PREMIUM
9	EFFECTIVE	Year	59	Reserved for Future Use	109	
10	DATE	Year	60		110	
11	TRANSACTION	Month	61		111	
12	EFFECTIVE	Year	62	112		
13	DATE	Year	63	PRODUCER CODE	113	Reserved for
14	POLICY	Month	64	2	114	Future Use
15	EXPIRATION	Year	65	. e	115	
16	DATE	Year	66		116	
10	5,112	1001	67		117	
17	STATE CODE		68		117	
				Reserved for Future Use		
19	PREMIUM TOWN	N	69	Reserved for Future Use	119	
20	CODE		70		120	
21			71		121	POLICY
22	CAR IDENTIFICATION		72		122	IDENTIFICATION
23	TYPE OF RISK CO	DE	73		123	NUMBER
24	ANNUAL STATEME	NT	74		124	
25	LINE OF BUSINESS (75	ZIP CODE	125	
26			76		126	
27			77	4)	127	
28	SUBLINE CODE		78		128	
29			79		129	
30			80		130	
31			81		131	
32	CLASSIFICATION	N	82		132	
33	CODE	-	83		133	
34			84		134	
35			85	EXPOSURE	135	
			- 00	-	100	
36	MODEL YEAR CENTURY C	ODE 🕜	86		136	
37	BODILY INJURY	,	87		137	VEHICLE
38	LIMITS CODE		88	RATE DEPARTURE FACTOR CODE	138	IDENTIFICATION
39	PROPERTY DAMAGE LIN	IT CODE	89	S	139	NUMBER
40	8		90		140	4
41	MEDICAL PAYMEN	ITS	91		141	
42	LIMIT CODE		92		142	
43	BODILY INJURY CAUSE	D BY AN	93	Reserved for Future Use	143	
44	UNINSURED AUTO LIMIT	IS CODE	94		144	
45	BODILY INJURY CAUSE	D BY AN	95		145	
46	UNDERINSURED AUTO LIN		96		146	
47	Reserved for Future	Use	97	1	147	
48			98	BODILY INJURY	148	
49		1	99	PREMIUM	149	COMPANY USE
50	CODE		100		150	

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

LIABILITY LOSS

2 GROUP NUMBER CODE 62 103 4 TRANSACTION TYPE CODE 53 Reserved for Future Use 103 6 ACCOUNTING Month 55 PARTIAL/TOTAL LOSS INDICATOR 106 7 DATE Year 58 PASSIVE RESTRAINT DISC. CODE 106 7 DATE Year 58 PASSIVE RESTRAINT DISC. CODE 106 11 Month 57 DISCOUNT CODE 106 106 12 ACCIDENT Year 60 101 111 12 Month 62 PRODUCER CODE 113 13 DATE Year 65 116 111 14 DATE Year 65 116 111 14 STATE CODE 67 117 118 114 19 PREMIUM TOWN 70 20 112 111 20 CARIDENTIFICATION CODE 73 219 122 122 24 ANNULLSTATENENT	1	COMPANY OR		51	MODEL YEAR CO	DE (5)	101	
4 TRANSACTION TYPE CODE 55 PARTIAL/TOTAL LOSS INDCATOR 104 5 ACCOUNTING Month 55 PARTIAL/TOTAL LOSS INDCATOR 106 106 7 DATE Year 56 PASSWERSTRAINT DISC. CODE 106 107 106 107 106 107 106 107 106 107 106 107 107 106 107 108 108 109 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 101 </td <td></td> <td>GROUP NUMBER C</td> <td>ODE</td> <td></td> <td></td> <td></td> <td></td> <td></td>		GROUP NUMBER C	ODE					
5 PARTIAL/TOTAL LOSS NDICATOR 105 CLAIM 7 AACCOUNTING Month 56 PASSIVE FESTRAINT INSIC. CODE 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 106 107 107 106 107 106 107 106 107 107 106 107 107 106 107 107 106 107 107 106 107 107 107 107			CODE	-	Reserved for Future	Use (9)		
7 DATE Year 8 POLICY Month 57 DISCOUNT CODE 107 DDENTIFICATION 9 EFFECTIVE Year 66 60 100 100 100 NUMBER (Continued) 11 Month 62 PRODUCER CODE 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111<			CODL	55			105	
8 POLICY Month 9 EFFECTIVE Year 10 DATE Year 11 Month 60 12 ACCIDENT Day 13 DATE Year 16 Reserved for Future Use 113 16 Reserved for Future Use 66 67 68 68 11 The OF RUSK CODE 68 12 CAR IDENTIFICATION CODE 71 13 PREMIUM TOWN 71 22 CAR IDENTIFICATION CODE 77 74 75 ZIP CODE 76 © 72 24 ANNUAL STATEMENT 75 27 SUBLINE CODE 76 28 SUBLINE CODE 77 78 78 79 80 81 Reserved for Future Use 82 REPORTING Year 78 74 75 78 76 ©								CLAIM
9 EFFECTIVE Year 90 Reserved for Future Use 100 100 11 Month Month 61 110 111 12 ACCIDENT Day 62 PRODUCER CODE 111 13 DATE Year 64 © 111 14 DATE Year 66 115 114 15 Reserved for Future Use 67 115 115 16 Reserved for Future Use 67 116 117 19 PREMUM TOWN 68 Reserved for Future Use 119 20 CODE 71 121 120 21 CON CODE 72 122 123 24 ANNUAL STATEMENT 74 124 128 129 23 CUASSIFICATION 82 REPORTING Month 132 133 32 CLASSIFICATION 83 Reserved for Future Use 136 136 33 GOE <td></td> <td></td> <td></td> <td></td> <td>DISCOUNT CODE</td> <td></td> <td></td> <td>IDENTIFICATION</td>					DISCOUNT CODE			IDENTIFICATION
10 DATE Year Month. 11 Month. 60 61 62 13 DATE Day Day 63 PRODUCER CODE 111 13 DATE Day Day 63 PRODUCER CODE 113 14 DATE Year Call 66 0 111 15 Reserved for Future Use 66 0 116 117 18 STATE CODE 66 67 116 118 119 20 COR 71 121 120 121 121 POLICY 23 TYPE OF RISK CODE 73 122 123 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124				-	Reconved for Euture I			NUMBER (Continued)
International construction Month Day Day Day Day Day Day Day Day Day Day					Reserved for Future C	JSE		
12 ACCIDENT DATE Day Vear 62 PRODUCER CODE 112 13 DATE Vear 63 © 113 15 Reserved for Future Use 64 © 113 16 Reserved for Future Use 66 0 114 17 STATE CODE 66 66 117 118 19 PREMIUM TOWN CODE 71 118 114 115 22 CAR IDENTIFICATION CODE 73 74 74 124 124 23 TYPE OF RISK CODE 77 76 127 122 124 24 ANNUAL STATEMENT 74 74 124 124 124 127 78 21P CODE 76 127 128 129 30 GALASSIFICATION CODE 86 RESErved for Future Use 131 132 33 LABILITY LIMITS CODE 86 Reserved for Future Use 131 138 34 ACCIDENT		27.112						
13 ACUBLENT Day PRODUCER CODE 113 14 DATE Year 63 PRODUCER CODE 114 15 Year 66 © 114 114 16 Reserved for Future Use 66 67 66 117 118 114 115 19 PREMIUM TOWN CODE CODE 77 68 Reserved for Future Use 120 121 122 121 122 122 121 122 122 122 123 124 ANNUAL STATEMENT 74 21 122 123 124 NUMBER 122 124 NUMBER 126 127 128 124 NUMBER 126 127 128 124 NUMBER 131 134 132 130 131 131 132 133 134 135 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								
14 Year 64 © 114 15 Year 66 114 16 Reserved for Future Use 66 116 117 18 STATE CODE 68 69 Reserved for Future Use 118 19 PREMIUM TOWN CODE 70 70 120 120 21 CAR IDENTIFICATION CODE 73 74 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 123 124 124 124 124 124 125 136 130 131 132 131 134 132 131 134 132 134 132 134 134 135 136 136 136	13			63	PRODUCER CODE		113	
16 Reserved for Future Use 16 Reserved for Future Use 118 17 STATE CODE 66 67 118 117 18 9 PREMIUM TOWN 66 67 118 117 20 CODE 70 70 121 118 119 22 CAR IDENTIFICATION CODE 73 74 122 123 121 122 122 123 124 124 124 125 126 125 126 127 128 124 126 125 126 126 127 128 129 131 124 128 129 131 134 134 134 134 134 134 134 135 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136	14	DATE	Year	64	2		114	
17 STATE CODE 67 68 117 118 19 PREMIUM TOWN CODE 70 111 120 121 21 CAR IDENTIFICATION CODE 73 121 120 121 23 TYPE OF RISK CODE 73 74 212 123 124 24 ANNUAL STATEMENT 74 75 21P CODE 126 126 27 28 SUBLINE CODE 77 6 128 129 30 31 CLASSIFICATION 80 80 131 132 34 CODE 77 78 133 134 134 135 36 MODEL YEAR CENTURY CODE (?) 83 RESOVED for Future Use 137 134 135 36 MODEL YEAR CENTURY CODE (?) 87 TYPE OF LOSS CODE 137 138 139 133 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 138 139 139 139 139 <t< td=""><td>15</td><td></td><td>Year</td><td>65</td><td></td><td></td><td>115</td><td></td></t<>	15		Year	65			115	
18 STATE CODE 18 STATE CODE 19 PREMIUM TOWN CODE 118 21 CAR IDENTIFICATION CODE 71 22 CAR IDENTIFICATION CODE 71 23 TYPE OF RISK CODE 73 24 ANNUAL STATEMENT 74 25 ANNUAL STATEMENT 75 ZIP CODE 122 27 SUBLINE CODE 76 0 122 124 31 CLASSIFICATION CODE 80 Reserved for Future Use 131 32 CLASSIFICATION CODE 81 Reserved for Future Use 131 34 0 81 Reserved for Future Use 133 34 0 81 Reserved for Future Use 133 36 MODEL YEAR CENTURY CODE 83 TYPE OF LOSS CODE 137 39 Reserved for Future Use 89 Reserved for Future Use 138 40 ACCIDENT TOWN CODE 91 140 142 44 92 93 145 <td>16</td> <td>Reserved for Future</td> <td>Use</td> <td></td> <td></td> <td></td> <td>116</td> <td></td>	16	Reserved for Future	Use				116	
19 PREMIUM TOWN CODE 69 Reserved for Future Use 119 120 21 CODE 70 71 120 120 121 122 122 122 122 122 122 122 122 122 122 122 122 122 122 122 123 124 122 123 124 124 125 126 127 122 123 124 125 126 127 122 123 124 125 126 126 127 128 128 129 129 129 129 129 129 129 129 130 131 131 131 131 131 131 131 132 130 133 134 135 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136		STATE CODE						
20 PREMIUM TOWN CODE 70 70 70 21 CODE 70 71 72 72 72 73 74 72 73 74 72 73 74 74 74 72 73 74 74 74 75 74 76 76 76 76 76 76 76 76 76 76 76 76 77 78 77 78 77 78 77 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 79 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 78 79 78 78 79 78 78 79				-	Departured for First	laa		
21 CODE 71 121 POLICY 22 CAR IDENTIFICATION CODE 73 72 123 124 122 123 124 122 123 124 124 122 123 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 124 125 123 124 124 125 126 127 128 124 125 127 128 129 129 129 129 129 129 129 129 129 130 131 132 133 133 132 133 134 132 133 134 134 135 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136		PREMIUM TOWN	N		Reserved for Future L	ise		
22 CAR IDENTIFICATION CODE 72 73 122 POLICY 23 TYPE OF RISK CODE 73 74 123 124 124 26 JUNE OF RUSINESS CODE 76 29 122 123 NUMBER 26 SUBLINE CODE 76 37 34 126 127 128 129 120 120 121 NUMBER 28 SUBLINE CODE 76 37 38 128 129 120 131 132 133 131 132 133 133 134 132 133 134 133 134 133 134 133 134 133 134 133 134 133 134 133 134 134 134 135 136 136 137 133 134 135 136 136 137 138 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 136 137 138 139 136		CODE						
23 TYPE OF RISK CODE 73 123 IDENTIFICATION 24 ANNUAL STATEMENT 74 75 21P CODE 126 26 SUBLINE SCODE 76 3 126 126 27 SUBLINE CODE 77 3 128 129 30 80 80 81 Reserved for Future Use 131 32 CLASSIFICATION 83 REPORTING Year 134 34 CODE 86 Reserved for Future Use 134 35 86 Reserved for Future Use 134 36 MODEL YEAR CENTURY CODE 87 TYPE OF LOSS CODE 136 38 Reserved for Future Use 138 139 140 3 40 ACCIDENT TOWN 90 Reserved for Future Use 131 141 42 93 94 LOSS AMOUNT 144 141 44 93 94 LOSS AMOUNT 145 146		CAR IDENTIFICATION	CODE					
24 ANNUAL STATEMENT 74 75 ZIP CODE 124 125 26 LINE OF BUSINESS CODE 76 3 125 126 127 28 SUBLINE CODE 78 3 128 128 129 30 31 79 80 127 128 128 32 CLASSIFICATION CODE 81 Reserved for Future Use 131 131 32 CLASSIFICATION CODE 83 REPORTING DATE 132 133 34 0 84 DATE 128 134 35 86 Reserved for Future Use 134 135 36 MODEL YEAR CENTURY CODE 87 TYPE OF LOSS CODE 137 138 36 MODEL YEAR CENTUR USE 89 Reserved for Future Use 131 135 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 138 139 40 ACCIDENT TOWN 90 Reserved for Future Use 140 141 142								
25 LINE OF BUSINESS CODE 75 ZIP CODE 125 26 SUBLINE CODE 76 3 127 28 SUBLINE CODE 77 78 128 29 30 79 80 130 31 A 79 80 131 32 CLASSIFICATION CODE 81 Reserved for Future Use 131 33 CODE 84 DATE Year 133 34 0 86 Reserved for Future Use 136 36 MODEL YEAR CENTURY CODE 86 Reserved for Future Use 136 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 39 Reserved for Future Use 138 139 40 ACCIDENT TOWN 91 92 93 41 A 92 93 143 44 45 Reserved for Future Use 148 144 45 Reserved for Future Use 96 146 146 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>NUMBER</td>								NUMBER
26 76 3 76 126 127 28 SUBLINE CODE 77 78 128 29 79 80 130 131 30 81 Reserved for Future Use 131 32 CLASSIFICATION CODE 83 0 131 34 82 REPORTING Vear Year 134 35 84 0ATE Year 134 36 MODEL YEAR CENTURY CODE ⑦ 86 Reserved for Future Use 136 36 MODEL YEAR CENTURY CODE ⑦ 86 Reserved for Future Use 136 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 39 Reserved for Future Use 138 139 40 ACCIDENT TOWN 91 92 92 92 92 92 93 140 141 42 94 LOSS AMOUNT 145 146 44 95 96 97 148 148	25			75	ZIP CODE		125	
27 SUBLINE CODE 77 28 SUBLINE CODE 78 29 79 80 31 80 128 32 CLASSIFICATION CODE 81 Reserved for Future Use 83 DATE Year Year Year 133 34 85 Reserved for Future Use 36 MODEL YEAR CENTURY CODE (?) 86 37 LIABILITY LIMITS CODE 87 38 LIABILITY LIMITS CODE 87 39 Reserved for Future Use 136 90 Reserved for Future Use 137 138 139 40 ACCIDENT TOWN CODE 87 90 Reserved for Future Use (*) 140 92 93 94 LOSS AMOUNT 144 145 46 96 97 98	26	LINE OF BOSINESS C	JODL	76	@		126	
29 79 129 30 31 6 CLASSIFICATION 80 131 32 CLASSIFICATION 81 Reserved for Future Use 131 33 CODE 82 REPORTING Month 33 CODE 83 DATE Year 133 34 35 84 DATE Year 134 35 MODEL YEAR CENTURY CODE ⑦ 86 Reserved for Future Use 136 36 MODEL YEAR CENTURY CODE ⑦ 86 Reserved for Future Use 136 39 Reserved for Future Use 137 138 139 40 ACCIDENT TOWN 89 Reserved for Future Use ⑩ 140 41 CODE 91 141 141 42 93 94 LOSS AMOUNT 144 44 94 LOSS AMOUNT 148 144 45 96 97 98 140	27			77	Ð		127	
30 80 31 CLASSIFICATION 80 32 CLASSIFICATION 81 Reserved for Future Use 33 CODE 81 Reserved for Future Use 131 34 35 84 Month 132 34 35 84 DATE Year 133 36 MODEL YEAR CENTURY CODE 86 Reserved for Future Use 136 137 36 MODEL YEAR CENTURY CODE 86 Reserved for Future Use 136 137 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 138 139 39 Reserved for Future Use 89 Reserved for Future Use 140 40 41 42 90 Reserved for Future Use 141 142 143 44 Reserved for Future Use 91 92 93 94 94 143 144 45 Reserved for Future Use 96 97 148 148		SUBLINE CODE						
31 32 CLASSIFICATION CODE 81 Reserved for Future Use 131 33 CDE 82 REPORTING DATE Month Year 132 34 35 MODEL YEAR CENTURY CODE 7 84 DATE Year 133 36 MODEL YEAR CENTURY CODE 7 86 Reserved for Future Use 136 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 138 39 Reserved for Future Use 90 Reserved for Future Use 138 139 40 ACCIDENT TOWN CODE 91 90 Reserved for Future Use 141 41 CODE 93 94 LOSS AMOUNT 144 145 46 96 97 98 148 148 148								
32 CLASSIFICATION CODE 82 Month DATE Month Year 132 34 34 35 84 DATE Year 133 36 MODEL YEAR CENTURY CODE (7) 86 Reserved for Future Use 136 136 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 138 139 39 Reserved for Future Use 89 Reserved for Future Use 139 140 141 40 ACCIDENT TOWN CODE 90 Reserved for Future Use (14) 140 141 41 CODE 93 94 LOSS AMOUNT 141 142 43 94 LOSS AMOUNT 146 147 46 97 98 148 148					Deserved for Extract	1		
33 CODE 83 REPORTING DATE Year 133 34 35 0 0 0 134 134 35 36 MODEL YEAR CENTURY CODE (?) 86 Reserved for Future Use 136 134 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 138 139 39 Reserved for Future Use 89 Reserved for Future Use 139 139 40 ACCIDENT TOWN CODE 91 92 93 140 141 42 93 94 LOSS AMOUNT 143 144 45 Reserved for Future Use 96 140 141 94 LOSS AMOUNT 148 144			N		Reserved for Future L			
34 35 Addition Additio			N					
36 MODEL YEAR CENTURY CODE 86 Reserved for Future Use 136 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 138 39 Reserved for Future Use 89 TYPE OF LOSS CODE 138 139 40 ACCIDENT TOWN CODE 90 Reserved for Future Use 140 44 42 93 94 LOSS AMOUNT 141 44 45 Reserved for Future Use 95 146 141 46 97 98 148 148				-	DATE			
36 MODEL YEAR CENTURY CODE () 86 136 37 LIABILITY LIMITS CODE 87 TYPE OF LOSS CODE 137 38 39 Reserved for Future Use 89 138 139 40 ACCIDENT TOWN CODE 90 Reserved for Future Use (0) 140 44 42 91 92 93 140 44 44 94 LOSS AMOUNT 144 443 45 Reserved for Future Use 96 97 146 147 48 98 98 148 148 148								
37 LIABILITY LIMITS CODE 67 TYPE OF LOSS CODE 137 IDENTIFICATION 38 39 Reserved for Future Use 88 7 138 139 138 139 40 ACCIDENT TOWN 90 Reserved for Future Use 10 140 39 140 39 140 39 140 39 140 39 140 39 140 39 140 39 140 39 140 39 140 39 39 141 39 39 140 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 39 30	36	MODEL YEAR CENTURY	CODE 🕖	86	Reserved for Future L	lse	136	
39 Reserved for Future Use 89 Reserved for Future Use 139 NUMBER 40 ACCIDENT TOWN CODE 90 Reserved for Future Use 140 140 44 42 91 92 93 94 144 142 143 44 94 LOSS AMOUNT 144 144 144 144 45 Reserved for Future Use 95 146 146 147 48 98 98 148 148 148 148		LIABILITY LIMITS CO	ODE		TYPE OF LOSS COL	DE		IDENTIFICATION
40 ACCIDENT TOWN CODE 90 140 140 41 CODE 91 92 93 94 93 94 94 144 141 45 Reserved for Future Use 96 96 97 146 48 98		Reserved for Future	Use		_			NUMBER
41 CODE 91 42 92 43 93 44 93 44 94 45 96 97 141 48 98	40		NI	90	Reserved for Future U	se (10)	140	4
42 92 43 93 44 93 44 94 45 96 96 97 48 98	41		IN .	91			141	
44 94 LOSS AMOUNT 144 45 46 95 145 46 96 96 146 47 98 147 148								
45 Reserved for Future Use 95 LOSS AMOUNT 145 46 96 96 146 146 47 97 147 147				-				
46 96 146 47 97 147 48 98 148		Poppried for Friting		-	LOSS AMOUNT			
47 97 147 48 98 148 148		Reserved for Future	USE					
48 98								
49 ★ ANNUAL MILEAGE (1) 99 CLAIM IDENTIFICATION 149 COMPANY USE		ANNUAL MILEAG	e 11		CLAIM IDENTIFICATI	ON		COMPANY USE
50 CODE 100 NUMBER 150		CODE						

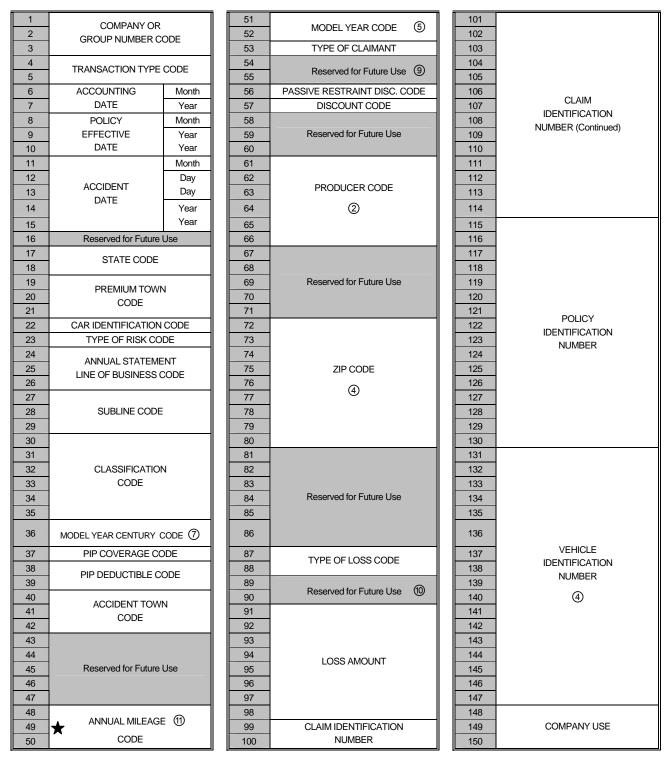
Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

NO-FAULT PREMIUM

1 2	COMPANY OR GROUP NUMBER CO	ODF	51 52	MODEL YEAR CODE (5)	101 102	PIP (NO-FAULT) PREMIUM (Continued)
3 4	TRANSACTION TYPE		53 54	Reserved for Future Use (9)	103 104	
5 6	ACCOUNTING	Month	55 56	PASSIVE RESTRAINT DISC. CODE	105 106	
7	DATE	Year	57	DISCOUNT CODE	107	
8	POLICY	Month	58		108	
9	EFFECTIVE	Year	59	Reserved for Future Use	109	Reserved for Future Use
10	DATE	Year	60		110	
11	TRANSACTION	Month	61		111	
12	EFFECTIVE	Year	62	PRODUCER CODE	112	
13	DATE	Year	63		113	
14	POLICY	Month	64	2	114	
15	EXPIRATION	Year	65		115	
16	DATE	Year	66		116	
17	STATE CODE		67		117	
18 19			68 69	Reserved for Future Use	118 119	
20	PREMIUM TOWN	١	69 70	Reserved for Fullule Use	119	
20	CODE		70		120	
21	CAR IDENTIFICATION	CODE	72		121	POLICY
22	TYPE OF RISK CO		72		123	IDENTIFICATION
24			74		124	NUMBER
25	ANNUAL STATEME		75	ZIP CODE	125	
26	LINE OF BUSINESS C	CODE	76		126	
27			77	4	127	
28	SUBLINE CODE		78		128	
29			79		129	
30			80		130	
31			81		131	
32	CLASSIFICATION	١	82		132	
33	CODE		83		133	
34			84	EXPOSURE	134	
35			85		135	
36	MODEL YEAR CENTURY C		86		136	
37	PIP COVERAGE CC	DE	87		137	VEHICLE IDENTIFICATION
38	PIP DEDUCTIBLE CO	DDE	88	RATE DEPARTURE FACTOR CODE	138	NUMBER
39			89 90	5	139	-
40					140	4
41					141	
42 43				Reserved for Future Use	142 143	
43	Reserved for Future	Use	93 94	Reserved for Fullule Use	143	
44			94		144	
48			98	PIP (NO-FAULT)	148	
		e 1)	99	PREMIUM	149	COMPANY USE
50	CODE		100		150	
49	ANNUAL MILEAG	E 11)	99	PIP (NO-FAULT) PREMIUM	149	COMPANY USE

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

NO-FAULT LOSS



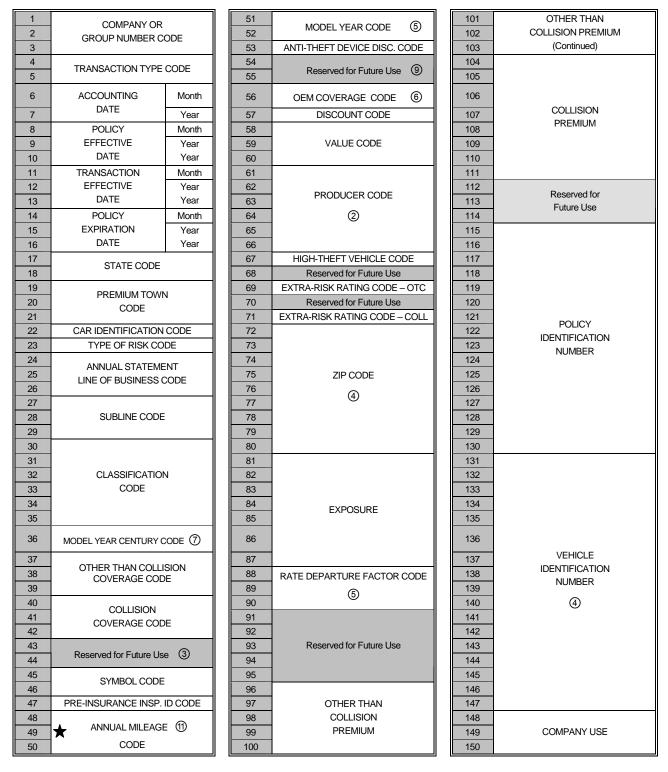
Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Last Revision Date: 01/01/2003

Page: VIII:5

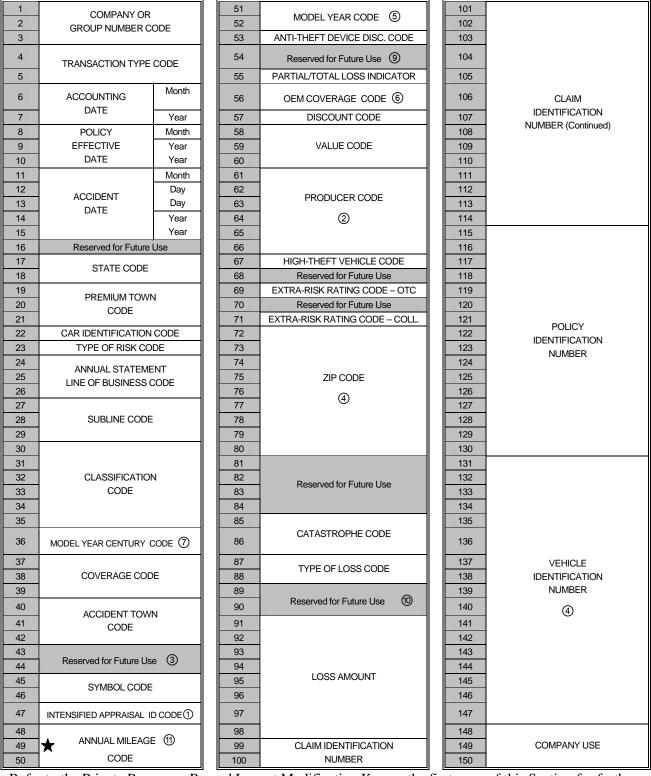
Print Date: 03/14/2003

PHYSICAL DAMAGE PREMIUM



Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

PHYSICAL DAMAGE LOSS



Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Massachusetts Private Passenger Automobile Statistical Plan Index

A

Accident Date, V:1–V:2, V:7–V:8, V:13–V:14 Accident Reporting, III:8 Accident Town Code, V:3, V:9, V:15 Accident Town Tables *See* Premium Town Tables Accounting Date, IV:1, IV:7, IV:13, V:1, V:7, V:13 Adjustments, II:4 Allocated Loss Adjustment Expenses (ALAE), III:9–III:10 Annual Mileage Code, IV:3, IV:9, IV:15, V:3, V:9, V:15, VI:15 Annual Statement Line of Business Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:5 Anti-Theft Device Discount Code, IV:15, V:16, VI:41

С

CAR Identification Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:3 Catastrophe Code, V:18 Claim Definition, III:6 Claim Identification Number, V:6, V:11–V:12, V:18-19, VI:25 reporting of, III:8 Classification Code, IV:3, IV:9, IV:15, V:3, V:9, V:15 assignment of statistical classification, VI:7 Miscellaneous Rated As Private Passenger, VI:10 Non-Owned Automobiles, VI:13 Private Passenger, VI:8-VI:9 Private Passenger Motorcycles, VI:11 - VI:12 Special Rating and Adjustment, VI:13 Collision Coverage Code, IV:15, VI:36 Companies in a Run-Off Position, II:2 Company (Group) Number Code, IV:1, IV:7, IV:13, V:1, V:7, V:13 Coverage Code, V:15

D

Data Reporting Requirements, II:2–II:4, II:3, II:4 alphanumeric/numeric coding, II:3 consolidated shipment reporting, II:3 monthly/quarterly submissions, II:3 reporting of spaces, II:3

D (continued)

Decision Tables Table of Required Fields, A:1 Classification Code Decision Table, A:2 Coverage Code Decision Table, A:3 Discount Code, IV:4, IV:10, IV:16, V:4, V:10, V:16, VI:20

E

Effective Date of the Plan, I:2 Endorsements reporting changes in coverage, III:1–III:2 as of policy effective date, III:1 subsequent to policy effective date, III:2 Exposure, IV:5, IV:10, IV:17, VI:23 reporting of exposure, III:1 Extent of Vehicle Loss. *See* Partial/Total Loss Indicator Extra-Risk Rating, III:4, III:13 Extra-Risk Rating Code, V:17 Collision, IV:17, VI:45 Other Than Collision, IV:16, V:17, VI:44

G

Glass Losses, III:13

H

High-Theft Vehicle Code, IV:16, V:17, VI:43

I

Installment Policies, III:5 Intensified Appraisal Identification Code, V:15, VI:40 Intercompany Reimbursement of PIP Claims, III:10–III:11 Intracompany Reimbursement of PIP Claims, III:11

Massachusetts Private Passenger Automobile Statistical Plan Index

L

Liability Limits Codes, IV:3, VI:28 BI Caused by an Underinsured Auto Limits Code, IV:3 BI Caused by an Uninsured Auto Limits Code, IV:3 Liability Limits Codes Bodily Injury Limit Code, IV:3 Liability Limits Code (Losses), V:3 Medical Payments Limit Code, IV:3 Property Damage Limit Code, IV:3 Limits in Excess (LEX) Records, VII:3 Loss Amount, V:6, V:11, V:18 Loss Requirements, III:6–III:13 reporting of losses, III:6 Low Volume Companies, II:1, VII:2 eligibility, II:1 non-compliance penalties, VII:8

Μ

Massachusetts Annual Statement Page 15, II:2 non-compliance penalties, VII:10 reconciliation of, II:2, VII:6 Massachusetts Automobile Insurance Expense Call, II:2, VII:6 non-compliance penalties, VII:10 Model Year Century Code, IV:3, IV:9, IV:15, V:3, V:9, V:15, VI:14 Model Year Code, IV:4, IV:9, IV:15, V:4, V:9, V:16, VI:16 Multiple Year Policies, III:5

Ν

Newly Reporting Companies, II:1, VII:1 Nil Submission, II:1, VII:2 associated penalties, VII:7

0

OEM Coverage Code, III:1, IV:16, V:16, VI:42 Other Than Collision Coverage Code, IV:15, VI:34 miscellaneous coverages, VI:35 Outstanding Losses, III:13

Р

Partial/Total Loss Indicator, III:13, V:4, V:16, VI:18 Passive Restraint Device Discount Code, IV:4, IV:10, V:4, V:10, VI:19 PIP Coverage Code, IV:9, V:9, VI:30 PIP Deductible Code, IV:9, V:9, VI:31 Policy Effective Date, IV:1, IV:7, IV:13, V:1, V:7, V:13 Policy Expiration Date, IV:2, IV:8, IV:14 Policy Extension, III:5 Policy Identification Number, IV:6, IV:11, IV:18, V:6, V:12, V:19, VI:26 Pre-Insurance Inspection Identification Code, IV:15, VI:39 **Premium Amounts** Bodily Injury Premium Amount, IV:5 Collision Premium Amount, IV:18 Other Than Collision Premium Amount, IV:17 PIP (No-Fault) Premium Amount, IV:11 Property Damage Premium Amount, IV:6 Premium Requirements, III:1-III:5 premium cancellation, III:2-III:3 flat cancellation, III:2 pro rata cancellation, III:3 short rate cancellation, III:3 reporting of premiums, III:1 Premium Town Code, IV:2, IV:8, IV:14 Premium Town Tables, B:1-14 Alphabetical Listing, B:1-7 Numerical Listing, B:8-14 Producer Code, IV:4, IV:10, IV:16, V:4, V:10, V:17, VI:21

R

Rate Departure Factor Code, IV:5, IV:11, IV:17, VI:24 Rate Deviations, III:5 Rate Edit appeal process, VII:5 associated penalties, VII:9 error tolerances, VII:5 penalty reduction, VII:9

Massachusetts Private Passenger Automobile Statistical Plan Index

R (continued)

Record Layout Modification Key, VIII:1 Record Layouts Liability Loss, VIII:3 Liability Premium, VIII:2 No-Fault Loss, VIII:5 No-Fault Premium, VIII:4 Physical Damage Loss, VIII:7 Physical Damage Premium, VIII:6 Reinsurance, II:4 Reporting Date, V:5 Reporting Thresholds, II:1, VII:1 non-compliance penalties, VII:7 Risks Ceded to Commonwealth Automobile Reinsurers, II:4

S

Safe Driver Insurance Plan (SDIP), III:4 Salvage Recoveries/Expenses, III:12 Shipment Due Dates, VII:2 State Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:2 Statistical Data Quality Program Components, VII:1-VII:6 Penalties, VII:7-VII:10 Statistical Error Listings acceptability, VII:4 due dates, VII:4 insufficient volume of corrections applied, VII:9 late return of corrections, VII:9 low volume, VII:4-VII:5 Statistical Submissions acceptability criteria, VII:3 late and unacceptable shipments, VII:8 company responsibilities, VII:1 Subline Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:6 Subrogation Recoveries/Expenses, III:12 allocated loss adjustment expense recoveries, III:12 indemnity recoveries, III:11–III:12 Symbol Code, IV:15, V:15, VI:37

Т

Transaction Effective Date, IV:1, IV:7, IV:13 Transaction Type Code, IV:1, IV:7, IV:13, V:1, V:7, V:13, VI:1 Turnaround Time Commitment, VII:2 Type of Claimant Code, V:10, VI:32 Type of Loss Code, V:5, V:11, V:18 liability, VI:29 physical damage collision, VI:46 other than collision, VI:46 PIP (no-fault), VI:33 Type of Risk Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:4

U

Unallocated Loss Adjustment Expenses, III:10 Updates to the Plan, I:2

V

Value Code, V:16, VI:38 Vehicle Identification Number, IV:6, IV:12, IV:18, V:6, V:12, V:19, VI:27 VIN. *See* Vehicle Identification Number

Z

ZIP Code, IV:5, IV:10, IV:17, V:5, V:11, V:17, VI:22

Massachusetts Private Passenger Automobile Statistical Plan

Appendix A - Classification and Coverage Code Decision Tables

CLASSIFICATION CODE DECISION TABLE

• Reporting of Anti-Theft Device Discount Code for the Private Passenger Motorcycle classifications (0408##, 0409##, 041###, 0608##, 0609## and 061###) is optional for policies effective 1/1/2003 – 12/31/2003 and mandatory for policies effective 1/1/2004 and subsequent.

Classification Code		Rating Class	Accident Town Code	Anti-Theft Device Discount	Coverage Code (Phys. Dam.)	Discount Code	Annual Mileage Code	Exposure	Extra-Risk Rating Codes	High-Theft Vehicle Code	Intensified Appraisal Code	Limits Codes (Liability)	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Passive Restraint Device	Pre-Insurance Insp. ID Code	Premium Town Code	Rate Departure Factor Code	Symbol Code	Type of Risk Code	Value Code	Vehicle Identification	ZIP Code
###1	##	10	Υ	Υ	Υ	Υ	Υ	Y	Y	Y	Y	Υ	Y	Y	Y	Y	Y	Y	Υ	Y	Y	Y	Ν	Y	Υ
###2	2##	15	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
###3	3##	17	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
###4	4##	18	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
###	5##	30	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
###6	6##	20	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
###7	7##	21	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
###8	3##	25	Y	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Y
###9	9##	26	Y	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Y
0400	-		Υ	Ν	Υ	Ν	Ν	Υ	Υ	Y	Υ	Υ	Ν	Ν	Y	Υ	Ν	Y	Y	Y	Ν	Υ	Ν	Υ	Y
041# 0420 0427 043# 0509 052# 0537 0609	3##, 040 ### 7## - 042 ###, 050 9##, 053 ###, 060 9##, 061 ###, 063	25## 29## 8## 0## 8## ###	Y	Y	Y	Y	N	Y	Y	Y	N	Y	Y	Y	N	Y	N	N	Y	Y	N	Y	Y	Y	Y
0426	600		Υ	Ν	Υ	Ν	Ν	Υ	Υ	Υ	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Υ	Ν	Υ	Ν	Ν	Υ
0453	-		Υ	Ν	Y	Ν	Ν	Y	Y	Y	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Y	Y	Ν	Y	Ν	Υ	Υ
045			Υ	Ν	Υ	Ν	Ν	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Ν	Y	Υ	Υ	Υ	Υ	Ν	Υ	Υ
0459	-		Υ	Ν	Υ	Ν	Ν	Υ	Υ	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Υ	Ν	Υ	Ν	Υ	Υ
0483			Υ	Ν	Υ	Ν	Ν	Υ	Υ	Y	Υ	Υ	Ν	Ν	Ν	Υ	Ν	Y	Υ	Υ	Ν	Y	Ν	Υ	Y
049			Υ	Ν	Υ	Ν	Ν	Υ	Υ	Υ	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Υ	Ν	Υ	Ν	Ν	Υ
0539			Υ	Υ	Υ	Ν	Ν	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν	Υ	Υ
1900			Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
7000			Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Υ	Ν	Ν	Ν
8000			Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Υ	Ν	Ν	Ν
9020			Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Y	Ν	Ν	Ν
9980	000		Ν	Ν	Y	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Y	Ν	Y	Ν	Ν	Ν

★ ★

★

Massachusetts Private Passenger Automobile Statistical Plan

Appendix A - Classification and Coverage Code Decision Tables

COVERAGE CODE DECISION TABLE

• For all shaded areas, refer to the Classification Code Decision Table

Applicable to Physical Damage records

Other Than Collision																					
Coverage Code	Accident Town Code	Anti-Theft Device Discount	Classification Code	Discount Code	Annual Mileage	Exposure	Extra-Risk Rating Code	High-Theft Vehicle Code	Intensified Appraisal Code	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Pre-Insurance Insp. ID Code	Premium Town Code	Type of Risk	Symbol Code	Rate Departure Factor	Value Code	Vehicle Identification Number	ZIP Code
056,057	Ν	N	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	N	N	Z	N	Ν	Y	Ν	Y	N	N	Ν
060,063			Υ							Ν	Ν					Y		Υ			
080 - 082	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	N	Ν	Ν	Ν	Ν	Ν	Ν	Ν
083-087	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	N	Ν	Ν	Ν	Ν	Ν	Ν	Ν
089	Ν	Ν	Y	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
Other OTC Cov.			Y													Y		Y			

								C	Colli	sion	1										
Coverage Code	Accident Town Code	Anti-Theft Device Discount	Classification Code	Discount Code	Annual Mileage	Exposure	Extra Risk-Rating Code	High-Theft Vehicle Code	Intensified Appraisal Code	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Pre-Insurance Insp. ID Code	Premium Town Code	Type of Risk	Symbol Code	Rate Departure Factor	Value Code	Vehicle Identification Number	ZIP Code
012-019		Ν	Υ													Y		Y			
041		Ν	Υ				Ν			Ν	Ν					Y		Y			
040, 042- 049		Ν	Y				Ν									Y		Y			
072-079		Ν	Υ													Y		Y			
092		Ν	Y							Ν	Ν					Y		Y			
096,097	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Y	Ν	Υ	Ν	Ν	Ν
099	Ν	Ν	Y	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν

Last Revision Date: 01/01/2003

Page: A:3

Print Date: 03/14/2003

Massachusetts Private Passenger Automobile Statistical Plan

Appendix A - Classification and Coverage Code Decision Tables

TABLES OF REQUIRED PRIVATE PASSENGER FIELDS

The fields identified below are required to be reported on all private passenger statistical records and are therefore not listed in the Decision Tables contained on the following pages. For all other fields not noted below, refer to the Classification Code and Coverage Code Decision Tables to determine which fields are required to be reported.

×	

Fields Common to All Records						
Accounting Date						
Annual Statement Line of Business Code						
CAR Identification Code						
PIP Coverage Code (No-Fault)						
PIP Deductible Code (No-Fault)						
Policy Effective Date						
Policy Identification Code						
Producer Code						
State Code						
Subline Code						
Transaction Type Code						

Fields Common to Premium Records Only Policy Expiration Date Premium Amounts Transaction Effective Date

Fields	Common	to	Loss	Records	Only	
1						

Accident Date Catastrophe Code (Physical Damage) Claim Identification Number Loss Amount Reporting Date (Liability) Type of Claimant Code (No-Fault) Type of Loss Code

PREMIUM TOWN CODE - ACCIDENT TOWN CODE

ALPHABETICAL LISTING

- 1. Cities and Towns are printed in Capital Letters.
- 2. Villages, Sections of Cities and Towns, and Local Designations are printed in Small Type with the name of the corresponding City or Town in the adjacent column.
- 3. Sections of Cities and Towns designated "North", "East", "South" and "West" or with a prefix or suffix that is merely supplemental to the principal name (such as West Newton or Arlington Heights) are not separately listed (see principal designation). In some instances there are two distinct townships, such as Reading and North Reading, in which case both towns are listed.
- 4. Counties are indicated by code, using the first position of the Town Code as follows:

First Position	County	First Position	County
0	Barnstable	4	Franklin
	Dukes		Hampden
	Nantucket	5	Hampshire
	Plymouth	6	Middlesex
1	Berkshire	7	Norfolk
2	Bristol	8	Suffolk
3	Essex	9	Worcester

5. The City of Boston is divided into sections as follows:

City of Boston						
Definition	ZIP Code	Statistical Code				
BOSTON CENTRAL	02101-02118, 02123, 02133, 02199, 02201, 02202, 02203, 02210, 02215, 02241	821				
BRIGHTON	02134, 02135, 02163	822				
CHARLESTOWN-EAST BOSTON	02128, 02129	824				
DORCHESTER	02122, 02124, 02125, 02126	819				
HYDE PARK	02136, 02137	818				
JAMAICA PLAIN	02130	817				
ROSLINDALE	02131	816				
ROXBURY	02119, 02120, 02121	820				
SOUTH BOSTON	02127	823				
WEST ROXBURY	02132	815				

6. The appropriate Out of State Town Codes are as follows:

Location	Code
Connecticut	991
Maine	992
New Hampshire	993
New York	994
Rhode Island	995
Vermont	996
Other	999

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
		•	933	BERLIN	BERLIN
	Α		471	BERNARDSTON	BERNARDSTON
010	ABINGTON	ABINGTON	312	BEVERLY	BEVERLY
041	Accord	NORWELL	634	BILLERICA	BILLERICA
240	Acoaxet	WESTPORT	719	Bird Mills	WALPOLE
630	ACTON	ACTON	112	Blackington	NORTH ADAMS
230	ACUSHNET	ACUSHNET	934	BLACKSTONE	BLACKSTONE
110	ADAMS	ADAMS	490	BLANDFORD	BLANDFORD
215	Adamsdale	NORTH ATTLEBORO	970	BOLTON	BOLTON
431	Adamsville	COLRAIN	423	Bondsville	PALMER
420	AGAWAM	AGAWAM	821	BOSTON (Central)	BOSTON (Central)
170	ALFORD	ALFORD	050	BOURNE	BOURNE
035	Allerton	HULL	050	Bournedale	BOURNE
822	Allston	BRIGHTON (Boston)	201	Bowenville	FALL RIVER
310	AMESBURY	AMESBURY	671	BOXBOROUGH	BOXBOROUGH
510	AMHERST	AMHERST	370	BOXFORD	BOXFORD
311	ANDOVER	ANDOVER	971	BOYLSTON	BOYLSTON
314	Annisquam	GLOUCESTER	302	Bradford	HAVERHILL
040	Antassawamock Neck	MATTAPOISETT	532	Bradstreet	HATFIELD
610	ARLINGTON	ARLINGTON	637	Braggville	HOLLISTON
333	Asbury Grove	HAMILTON	710	BRAINTREE	BRAINTREE
930	ASHBURNHAM	ASHBURNHAM	039	Brant Rock	MARSHFIELD
670	ASHBY	ASHBY	080	BREWSTER	BREWSTER
712	Ashcroft	DEDHAM	011	BRIDGEWATER	BRIDGEWATER
470	ASHFIELD	ASHFIELD	183	Brier	SAVOY
631	ASHLAND	ASHLAND	131	Briggsville	CLARKSBURG
137	Ashley Falls	SHEFFIELD	822	BRIGHTON	BRIGHTON (Boston)
033	Assinippi	HANOVER	400	Brightwood	SPRINGFIELD
233	Assonet	FREETOWN	491	BRIMFIELD	BRIMFIELD
910	ATHOL	ATHOL	002	BROCKTON	BROCKTON
703	Atlantic	QUINCY	935	BROOKFIELD	BROOKFIELD
210	ATTLEBORO	ATTLEBORO	702	BROOKLINE	BROOKLINE
215	Attleboro Falls	NORTH ATTLEBORO	735	Brookville	HOLBROOK
931	AUBURN	AUBURN	042	Bryantville	PEMBROKE
605	Auburndale	NEWTON	430	BUCKLAND	BUCKLAND
715	Avery	NEEDHAM	635	BURLINGTON	BURLINGTON
730	AVON	AVON	034	Burrage	HANSON
632	AYER	AYER	050	Buzzards Bay	BOURNE
302	Ayers Village	HAVERHILL	339	Byfield	NEWBURY
002					NEWBORT
	В			С	
956	Baldwinville	TEMPLETON	600	CAMBRIDGE	CAMBRIDGE
311	Ballard Vale	ANDOVER	102	Camp Merrill	PITTSFIELD
576	Bancroft	MIDDLEFIELD	002	Campello	BROCKTON
900	Barbers	WORCESTER	711	CANTON	CANTON
021	BARNSTABLE	BARNSTABLE	672	CARLISLE	CARLISLE
932	BARRE	BARRE	933	Carters	BERLIN
234	Barrowsville	NORTON	030	CARVER	CARVER
062	Bass River	YARMOUTH	731	Caryville	BELLINGHAM
512	Bay State Village	NORTHAMPTON	050	Cataumet	BOURNE
322	Beach Bluff	SWAMPSCOTT	021	Centerville	BARNSTABLE
803	Beachmont	REVERE	240	Central Village	WESTPORT
171	BECKET	BECKET	472	CHARLEMONT	CHARLEMONT
633	BEDFORD	BEDFORD	715	Charles River Village	NEEDHAM
732	Beechwood	COHASSET	824	CHARLESTOWN	CHARLESTOWN (Bos)
530	BELCHERTOWN	BELCHERTOWN	936	CHARLTON	CHARLTON
731	BELLINGHAM	BELLINGHAM	234	Chartley	NORTON
611	BELMONT	BELMONT	051	СНАТНАМ	CHATHAM
231	BERKLEY	BERKLEY	051	Chathamport	CHATHAM
134	Berkshire	LANESBOROUGH	612	CHELMSFORD	
134	DEIV9IIIE	LANESBOROUGH	012		CHELMSFORD

Last Revision Date: 01/01/2000

802 944		Name	No	Designation	Name
	CHELSEA	CHELSEA		E	•
400	Cherry Valley	LEICESTER			
130	CHESHIRE	CHESHIRE	824	East Boston	CHARLESTOWN (Bos)
440	CHESTER	CHESTER	032	EAST BRIDGEWATER	EAST BRIDGEWATER
570	CHESTERFIELD	CHESTERFIELD	973	EAST BROOKFIELD	EAST BROOKFIELD
402	CHICOPEE	CHICOPEE	441	EAST LONGMEADOW	EAST LONGMEADOW
081	CHILMARK	CHILMARK	082	EASTHAM	EASTHAM
014	Chiltonville	PLYMOUTH	511	EASTHAMPTON	EASTHAMPTON
739	City Mills	NORFOLK	212	EASTON	EASTON
131	CLARKSBURG	CLARKSBURG	212	Eastondale	EASTON
178	Clayton	NEW MARLBOROUGH	053	EDGARTOWN	EDGARTOWN
021	Clement	BARNSTABLE	603 172	Edgeworth EGREMONT	MALDEN EGREMONT
200	Clifford	NEW BEDFORD	044		SCITUATE
316	Clifton	MARBLEHEAD	712	Egypt Ellis	DEDHAM
321	Cliftondale	SAUGUS	431		COLRAIN
911	CLINTON Cooperant		032	Elmgrove Elmwood	EAST BRIDGEWATER
045 649	Cochessett	WEST BRIDGEWATER	712	Endicott	DEDHAM
649 732	Course	WAYLAND	433	ERVING	ERVING
	COHASSET	COHASSET	330	ESSEX	ESSEX
976	Coldbrook Spring	OAKHAM WESTFORD	602	EVERETT	EVERETT
650	Coldspring		002		EVEREIT
614 431	Collinsville COLRAIN	DRACUT COLRAIN		F	
613	CONCORD	CONCORD	213	FAIRHAVEN	FAIRHAVEN
444	Congamond	SOUTHWICK	402	Fairview	CHICOPEE
444 473	CONWAY	CONWAY	201	FALL RIVER	FALL RIVER
480	Cooleyville	NEW SALEM	054	FALMOUTH	FALMOUTH
952	Cordaville	SOUTHBOROUGH	433	Farley	ERVING
021	Cotuit	BARNSTABLE	130	Farnhams	CHESHIRE
616	Cove Landing	HUDSON	913	Farnumsville	GRAFTON
021	Craigville	BARNSTABLE	603	Faulkner	MALDEN
021	Cummaquid	BARNSTABLE	952	Fayville	SOUTHBOROUGH
571	CUMMINGTON	CUMMINGTON	420	Feeding Hills	AGAWAM
342	Cushing	SALISBURY	621	Felchville	NATICK
510	Cushman	AMHERST	712	Findlen	DEDHAM
084	Cuttyhunk	GOSNOLD	913	Fisherville	GRAFTON
			954	Fiskdale	STURBRIDGE
	D		902	FITCHBURG	FITCHBURG
132	DALTON	DALTON	201	Flint	FALL RIVER
313	DANVERS	DANVERS	512	Florence	NORTHAMPTON
313	Danversport	DANVERS	173	FLORIDA	FLORIDA
211	DARTMOUTH	DARTMOUTH	060	Forestdale	SANDWICH
481	Davis	ROWE	650	Forge Village	WESTFORD
712	DEDHAM	DEDHAM	734	FOXBOROUGH	FOXBOROUGH
432	DEERFIELD	DEERFIELD	615	FRAMINGHAM	FRAMINGHAM
476	Dell	HEATH	713	FRANKLIN	FRANKLIN
052	DENNIS	DENNIS	233	FREETOWN	FREETOWN
052	Dennisport	DENNIS	311	Frye Village	ANDOVER
232	DIGHTON	DIGHTON	939	Furnace	HARDWICK
936	Dodge	CHARLTON		G	
210	Dodgeville	ATTLEBORO	040		
819	DORCHESTER	DORCHESTER (Boston)	912	GARDNER	GARDNER
937	DOUGLAS	DOUGLAS	083	GAY HEAD	GAY HEAD
733	DOVER	DOVER	331	GEORGETOWN	GEORGETOWN
614	DRACUT	DRACUT	939	Gilbertville	HARDWICK
173	Drury	FLORIDA	474	GILL	GILL
938	DUDLEY	DUDLEY	644	Gleasondale	STOCKERIDGE
673	DUNSTABLE	DUNSTABLE	138 604	Glendale Glenwood	STOCKBRIDGE MEDFORD
			nu4		
031 530	DUXBURY Dwight	DUXBURY BELCHERTOWN	919	Globe Village	SOUTHBRIDGE

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
573	GOSHEN	GOSHEN	021	Hyannis	BARNSTABLE
084	GOSNOLD	GOSNOLD	021	Hyannisport	BARNSTABLE
913	GRAFTON	GRAFTON	818	HYDE PARK	HYDE PARK (Boston)
574	GRANBY	GRANBY			• · · ·
650	Graniteville	WESTFORD			
492	GRANVILLE	GRANVILLE	400	Indian Orchard	SPRINGFIELD
111	GREAT BARRINGTON	GREAT BARRINGTON	403	Ingleside	HOLYOKE
039	Green Harbor	MARSHFIELD	138	Interlaken	STOCKBRIDGE
044	Greenbush	SCITUATE	315	IPSWICH	IPSWICH
900	Greendale	WORCESTER	031	Island Creek	DUXBURY
410	GREENFIELD	GREENFIELD	742	Islington	WESTWOOD
624	Greenwood	WAKEFIELD		J	
112	Greylock	NORTH ADAMS			
431	Griswoldville	COLRAIN	817	JAMAICA PLAIN	JAMAICA PLAIN (Bos)
636	GROTON	GROTON	940	Jefferson	HOLDEN
332	GROVELAND	GROVELAND		К	
	н		054		MESTON
			651	Kendall Green	WESTON
531	HADLEY	HADLEY	036	KINGSTON	KINGSTON
070	HALIFAX	HALIFAX		L	
333	HAMILTON	HAMILTON	644	Lake Boon	STOW
493	HAMPDEN	HAMPDEN	411	Lake Pleasant	MONTAGUE
174	HANCOCK	HANCOCK	037	LAKEVILLE	LAKEVILLE
033	HANOVER	HANOVER	943	LANCASTER	LANCASTER
034	HANSON	HANSON	134	LANESBOROUGH	LANESBOROUGH
736	Harding	MEDFIELD	314	Lanesville	GLOUCESTER
939	HARDWICK	HARDWICK	512	Laurel Park	NORTHAMPTON
178	Hartsville	NEW MARLBOROUGH	303	LAWRENCE	LAWRENCE
974	HARVARD	HARVARD	135	LEE	LEE
055	HARWICH	HARWICH	512	Leeds	NORTHAMPTON
055	Harwichport	HARWICH	944	LEICESTER	LEICESTER
054	Hatchville	FALMOUTH	136	LENOX	LENOX
532	HATFIELD	HATFIELD	136	Lenoxdale	LENOX
313 302	Hathorne HAVERHILL	DANVERS HAVERHILL	914	LEOMINSTER	LEOMINSTER
475	HAWLEY	HAWLEY	477	LEVERETT	LEVERETT
638	Hayden Row	HOPKINTON	617	LEXINGTON	LEXINGTON
534	Haydenville	WILLIAMSBURG	478	LEYDEN	LEYDEN
476	HEATH	HEATH	639	LINCOLN	LINCOLN
210	Hebronville	ATTLEBORO	603	Linden	MALDEN
715	Highlandville	NEEDHAM	917	Linwood	NORTHBRIDGE
477	Hillsboro	LEVERETT	573	Lithia	GOSHEN
012	HINGHAM	HINGHAM	315	Little Neck	IPSWICH
133	HINSDALE	HINSDALE	640	LITTLETON	LITTLETON
735	HOLBROOK	HOLBROOK	484	Locks Village	WENDELL
940	HOLDEN	HOLDEN	230	Long Plain	ACUSHNET
494	HOLLAND	HOLLAND	442	LONGMEADOW	LONGMEADOW
637	HOLLISTON	HOLLISTON	054	Longview	FALMOUTH
403	HOLYOKE	HOLYOKE	953	Loring	STERLING
173	Hoosac Tunnel	FLORIDA	601	LOWELL	LOWELL
941	HOPEDALE	HOPEDALE	421	LUDLOW	LUDLOW
638	HOPKINTON	HOPKINTON	945	LUNENBURG	LUNENBURG
240	Horseneck Beach	WESTPORT	300	LYNN	LYNN
239	Hortonville	SWANSEA	334	LYNNFIELD	LYNNFIELD
111	Housatonic	GREAT BARRINGTON	431	Lyonsville	COLRAIN
942	HUBBARDSTON	HUBBARDSTON		Μ	
616	HUDSON	HUDSON			T
035	HULL	HULL	314	Magnolia	GLOUCESTER
044	Humarock	SCITUATE	603	MALDEN	MALDEN
533	HUNTINGTON	HUNTINGTON	955	Manchaug	SUTTON
135	Hurlburt	LEE	335	MANCHESTER	MANCHESTER

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
930	Manns Crossing	ASHBURNHAM	338	NAHANT	NAHANT
014	Manomet	PLYMOUTH	035	Nantasket Beach	HULL
214	MANSFIELD	MANSFIELD	056	NANTUCKET	NANTUCKET
110	Maple Grove	ADAMS	650	Nashoba	WESTFORD
603	Maplewood	MALDEN	621	NATICK	NATICK
316	MARBLEHEAD	MARBLEHEAD	715	NEEDHAM	NEEDHAM
038	MARION	MARION	177	NEW ASHFORD	NEW ASHFORD
618	MARLBOROUGH	MARLBOROUGH	200	NEW BEDFORD	NEW BEDFORD
039	MARSHFIELD	MARSHFIELD	182	New Boston	SANDISFIELD
021	Marston Mills	BARNSTABLE	975	NEW BRAINTREE	NEW BRAINTREE
085	MASHPEE	MASHPEE	136	New Lenox	LENOX
045	Matfield	WEST BRIDGEWATER	178	NEW MARLBOROUGH	NEW MARLBOROUGH
819	Mattapan	DORCHESTER (Boston)	480	NEW SALEM	NEW SALEM
040	MATTAPOISETT	MATTAPOISETT	339	NEWBURY	NEWBURY
620	MAYNARD	MAYNARD	318	NEWBURYPORT	NEWBURYPORT
736	MEDFIELD	MEDFIELD	183	Newstate	SAVOY
604	MEDFORD	MEDFORD	605	NEWTON	NEWTON
737	MEDWAY	MEDWAY	136	Niagara	LENOX
054	Megansett	FALMOUTH	615	Nobscot	FRAMINGHAM
619	MELROSE	MELROSE	605	Nonantum	NEWTON
946	MENDON	MENDON	211	Nonquitt	DARTMOUTH
081	Menemsha	CHILMARK	739	NORFOLK	NORFOLK
425	Merrick	WEST SPRINGFIELD	703	Norfolk Downs	QUINCY
336	MERRIMAC	MERRIMAC	055	Norman	HARWICH
336	Merrimacport	MERRIMAC	112	NORTH ADAMS	NORTH ADAMS
637	Metcalfs	HOLLISTON	319	NORTH ANDOVER	NORTH ANDOVER
317	METHUEN	METHUEN	215	NORTH ATTLEBORO	NORTH ATTLEBORO
013	MIDDLEBOROUGH	MIDDLEBOROUGH	948	NORTH BROOKFIELD	NORTH BROOKFIELD
576	MIDDLEFIELD	MIDDLEFIELD	819	North Dorchester	DORCHESTER (Boston)
645	Middlesex	SUDBURY	641	NORTH READING	NORTH READING
337	MIDDLETON	MIDDLETON	039	North River	MARSHFIELD
731	Midland	BELLINGHAM	512	NORTHAMPTON	NORTHAMPTON
915	MILFORD	MILFORD	949	NORTHBOROUGH	NORTHBOROUGH
178	Mill River	NEW MARLBOROUGH	917	NORTHBRIDGE	NORTHBRIDGE
031	Millbrook	DUXBURY	434	NORTHFIELD	NORTHFIELD
916	MILLBURY	MILLBURY	234	NORTON	NORTON
411	Millers Falls	MONTAGUE	041	NORWELL	NORWELL
480	Millington	NEW SALEM	716	NORWOOD	NORWOOD
738	MILLIS	MILLIS	634	Nutting Lake	BILLERICA
947	MILLVILLE	MILLVILLE		0	
714	MILTON	MILTON	057	OAK BLUFFS	OAK BLUFFS
044	Minot		959	Oakdale	WEST BOYLSTON
425	Mitteneague	WEST SPRINGFIELD	959 976	OAKHAM	OAKHAM
479 479	MONROE Mapreo Bridge	MONROE	039	Ocean Bluff	MARSHFIELD
479 422	Monroe Bridge	MONROE MONSON	239	Ocean Grove	SWANSEA
422	MONSON		939	Old Furnace	HARDWICK
<u>411</u> 002	MONTAGUE	MONTAGUE BROCKTON	215	Old Fumace Old Town	NORTH ATTLEBORO
175			016	Onset	WAREHAM
495	MONTEREY MONTGOMERY	MONTEREY	412	ORANGE	ORANGE
		MONTGOMERY BOURNE	058	ORLEANS	ORLEANS
050	Monument Beach	LEVERETT	038	Osterville	BARNSTABLE
477 086	Moores Corner Moorland	TRURO	179	OTIS	OTIS
971	Morningdale	BOYLSTON	956	Otter River	TEMPLETON
434	Mount Hermom	NORTHFIELD	950	OXFORD	OXFORD
	Mount Hermom Mount Tom		300	•	
<u>511</u> 176		EASTHAMPTON MOUNT WASHINGTON		Р	
231	MOUNT WASHINGTON Myricks	BERKLEY	423	PALMER	PALMER
231			977	PAXTON	PAXTON
	N		320	PEABODY	PEABODY
650	Nabnasset	WESTFORD	577	PELHAM	PELHAM

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
042	PEMBROKE	PEMBROKE	021	Santuit	BARNSTABLE
642	PEPPERELL	PEPPERELL	321	SAUGUS	SAUGUS
033	Perry	HANOVER	913	Saundersville	GRAFTON
180	PERU	PERU	183	SAVOY	SAVOY
978	PETERSHAM	PETERSHAM	615	Saxonville	FRAMINGHAM
979	PHILLIPSTON	PHILLIPSTON	044	SCITUATE	SCITUATE
340	Pigeon Cove	ROCKPORT	011	Scotland	BRIDGEWATER
634	Pinehurst	BILLERICA	039	Sea View	MARSHFIELD
102	PITTSFIELD	PITTSFIELD	237	SEEKONK	SEEKONK
578	PLAINFIELD	PLAINFIELD	232	Segreganset	DIGHTON
740	PLAINVILLE	PLAINVILLE	741	SHARON	SHARON
055	Pleasant Lake	HARWICH	431	Shattuckville	COLRAIN
102	Plunkett	PITTSFIELD	634	Shawsheen	BILLERICA
014	PLYMOUTH	PLYMOUTH	311	Shawsheen Village	ANDOVER
071	PLYMPTON	PLYMPTON	137	SHEFFIELD	SHEFFIELD
050	Pocasset	BOURNE	435	SHELBURNE	SHELBURNE
711	Ponkapog	CANTON	743	Sheldonville	WRENTHAM
238	Pottersville	SOMERSET	674	SHERBORN	SHERBORN
312	Prides Crossing	BEVERLY	643	SHIRLEY	SHIRLEY
980	PRINCETON	PRINCETON	043	Shore Acres	SCITUATE
059	PROVINCETOWN	PROVINCETOWN	918	SHREWSBURY	SHREWSBURY
000		TROVINCETOWN	482	SHUTESBURY	SHUTESBURY
	Q		056	Siasconset	NANTUCKET
940	Quinapoxet	HOLDEN	036	Silver Lake	KINGSTON
703	QUINCY	QUINCY	403	Smiths Ferry	HOLYOKE
900	Quinsigamond	WORCESTER	238	SOMERSET	SOMERSET
054	Quisset	FALMOUTH	606	SOMERVILLE	SOMERVILLE
004		TALMOOTT	823	SOUTH BOSTON	SOUTH BOSTON (Bos)
	R		819	South Dorchester	DORCHESTER (Boston)
717	RANDOLPH	RANDOLPH	513	SOUTH HADLEY	SOUTH HADLEY
235	RAYNHAM	RAYNHAM	434	South Vernon	NORTHFIELD
622	READING	READING	580	SOUTHAMPTON	SOUTHAMPTON
818	Readville	HYDE PARK (Boston)	952	SOUTHBOROUGH	SOUTHBOROUGH
236	REHOBOTH	REHOBOTH	919	SOUTHBRIDGE	SOUTHBRIDGE
110	Renfrew	ADAMS	178	Southfield	NEW MARLBOROUGH
803	REVERE	REVERE	952	Southville	SOUTHBOROUGH
181	RICHMOND	RICHMOND	444	SOUTHWICK	SOUTHWICK
181	Richmond Furnace	RICHMOND	920	SPENCER	SPENCER
582	Ringville	WORTHINGTON	400	SPRINGFIELD	SPRINGFIELD
044	Rivermoor	SCITUATE	703	Squantum	QUINCY
944	Rochdale	LEICESTER	011	State Farm	BRIDGEWATER
043	ROCHESTER	ROCHESTER	139	State Line	WEST STOCKBRIDGE
013	Rock	MIDDLEBOROUGH	953	STERLING	STERLING
015	ROCKLAND	ROCKLAND	974	Still River	HARVARD
340	ROCKPORT	ROCKPORT	138	STOCKBRIDGE	STOCKBRIDGE
816	ROSLINDALE	ROSLINDALE (Boston)	623	STONEHAM	STONEHAM
481	ROWE	ROWE	651	Stonybrook	WESTON
341	ROWLEY	ROWLEY	718	STOUGHTON	STOUGHTON
820	ROXBURY	ROXBURY (Boston)	644	STOW	STOW
981	ROYALSTON	ROYALSTON	954	STURBRIDGE	STURBRIDGE
443	RUSSELL	RUSSELL	645	SUDBURY	SUDBURY
951	RUTLAND	RUTLAND	436	SUNDERLAND	SUNDERLAND
			955	SUTTON	SUTTON
	S		322	SWAMPSCOTT	SWAMPSCOTT
050	Sagamore	BOURNE	239	SWANSEA	SWANSEA
304	SALEM	SALEM	571	Swift River	CUMMINGTON
342	SALISBURY	SALISBURY	016	Swifts Beach	WAREHAM
310	Salisbury Point	AMESBURY	010	-	
044	Sandhills	SCITUATE		т	
-	SANDISFIELD	SANDISFIELD	313	Tapleyville	DANVERS
182					

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
054	Teaticket	FALMOUTH	425	WEST SPRINGFIELD	WEST SPRINGFIELD
956	TEMPLETON	TEMPLETON	139	WEST STOCKBRIDGE	WEST STOCKBRIDGE
646	TEWKSBURY	TEWKSBURY	088	WEST TISBURY	WEST TISBURY
943	Thayer	LANCASTER	923	WESTBOROUGH	WESTBOROUGH
423	Thorndike	PALMER	045	Westdale	WEST BRIDGEWATER
423	Three Rivers	PALMER	424	WESTFIELD	WESTFIELD
233	Thwaites	FREETOWN	650	WESTFORD	WESTFORD
061	TISBURY	TISBURY	581	WESTHAMPTON	WESTHAMPTON
011	Titicut	BRIDGEWATER	961	WESTMINSTER	WESTMINSTER
496	TOLLAND	TOLLAND	651	WESTON	WESTON
371	TOPSFIELD	TOPSFIELD	240	WESTPORT	WESTPORT
239	Touisset	SWANSEA	613	Westvale	CONCORD
647	TOWNSEND	TOWNSEND	742	WESTWOOD	WESTWOOD
016	Tremont	WAREHAM	721	WEYMOUTH	WEYMOUTH
086	TRURO	TRURO	437	WHATELY	WHATELY
412	Tully	ORANGE	939	Wheelwright	HARDWICK
411	Turners Falls	MONTAGUE	014	White Horse Beach	PLYMOUTH
648	TYNGSBOROUGH	TYNGSBOROUGH	932	White Valley	BARRE
184	TYRINGHAM	TYRINGHAM	921	Whitins	UXBRIDGE
	U		917	Whitinsville	NORTHBRIDGE
710	Unionville	FRANKLIN	017	WHITMAN	WHITMAN
713 957		UPTON	202	Whittenton	TAUNTON
957 921	UPTON UXBRIDGE	UXBRIDGE	021	Wianno	BARNSTABLE
921	·	UXBRIDGE	445	WILBRAHAM	WILBRAHAM
	V		955 054	Wilkonsville Williams	SUTTON FALMOUTH
061	Vineyard Haven	TISBURY	534	WILLIAMSBURG	WILLIAMSBURG
001	•	Hobort	140		
	W		942	WILLIAMSTOWN Williamsville	WILLIAMSTOWN HUBBARDSTON
605	Waban	NEWTON	402	Willimansett	CHICOPEE
624	WAKEFIELD	WAKEFIELD	511	Williston Mills	EASTHAMPTON
497	WALES	WALES	652	WILMINGTON	WILMINGTON
719	WALPOLE	WALPOLE	924	WINCHENDON	WINCHENDON
607	WALTHAM	WALTHAM	625	WINCHESTER	WINCHESTER
646	Wamesit	TEWKSBURY	186	WINDSOR	WINDSOR
054	Waquoit	FALMOUTH	716	Winslow	NORWOOD
302	Ward Hill	HAVERHILL	606	Winter Hill	SOMERVILLE
514	WARE	WARE	810	WINTHROP	WINTHROP
016	WAREHAM	WAREHAM	626	WOBURN	WOBURN
958	WARREN	WARREN	703	Wollaston	QUINCY
483	WARWICK	WARWICK	054	Woods Hole	FALMOUTH
185	WASHINGTON	WASHINGTON	737	Woodside	MEDWAY
934	Waterford	BLACKSTONE	638	Woodville	HOPKINTON
608	WATERTOWN	WATERTOWN	900	WORCESTER	WORCESTER
924	Waterville	WINCHENDON	443	Woronoco	RUSSELL
611	Waverley	BELMONT	582	WORTHINGTON	WORTHINGTON
649	WAYLAND	WAYLAND	743	WRENTHAM	WRENTHAM
922	WEBSTER	WEBSTER	619	Wyoming	MELROSE
625	Wedgemere	WINCHESTER		, , ,	
202	Weir	TAUNTON		Y	
720	WELLESLEY	WELLESLEY	062	YARMOUTH	YARMOUTH
087	WELLFLEET	WELLFLEET	062	Yarmouthport	YARMOUTH
604	Wellington	MEDFORD		Z	
484	WENDELL	WENDELL			
343	WENHAM	WENHAM	472	Zoar	CHARLEMONT
959	WEST BOYLSTON	WEST BOYLSTON	110	Zylonite	ADAMS
045	WEST BRIDGEWATER	WEST BRIDGEWATER			
960	WEST BROOKFIELD	WEST BROOKFIELD			
061	West Chop	TISBURY			
344	WEST NEWBURY	WEST NEWBURY			
815	WEST ROXBURY	WEST ROXBURY (Bos)	1		

PREMIUM TOWN CODE - ACCIDENT TOWN CODE

NUMERICAL LISTING

- 1. Cities and Towns are printed in Capital Letters.
- 2. Villages, Sections of Cities and Towns, and Local Designations are printed in Small Type with the name of the corresponding City or Town in the adjacent column.
- 3. Sections of Cities and Towns designated "North", "East", "South" and "West" or with a prefix or suffix that is merely supplemental to the principal name (such as West Newton or Arlington Heights) are not separately listed (see principal designation). In some instances there are two distinct townships, such as Reading and North Reading, in which case both towns are listed.
- 4. Counties are indicated by code, using the first position of the Town Code as follows:

First Position	County	First Position	County
0	Barnstable	4	Franklin
	Dukes		Hampden
	Nantucket	5	Hampshire
	Plymouth	6	Middlesex
1	Berkshire	7	Norfolk
2	Bristol	8	Suffolk
3	Essex	9	Worcester

5. The City of Boston is divided into sections as follows:

City of Boston					
Definition	ZIP Code	Statistical Code			
BOSTON CENTRAL	02101-02118, 02123, 02133, 02199, 02201, 02202, 02203, 02210, 02215, 02241	821			
BRIGHTON	02134, 02135, 02163	822			
CHARLESTOWN-EAST BOSTON	02128, 02129	824			
DORCHESTER	02122, 02124, 02125, 02126	819			
HYDE PARK	02136, 02137	818			
JAMAICA PLAIN	02130	817			
ROSLINDALE	02131	816			
ROXBURY	02119, 02120, 02121	820			
SOUTH BOSTON	02127	823			
WEST ROXBURY	02132	815			

6. The appropriate Out of State Town Codes are as follows:

Location	Code
Connecticut	991
Maine	992
New Hampshire	993
New York	994
Rhode Island	995
Vermont	996
Other	999

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
002	BROCKTON	BROCKTON	041	NORWELL	Accord
		Campello	042	PEMBROKE	PEMBROKE
		Montello			Bryantville
010	ABINGTON	ABINGTON	043	ROCHESTER	RÓCHESTER
011	BRIDGEWATER	BRIDGEWATER	044	SCITUATE	SCITUATE
	_	Scotland			Egypt
		State Farm			Greenbush
		Titicut			Humarock
012	HINGHAM	HINGHAM			Minot
013	MIDDLEBOROUGH	MIDDLEBOROUGH			Rivermoor
0.0		Rock			Sandhills
014	PLYMOUTH	PLYMOUTH			Shore Acres
014	1 ETMOOTH	Chiltonville	045	WEST BRIDGEWATER	WEST BRIDGEWATER
		Manomet	043	WEST BRIDGEWATER	Cochessett
		White Horse Beach			Matfield
045					
015	ROCKLAND	ROCKLAND	050		Westdale
016	WAREHAM	WAREHAM	050	BOURNE	BOURNE
		Onset			Bournedale
		Swifts Beach			Buzzards Bay
		Tremont			Cataumet
017	WHITMAN	WHITMAN			Monument Beach
021	BARNSTABLE	BARNSTABLE			Pocasset
		Centerville			Sagamore
		Clement	051	СНАТНАМ	CHATHAM
		Cotuit			Chathamport
		Craigville	052	DENNIS	DENNIS
021	BARNSTABLE	Cummaguid			Dennisport
		Hyannis	053	EDGARTOWN	EDGARTOWN
		Hyannisport	054	FALMOUTH	FALMOUTH
		Marston Mills	001		Hatchville
		Osterville			Longview
		Santuit			Megansett
		Wianno			Quisset
030	CARVER	CARVER			Teaticket
030	DUXBURY	DUXBURY			Waquoit
031	DUXBURT				
		Island Creek			Williams
000		Millbrook			Woods Hole
032	EAST BRIDGEWATER	EAST BRIDGEWATER	055	HARWICH	HARWICH
		Elmwood			Harwichport
033	HANOVER	HANOVER			Norman
		Assinippi			Pleasant Lake
		Perry	056	NANTUCKET	NANTUCKET
034	HANSON	HANSON			Siasconset
<u> </u>		Burrage	057	OAK BLUFFS	OAK BLUFFS
035	HULL	HULL	058	ORLEANS	ORLEANS
		Allerton	059	PROVINCETOWN	PROVINCETOWN
		Nantasket Beach	060	SANDWICH	SANDWICH
036	KINGSTON	KINGSTON			Forestdale
		Silver Lake	061	TISBURY	TISBURY
037	LAKEVILLE	LAKEVILLE			Vineyard Haven
038	MARION	MARION			West Chop
039	MARSHFIELD	MARSHFIELD	062	YARMOUTH	YARMOUTH
000		Brant Rock			Bass River
		Green Harbor			Yarmouthport
			070	HALIFAX	HALIFAX
		North River			
		Ocean Bluff	071	PLYMPTON	PLYMPTON
		Sea View	080	BREWSTER	BREWSTER
040	MATTAPOISETT	MATTAPOISETT	081	CHILMARK	CHILMARK
		Antassawamock Neck			Menemsha
041	NORWELL	NORWELL	082	EASTHAM	EASTHAM

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
083	GAY HEAD	GAY HEAD	182	SANDISFIELD	SANDISFIELD
084	GOSNOLD	GOSNOLD			New Boston
		Cuttyhunk	183	SAVOY	SAVOY
085	MASHPEE	MASHPEE			Brier
086	TRURO	TRURO			Newstate
000	interto	Moorland	184	TYRINGHAM	TYRINGHAM
087	WELLFLEET	WELLFLEET	185	WASHINGTON	WASHINGTON
088	WEST TISBURY	WEST TISBURY	186	WINDSOR	WINDSOR
102	PITTSFIELD	PITTSFIELD	200	NEW BEDFORD	NEW BEDFORD
102	FILISFIELD		200	NEW BEDFORD	Clifford
		Camp Merrill	201		
110		Plunkett	201	FALL RIVER	FALL RIVER
110	ADAMS	ADAMS			Bowenville
		Maple Grove			Flint
		Renfrew	202	TAUNTON	TAUNTON
		Zylonite			Weir
111	GREAT BARRINGTON	GREAT BARRINGTON			Whittenton
		Housatonic	210	ATTLEBORO	ATTLEBORO
112	NORTH ADAMS	NORTH ADAMS			Dodgeville
		Blackington			Hebronville
		Greylock	211	DARTMOUTH	DARTMOUTH
130	CHESHIRE	CHESHIRE			Nonquitt
		Farnhams	212	EASTON	EASTON
131	CLARKSBURG	CLARKSBURG	212	LASTON	Eastondale
101	OLANIODONO	Briggsville	213	FAIRHAVEN	FAIRHAVEN
132	DALTON	DALTON	213	MANSFIELD	MANSFIELD
132	HINSDALE	HINSDALE	214	NORTH ATTLEBORO	NORTH ATTLEBORO
133	LANESBOROUGH		215	NORTHATTLEBORD	Adamsdale
	LANESBOROUGH	LANESBOROUGH			
105		Berkshire			Attleboro Falls
135	LEE	LEE			Old Town
		Hurlburt	230	ACUSHNET	ACUSHNET
136	LENOX	LENOX			Long Plain
		Lenoxdale	231	BERKLEY	BERKLEY
		New Lenox			Myricks
		Niagara	232	DIGHTON	DIGHTON
137	SHEFFIELD	SHEFFIELD			Segreganset
		Ashley Falls	233	FREETOWN	FREETOWN
138	STOCKBRIDGE	STOCKBRIDGE			Assonet
		Glendale			Thwaites
		Interlaken	234	NORTON	NORTON
139	WEST STOCKBRIDGE	WEST STOCKBRIDGE			Barrowsville
		State Line			Chartley
140	WILLIAMSTOWN	WILLIAMSTOWN	235	RAYNHAM	RAYNHAM
170	ALFORD	ALFORD	236	REHOBOTH	REHOBOTH
170	BECKET	BECKET	237	SEEKONK	SEEKONK
172	EGREMONT	EGREMONT	237	SOMERSET	SOMERSET
	FLORIDA		230	SOWERSET	
173	FLUKIDA	FLORIDA	000		Pottersville
		Drury	239	SWANSEA	SWANSEA
4= 1		Hoosac Tunnel			Hortonville
174	HANCOCK	HANCOCK			Ocean Grove
175	MONTEREY	MONTEREY			Touisset
176	MOUNT WASHINGTON	MOUNT WASHINGTON	240	WESTPORT	WESTPORT
177	NEW ASHFORD	NEW ASHFORD			Acoaxet
178	NEW MARLBOROUGH	NEW MARLBOROUGH			Central Village
		Clayton			Horseneck Beach
		Hartsville	300	LYNN	LYNN
		Mill River	302	HAVERHILL	HAVERHILL
		Southfield	002		Ayers Village
179	OTIS	OTIS			Bradford
180	PERU	PERU	200		Ward Hill
181	RICHMOND	RICHMOND	303		LAWRENCE
		Richmond Furnace	304	SALEM	SALEM

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
310	AMESBURY	AMESBURY	411	MONTAGUE	Lake Pleasant
		Salisbury Point			Millers Falls
311	ANDOVER	ANDOVÉR			Turners Falls
		Ballard Vale	412	ORANGE	ORANGE
		Frye Village			Tully
		Shawsheen Village	420	AGAWAM	AGAWAM
312	BEVERLY	BEVERLY			Feeding Hills
		Prides Crossing	421	LUDLOW	LUDLOW
313	DANVERS	DANVERS	422	MONSON	MONSON
		Danversport	423	PALMER	PALMER
		Hathorne			Bondsville
		Tapleyville			Thorndike
314	GLOUCESTER	GLOUCESTER			Three Rivers
		Annisquam	424	WESTFIELD	WESTFIELD
		Lanesville	425	WEST SPRINGFIELD	WEST SPRINGFIELD
		Magnolia			Merrick
315	IPSWICH	IPSWICH			Mitteneague
		Little Neck	430	BUCKLAND	BUCKLAND
316	MARBLEHEAD	MARBLEHEAD	431	COLRAIN	COLRAIN
		Clifton			Adamsville
317	METHUEN	METHUEN			Elmgrove
318	NEWBURYPORT	NEWBURYPORT			Griswoldville
319	NORTH ANDOVER	NORTH ANDOVER			Lyonsville
320	PEABODY	PEABODY			Shattuckville
321	SAUGUS	SAUGUS	432	DEERFIELD	DEERFIELD
		Cliftondale	433	ERVING	ERVING
322	SWAMPSCOTT	SWAMPSCOTT			Farley
		Beach Bluff	434	NORTHFIELD	NORTHFIELD
330	ESSEX	ESSEX			Mount Hermom
331	GEORGETOWN	GEORGETOWN			South Vernon
332	GROVELAND	GROVELAND	435	SHELBURNE	SHELBURNE
333	HAMILTON	HAMILTON	436	SUNDERLAND	SUNDERLAND
		Asbury Grove	437	WHATELY	WHATELY
334	LYNNFIELD	LYNNFIELD	440	CHESTER	CHESTER
335	MANCHESTER	MANCHESTER	441	EAST LONGMEADOW	EAST LONGMEADOW
336	MERRIMAC	MERRIMAC	442	LONGMEADOW	LONGMEADOW
		Merrimacport	443	RUSSELL	RUSSELL
337	MIDDLETON	MIDDLETON			Woronoco
338	NAHANT	NAHANT	444	SOUTHWICK	SOUTHWICK
339	NEWBURY	NEWBURY			Congamond
		Byfield	445	WILBRAHAM	WILBRAHAM
340	ROCKPORT	ROCKPORT	470	ASHFIELD	ASHFIELD
		Pigeon Cove	471	BERNARDSTON	BERNARDSTON
341	ROWLEY	ROWLEY	472	CHARLEMONT	CHARLEMONT
342	SALISBURY	SALISBURY			Zoar
		Cushing	473	CONWAY	CONWAY
343	WENHAM	WENHAM	474	GILL	GILL
344	WEST NEWBURY	WEST NEWBURY	475	HAWLEY	HAWLEY
370	BOXFORD	BOXFORD	476	HEATH	HEATH
371	TOPSFIELD	TOPSFIELD			Dell
400	SPRINGFIELD	SPRINGFIELD	477	LEVERETT	LEVERETT
		Brightwood			Hillsboro
		Indian Orchard			Moores Corner
402	CHICOPEE	CHICOPEE	478	LEYDEN	LEYDEN
		Fairview	479	MONROE	MONROE
		Willimansett			Monroe Bridge
403	HOLYOKE	HOLYOKE	480	NEW SALEM	NEW SALEM
		Ingleside			Cooleyville
		Smiths Ferry	11		Millington
410	GREENFIELD	GREENFIELD	481	ROWE	ROWE
411	MONTAGUE	MONTAGUE			Davis

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
482	SHUTESBURY	SHUTESBURY	606	SOMERVILLE	SOMERVILLE
483	WARWICK	WARWICK			Winter Hill
484	WENDELL	WENDELL	607	WALTHAM	WALTHAM
		Locks Village	608	WATERTOWN	WATERTOWN
490	BLANDFORD	BLANDFORD	610	ARLINGTON	ARLINGTON
491	BRIMFIELD	BRIMFIELD	611	BELMONT	BELMONT
492	GRANVILLE	GRANVILLE			Waverley
493	HAMPDEN	HAMPDEN	612	CHELMSFORD	CHELMSFORD
494	HOLLAND	HOLLAND	613	CONCORD	CONCORD
495	MONTGOMERY	MONTGOMERY			Westvale
496	TOLLAND	TOLLAND	614	DRACUT	DRACUT
497	WALES	WALES			Collinsville
510	AMHERST	AMHERST	615	FRAMINGHAM	FRAMINGHAM
		Cushman			Nobscot
511	EASTHAMPTON	EASTHAMPTON			Saxonville
		Mount Tom	616	HUDSON	HUDSON
		Williston Mills			Cove Landing
512	NORTHAMPTON	NORTHAMPTON	617	LEXINGTON	LEXINGTON
		Bay State Village	618	MARLBOROUGH	MARLBOROUGH
		Florence	619	MELROSE	MELROSE
		Laurel Park			Wyoming
		Leeds	620	MAYNARD	MAYNARD
513	SOUTH HADLEY	SOUTH HADLEY	621	NATICK	NATICK
514	WARE	WARE			Felchville
530	BELCHERTOWN	BELCHERTOWN	622	READING	READING
		Dwight	623	STONEHAM	STONEHAM
531	HADLEY	HADLEY	624	WAKEFIELD	WAKEFIELD
532	HATFIELD	HATFIELD			Greenwood
		Bradstreet	625	WINCHESTER	WINCHESTER
533	HUNTINGTON	HUNTINGTON			Wedgemere
534	WILLIAMSBURG	WILLIAMSBURG	626	WOBURN	WOBURN
		Haydenville	630	ACTON	ACTON
570	CHESTERFIELD	CHESTERFIELD	631	ASHLAND	ASHLAND
571	CUMMINGTON	CUMMINGTON	632	AYER	AYER
		Swift River	633	BEDFORD	BEDFORD
573	GOSHEN	GOSHEN	634	BILLERICA	BILLERICA
	0.541151/	Lithia			Nutting Lake
574	GRANBY	GRANBY	-		Pinehurst
576	MIDDLEFIELD	MIDDLEFIELD	005	DUDUNOTON	Shawsheen
		Bancroft	635	BURLINGTON	BURLINGTON
577	PELHAM	PELHAM	636	GROTON	GROTON
578	PLAINFIELD	PLAINFIELD	637	HOLLISTON	HOLLISTON
580	SOUTHAMPTON	SOUTHAMPTON	41		Braggville
581 582	WESTHAMPTON WORTHINGTON	WESTHAMPTON WORTHINGTON	638	HOPKINTON	Metcalfs HOPKINTON
J02	WURTHINGTUN		030	HUPKINTUN	
600	CAMBRIDGE	Ringville CAMBRIDGE	4 I		Hayden Row Woodville
600	LOWELL	LOWELL	639	LINCOLN	LINCOLN
601	EVERETT	EVERETT	639	LINCOLN	LINCOLN
602	MALDEN	MALDEN	640 641	NORTH READING	NORTH READING
003	WALDEN			PEPPERELL	
		Edgeworth	642		PEPPERELL SHIRLEY
		Faulkner Linden	643 644	SHIRLEY STOW	STOW
			044	31000	Gleasondale
604	MEDFORD	Maplewood	4 I		Gleasondale Lake Boon
004		MEDFORD Glenwood	GAE	SUDBURY	SUDBURY
			645	SUDDURT	
605		Wellington	646		Middlesex
605	NEWTON	NEWTON	646	TEWKSBURY	TEWKSBURY
		Auburndale	647		Wamesit
		Nonantum	647 648	TOWNSEND TYNGSBOROUGH	TOWNSEND TYNGSBOROUGH
	I	Waban	040		

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
649	WAYLAND	WAYLAND	739	NORFOLK	NORFOLK
		Cochituate			City Mills
650	WESTFORD	WESTFORD	740	PLAINVILLE	PLAINVILLE
		Coldspring	741	SHARON	SHARON
		Forge Village	742	WESTWOOD	WESTWOOD
		Graniteville			Islington
		Nabnasset	743	WRENTHAM	WRENTHAM
		Nashoba			Sheldonville
651	WESTON	WESTON	802	CHELSEA	CHELSEA
		Kendall Green	803	REVERE	REVERE
		Stonybrook			Beachmont
652	WILMINGTON	WILMINGTON	810	WINTHROP	WINTHROP
670	ASHBY	ASHBY	815	WEST ROXBURY (Bos)	WEST ROXBURY
671	BOXBOROUGH	BOXBOROUGH	816	ROSLINDALE (Boston)	ROSLINDALE
672	CARLISLE	CARLISLE	817	JAMAICA PLAIN (Bos)	JAMAICA PLAIN
673	DUNSTABLE	DUNSTABLE	818	HYDE PARK (Boston)	HYDE PARK
674	SHERBORN	SHERBORN			Readville
702	BROOKLINE	BROOKLINE	819	DORCHESTER	DORCHESTER
703	QUINCY	QUINCY		(Boston)	Mattapan
		Atlantic			North Dorchester
		Norfolk Downs			South Dorchester
		Squantum	820	ROXBURY (Boston)	ROXBURY
703	QUINCY	Wollaston	821	BOSTON (Central)	BOSTON (Central)
710	BRAINTREE	BRAINTREE	822	BRIGHTON (Boston)	BRIGHTON
711	CANTON	CANTON			Allston
		Ponkapog	823	SOUTH BOSTON (Bos)	SOUTH BOSTON
712	DEDHAM	DEDHAM	824	CHARLESTOWN	CHARLESTOWN
		Ashcroft		(Boston)	East Boston
		Ellis	900	WORCESTER	WORCESTER
		Endicott			Barbers
		Findlen			Greendale
713	FRANKLIN	FRANKLIN			Quinsigamond
		Unionville	902	FITCHBURG	FITCHBURG
714	MILTON	MILTON	910	ATHOL	ATHOL
715	NEEDHAM	NEEDHAM	911	CLINTON	CLINTON
		Avery	912	GARDNER	GARDNER
		Charles River Village	913	GRAFTON	GRAFTON
		Highlandville			Farnumsville
716	NORWOOD	NORWOOD			Fisherville
	DANDOLDU:	Winslow			Saundersville
717	RANDOLPH	RANDOLPH	914	LEOMINSTER	LEOMINSTER
718	STOUGHTON	STOUGHTON	915	MILFORD	MILFORD
719	WALPOLE	WALPOLE	916	MILLBURY	MILLBURY
700		Bird Mills	917	NORTHBRIDGE	NORTHBRIDGE
720	WELLESLEY	WELLESLEY			Linwood
721	WEYMOUTH	WEYMOUTH			Whitinsville
730	AVON	AVON	918	SHREWSBURY	SHREWSBURY
731	BELLINGHAM	BELLINGHAM	919	SOUTHBRIDGE	SOUTHBRIDGE
		Caryville			Globe Village
		Midland	920	SPENCER	SPENCER
732	COHASSET	COHASSET	921	UXBRIDGE	UXBRIDGE
		Beechwood			Whitins
733	DOVER	DOVER	922	WEBSTER	WEBSTER
734	FOXBOROUGH	FOXBOROUGH	923	WESTBOROUGH	WESTBOROUGH
735	HOLBROOK	HOLBROOK	924	WINCHENDON	WINCHENDON
		Brookville			Waterville
736	MEDFIELD	MEDFIELD	930	ASHBURNHAM	ASHBURNHAM
		Harding			Manns Crossing
737	MEDWAY	MEDWAY	931	AUBURN	AUBURN
		Woodside	932	BARRE	BARRE
738	MILLIS	MILLIS			White Valley

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
933	BERLIN	BERLIN	956	TEMPLETON	TEMPLETON
	22.12.11	Carters			Baldwinville
934	BLACKSTONE	BLACKSTONE			Otter River
		Waterford	957	UPTON	UPTON
935	BROOKFIELD	BROOKFIELD	958	WARREN	WARREN
936	CHARLTON	CHARLTON	959	WEST BOYLSTON	WEST BOYLSTON
		Dodge			Oakdale
937	DOUGLAS	DOUGLAS	960	WEST BROOKFIELD	WEST BROOKFIELD
938	DUDLEY	DUDLEY	961	WESTMINSTER	WESTMINSTER
939	HARDWICK	HARDWICK	970	BOLTON	BOLTON
000		Furnace	971	BOYLSTON	BOYLSTON
		Gilbertville	071	Derteren	Morningdale
		Old Furnace	973	EAST BROOKFIELD	EAST BROOKFIELD
		Wheelwright	974	HARVARD	HARVARD
940	HOLDEN	HOLDEN	574	HAIWAILD	Still River
940	HOLDEN	Jefferson	975	NEW BRAINTREE	NEW BRAINTREE
		Quinapoxet	975	OAKHAM	OAKHAM
941	HOPEDALE	HOPEDALE	970	OARHAIVI	Coldbrook Spring
941	HUBBARDSTON	HUBBARDSTON	977	PAXTON	PAXTON
942	HUBBARDSTON	Williamsville	977	PETERSHAM	PATION
943	LANCASTER	LANCASTER	978	PHILLIPSTON	PHILLIPSTON
943	LANCASTER		979	PRINCETON	
044	LEICESTER	Thayer			PRINCETON
944	LEICESTER	LEICESTER	981	ROYALSTON	ROYALSTON
		Cherry Valley		OUT OF STATE T	OWN CODES
045		Rochdale	991	CONNECTICUT	
945	LUNENBURG MENDON	LUNENBURG	992	MAINE	
946		MENDON	993	NEW HAMPSHIRE	
947		MILLVILLE	994	NEW YORK	
948	NORTH BROOKFIELD	NORTH BROOKFIELD	995	RHODE ISLAND	
949	NORTHBOROUGH	NORTHBOROUGH	996	VERMONT	
950	OXFORD	OXFORD	999	OTHER	
951	RUTLAND	RUTLAND	000	OTTER	
952	SOUTHBOROUGH	SOUTHBOROUGH			
		Cordaville			
		Fayville			
		Southville			
953	STERLING	STERLING			
		Loring			
954	STURBRIDGE	STURBRIDGE			
		Fiskdale			
955	SUTTON	SUTTON			
		Manchaug			
		Wilkonsville			