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# Massachusetts Private Passenger Automobile Statistical Plan

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Containing the Instructions and Codes Applicable to  
Vehicles Insured Under a Massachusetts Private  
Passenger Automobile Insurance Policy

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Commonwealth Automobile Reinsurers

101 Arch Street, Boston, MA 02110

(617) 338-4000

FAX: (617) 338-5422

[www.commauto.com](http://www.commauto.com)

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# **Massachusetts Private Passenger Automobile Statistical Plan Part I - Overview**

## **A. SCOPE OF THE PLAN**

★ The Massachusetts Private Passenger Automobile Statistical Plan is applicable to total automobile direct business written by a company on vehicles insured under a Massachusetts private passenger automobile insurance policy. The Massachusetts Private Passenger Automobile Statistical Plan should be used in conjunction with 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 – Classification Code and Coverage Code Decision Tables  
Appendix B – Territory Codes  
Appendix C – Traffic Law Violations

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 and residual market functions. The Program is subdivided into two sections. The Statistical Data Quality Components Section contains rules 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 to be reported, are not required to be reported or may be optionally reported for a particular classification or coverage code.

★ Appendix B of this Plan contains a table of valid Territory Codes listed in both alphabetical order and numerical order. These territories correspond to the premium towns listed in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.

Appendix C of this Plan identifies all major and minor traffic violations and the chapter and section of the Massachusetts General Laws (M.G.L.) or the Code of Massachusetts Regulations (CMR) to which each violation applies.

## **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. UPDATES TO THE PLAN**

★ The Massachusetts Private Passenger Automobile Statistical Plan is available for viewing or downloading from CAR's website ([www.commauto.com](http://www.commauto.com)). The current year version, as well as prior year versions of the Plan are available. CAR will publish an Accounting and Statistical Notice to notify companies of page revisions 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 revised 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 (★) 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 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 a company's Statutory Page 14 for Massachusetts 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.

#### **★ 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 Statutory Page 14 for Massachusetts 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)**

### **3. Companies in a Run-Off Position**



Companies in a run-off position that ceded private passenger automobile insurance policies to CAR with effective dates prior to April 1, 2009 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 because they have stopped writing private passenger automobile insurance policies 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.

### **4. 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 Statutory Page 14 for Massachusetts 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 Statutory Page 14 for Massachusetts 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 and residual market purposes. Specific information regarding the submission of Statutory Page 14 for Massachusetts 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.



## **B. REPORTING METHOD**

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. REPORTING METHOD (Continued)**

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: Anti-Theft Device Discount Code, Discount Code, Producer Code, Policy Identification Number, Vehicle Identification Number and Company Use fields on premium records and Anti-Theft Device Discount Code, Discount Code, 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.
4. For purposes of the Massachusetts Private Passenger Automobile Statistical Plan, all references to the reporting of spaces in any field will be denoted by an italicized lower case *b*. For example, in this Plan, Policy Identification Number 12345 would be denoted by 12345***bbbbbbbbb*** (where *b* denotes a space). In this example, the symbol *b* indicates that a space would be reported by the company in every unused position of the Policy Identification Number field.
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.



# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part II - General Rules**

### **B. REPORTING METHOD (Continued)**

5. Data should be reported to CAR as follows (continued):

- ★ d. 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.
- ★ e. All reported data must be submitted on the appropriate record format as specified in the Record Layout Section of this Plan.

### **★ C. POLICIES CEDED TO COMMONWEALTH AUTOMOBILE REINSURERS PRIOR TO APRIL 1, 2009**

★ All premiums and losses that are associated with policies ceded to Commonwealth Automobile Reinsurers with effective dates prior to April 1, 2009 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 of Operation and rules 1 through 20 of CAR's Rules of Operation required 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 were initially written as voluntary business, but then ceded to CAR during the policy's term must be treated as ceded 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 ceded business, using the appropriate ceded CAR Identification Code and the total 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 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. REINSURANCE – OTHER THAN POLICIES PREVIOUSLY CEDED TO CAR**

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.



**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part III – General Reporting Requirements**

**Section A – Premiums**

**1. REPORTING OF PREMIUMS**

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 uninsured auto). All other premium records (property damage liability, PIP (no-fault), other than collision and collision) should contain the individually developed premium. The premium amount reported must be inclusive of any premium attributed to merit rating surcharge or credit amounts.

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.

Premium relating to a new or additional company specific coverage must be reported on a separate statistical record using Classification Code 998000, Type of Risk 9, and if applicable to physical damage, All Other Coverage Code 089 or 099.

If a limit of liability or physical damage deductible for which a statistical code is not currently available is offered, the premium record must be reported with the applicable classification and record reporting requirements and with the established all other limit or deductible codes.

**2. REPORTING OF MERIT RATING PREMIUMS**

The portion of bodily injury liability, property damage liability, PIP (no-fault) and physical damage collision premium attributable to merit rating surcharge or credit amounts must be combined with the policy base premium and reported on the applicable liability, PIP (no-fault) or physical damage premium record format.

The fifth and sixth positions of the reported Classification Code must indicate the merit rating status of the operator used to rate the vehicle. Merit rating status is defined as the number of points or incident free years recognized by the merit rating plan described in Rule 56 of the Commonwealth Automobile Reinsurers' Massachusetts Private Passenger Automobile Insurance Manual. Refer to the Coding Section and Appendix C of this Plan for specific instructions.

If the merit rating status of an operator changes during the policy term, follow the endorsement instructions described in this section. If a cancellation occurs, follow the cancellation instructions described in this section.

**★ 3. SINGLE LIMIT POLICIES**

Single limit policies with separate premiums for bodily injury and property damage shall be reported using the appropriate Limits Identifier Code.

<p style="text-align: center;"><b>Massachusetts Private Passenger Automobile Statistical Plan Part III – General Reporting Requirements</b></p>
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**Section A – Premiums**

★ 3. **SINGLE LIMIT POLICIES (continued)**

When reporting the bodily injury and property damage premium on one record, the combined single limit code shall be reported in the Bodily Injury Limits Code field with spaces or zeros in the Property Damage Limits Code field. The corresponding bodily injury and property damage portions of the premium as determined by the single limit calculation shall then be reported in the appropriate Bodily Injury Premium Amount or Property Damage Premium Amount field.

When reporting bodily injury and property damage premium on two separate records, the records shall be reported in the following manner:

- a. For the bodily injury record, the limit code shall be reported in the Bodily Injury Limits Code field with spaces or zeros in the Property Damage Limits field. The bodily injury portion of the premium, as determined by the single limit calculation, shall be reported in the Bodily Injury Premium field with spaces or zeros in the Property Damage Premium field.
- b. For the property damage record, the combined single limit code shall be reported in the Bodily Injury Limits field with spaces or zeros in the Property Damage Limits field. The Property Damage portion of the premium, as determined by the single limit calculation, shall be reported in the Property Damage Premium field with spaces or zeros in the Bodily Injury Premium field.

4. **REPORTING OF EXPOSURE**

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.

5. **CHANGES IN COVERAGE BY ENDORSEMENT**

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.

# Massachusetts Private Passenger Automobile Statistical Plan

## Part III – General Reporting Requirements

### Section A – Premiums

#### 5. CHANGES IN COVERAGE BY ENDORSEMENT (continued)

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	Tx-Type	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	110199
Offset	12	06-00	06-00	06-01	-12	-\$527	-\$190	110199
Reenter	12	06-00	06-00	06-01	+12	\$812	\$289	126900

#### 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	Tx-Type	Pol-Eff-Date	Tx-Eff-Date	Pol-Exp-Date	Exp	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 premium 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.

#### 6. CANCELLATION OF PREMIUMS

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 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

# Massachusetts Private Passenger Automobile Statistical Plan

## Part III - General Reporting Requirements

### Section A – Premiums

#### 6. CANCELLATION OF PREMIUMS (continued)

- 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

#### b. Pro Rata Cancellation



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 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 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	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	-\$338	-\$130

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part III – General Reporting Requirements**

**Section A – Premiums**

**7. 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 and Appendix A – Class and Coverage Decision Tables 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

**8. RATE DEVIATIONS**

Under Section 193R of Chapter 175 of the Massachusetts General Laws, companies may request approval from the Massachusetts Division of Insurance to deviate below the insurance company's otherwise applicable private passenger automobile premium. Statistical records reported on policies for which rate deviations have been applied must be coded with the appropriate Type of Risk Code. Additionally, the premium reported on statistical records must reflect the policy premium after the application of rate deviations.

Refer to the Coding Section for applicable codes and examples.

**9. MULTIPLE YEAR POLICIES AND INSTALLMENT POLICIES**

Multiple year policies 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.

<p style="text-align: center;"><b>Massachusetts Private Passenger Automobile Statistical Plan Part III – General Reporting Requirements</b></p>
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**Section A – Premiums**

**10. 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.

<p style="text-align: center;"><b>Massachusetts Private Passenger Automobile Statistical Plan Part III - General Reporting Requirements</b></p>
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**Section B – Losses**

**1. REPORTING OF LOSSES**

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.

Losses relating to a company specific coverage that is provided either at an additional premium charge or at no additional premium charge must be statistically reported using Classification Code 998000, All Other Coverage Code 089 or 099, Type of Loss 09 and Type of Risk 9.

★ 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 losses paid under policies ceded to or assigned through the residual market. However, allocated loss adjustment expenses for voluntary paid physical damage losses may be optionally reported.

**2. DEFINITION OF A CLAIM**

**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.

# Massachusetts Private Passenger Automobile Statistical Plan

## Part III - General Reporting Requirements

### Section B – Losses

#### 3. ACCIDENT REPORTING

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.

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



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**Section B – Losses**

**4. REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES**

**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

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**Section B – Losses**

**4. REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES  
(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 not 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. INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)  
CLAIMS**

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 at-fault 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.

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**Section B – Losses**

**5. INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)  
CLAIMS (Continued)**

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. INTRACOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)  
CLAIMS**

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. SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING  
FROM INTER/INTRACOMPANY REIMBURSEMENTS)**

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

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**Section B – Losses**

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

**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. SALVAGE RECOVERIES/EXPENSES**

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 policies ceded to or assigned through the residual market, but may be optionally reported for voluntary business.

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**Section B – Losses**

★ **10. PARTIAL/TOTAL LOSS FOR PAID PROPERTY 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.

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**Section B – Losses**

★ **14. MERIT RATING PLAN**

The merit rating status of the operator used to rate the vehicle must be reported in the fifth and sixth positions of the Classification Code. The merit rating status reported on the loss record must match the merit rating status as reported on the corresponding premium records.

**Massachusetts Private Passenger Automobile  
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**Section A – Liability**

**1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)**

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.

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.

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**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. TERRITORY 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 Territory 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.



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**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. BODILY INJURY CAUSED BY AN UNINSURED AUTO LIMITS CODE (Positions 43-44)**

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

**19. BODILY INJURY CAUSED BY AN UNDERINSURED AUTO LIMITS CODE (Positions 45-46)**

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

**★ 20. LIMITS IDENTIFIER CODE (Position 47)**

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

**21. 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.

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**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. Reserved for Future Use (Positions 53-55)**

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) character alphanumeric code. Refer to the Coding Section for applicable codes.



**26. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)**

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



**27. LOW FREQUENCY DISCOUNT CODE (Position 59)**

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



**28. Reserved for Future Use (Position 60)**

Report spaces or zeros.

**29. PRODUCER CODE (Positions 61-66)**

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.

**30. Reserved for Future Use (Positions 67-71)**

Report spaces or zeros.

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**Section A – Liability**

**31. 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.

**32. 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.

★ **33. Reserved for Future Use (Positions 88-90)**

Report spaces or zeros.

**34. Reserved for Future Use (Positions 91-95)**

Report spaces or zeros.

**35. 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 -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

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**Section A – Liability**

**36. PROPERTY DAMAGE PREMIUM AMOUNT (Positions 104-111)**

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 -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

**37. Reserved for Future Use (Positions 112-114)**

Report spaces or zeros.

**38. 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.

**39. 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.

**40. 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.

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**Section B – No-Fault**

**1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)**

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.

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.

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**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. TERRITORY 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 Territory 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 625.

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**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. Reserved for Future Use (Positions 40-47)**

Report space or zeros.

★ **18. 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.

**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. Reserved for Future Use (Positions 53-55)**

Report spaces or zero.

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**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) character alphanumeric code. Refer to the Coding Section for applicable codes.

★ **23. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)**

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

★ **24. LOW FREQUENCY DISCOUNT CODE (Position 59)**

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

★ **25. Reserved for Future Use (Position 60)**

Report spaces or zeros.

**26. PRODUCER CODE (Positions 61-66)**

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.

**27. RESERVED FOR FUTURE USE (Positions 67-71)**

Report spaces or zeros.

**28. 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.



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**Section B – No-Fault**

**29. 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.

★ **30. Reserved for Future Use (Positions 88-90)**

Report spaces or zeros.

**31. Reserved for Future Use (Positions 91-95)**

Report spaces or zeros.

**32. 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 -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

**33. Reserved for Future Use (Positions 104-114)**

Report spaces or zeros.

**34. 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.

<p style="text-align: center;"><b>Massachusetts Private Passenger Automobile Statistical Plan Part IV - Reporting Instructions - Premiums</b></p>
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**Section B – No-Fault**

**35. 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.

**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.

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**Section C – Physical Damage**

**1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)**

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.

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.

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**Section C – Physical Damage**

**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. TERRITORY 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 Territory 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 628.

**Massachusetts Private Passenger Automobile  
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**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. Reserved for Future Use (Positions 43-47)**

Report spaces or zeros.

**18. 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.

**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. ANTI-THEFT DEVICE IDENTIFICATION CODE (Position 53)**

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

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**Section C – Physical Damage**

**21. Reserved for Future Use (Positions 54-55)**

Report spaces or zeros.

**22. OEM COVERAGE CODE (Position 56)**

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



**23. DISCOUNT CODE (Position 57)**

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

**24. VALUE CODE (Positions 58-60)**

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

**25. PRODUCER CODE (Positions 61-66)**

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.

**26. HIGH-THEFT VEHICLE CODE (Position 67)**

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

**27. Reserved for Future Use (Position 68)**

Report space or zero.

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

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

**29. Reserved for Future Use (Position 70)**

Report space or zero.

**Massachusetts Private Passenger Automobile  
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**Section C – Physical Damage**

**30. EXTRA-RISK RATING CODE - COLLISION (Position 71)**

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

**31. 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) position ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

**32. 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.



**33. Reserved for Future Use (Positions 88-90)**

Report spaces or zeros.

**34. Reserved for Future Use (Positions 91-95)**

Report spaces or zeros.

**35. 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 -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

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**Section C – Physical Damage**

**36. 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 -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

**37. Reserved for Future Use (Positions 112-114)**

Report spaces or zeros.

**38. 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.

**39. 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.

**40. 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.



**Massachusetts Private Passenger Automobile  
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**Section A – Liability**

**1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)**

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. 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.

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**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. Reserved for Future Use (Position 16)**

Report space or zero.

**7. STATE CODE (Positions 17-18)**

Report State Code 20.

**★ 8. TERRITORY CODE (Positions 19-21)**

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

Refer to Appendix B for applicable codes.

**9. CAR IDENTIFICATION CODE (Position 22)**

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. TYPE OF RISK CODE (Position 23)**

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. SUBLINE CODE (Positions 27-29)**

Report Subline Code 621.

**Massachusetts Private Passenger Automobile  
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**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. Reserved for Future Use (Position 39)**

Report space or zero.

**17. Reserved for Future Use (Positions 40-42)**

Report spaces or zeros.

**18. Reserved for Future Use (Positions 43-46)**

Report spaces or zeros.

**★ 19. LIMITS IDENTIFIER CODE (Position 47)**

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

**20. ANNUAL MILEAGE CODE (Positions 48-50)**

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.

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**Section A – Liability**

**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. Reserved for Future Use (Positions 53-54)**

Report spaces or zeros.

**23. 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.

**24. 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.

**25. DISCOUNT CODE (Position 57)**

Report the one (1) character alphanumeric 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.

★ **26. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)**

Report the one (1) digit numeric code. The Continuous Coverage Discount Code on the loss record must match the Continuous Coverage Discount Code from the policy's corresponding premium record.

★ **27. LOW FREQUENCY DISCOUNT CODE (Position 59)**

Report the one (1) digit numeric code. The Low Frequency Discount Code on the loss record must match the Low Frequency Discount Code from the policy's corresponding premium record.

★ **28. Reserved for Future Use (Position 60)**

Report spaces or zeros.

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**Section A – Liability**

**29. 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.

**30. Reserved for Future Use (Positions 67-71)**

Report spaces or zeros.

**31. ZIP CODE (Positions 72-80)**

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.

**32. RESERVED FOR FUTURE USE (Position 81)**

Report space or zero.

**33. REPORTING DATE (Positions 82-84)**

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.

**34. Reserved for Future Use (Positions 85-86)**

Report spaces or zeros.

**35. TYPE OF LOSS CODE (Positions 87-88)**

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.

**★ 36. Reserved for Future Use (Positions 89-90)**

Report spaces or zeros.

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**Section A – Liability**

**37. 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 -99999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

**38. 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.

**39. 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.

**40. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)**

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.

**41. 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.

**Massachusetts Private Passenger Automobile  
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**Section B – No Fault**

**1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)**

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. 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.

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**Section B – No Fault**

**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. Reserved for Future Use (Position 16)**

Report space or zero.

**7. STATE CODE (Positions 17-18)**

Report State Code 20.

**★ 8. TERRITORY CODE (Positions 19-21)**

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

Refer to Appendix B for applicable codes.

**9. CAR IDENTIFICATION CODE (Position 22)**

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. TYPE OF RISK CODE (Position 23)**

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. SUBLINE CODE (Positions 27-29)**

Report Subline Code 625.



# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part V - Reporting Instructions - Losses**

### **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. PIP COVERAGE CODE (Position 37)**

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. Reserved for Future Use (Positions 40-42)**

Report spaces or zeros.

#### **18. Reserved for Future Use (Positions 43-47)**

Report spaces or zeros.

#### **19. ANNUAL MILEAGE CODE (Positions 48-50)**

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.

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**Section B – No Fault**

**21. TYPE OF CLAIMANT CODE (Position 53)**

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

**22. Reserved for Future Use (Positions 54-55)**

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) character alphanumeric 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. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)**

Report the one (1) digit numeric code. The Continuous Coverage Discount Code on the loss record must match the Continuous Coverage Discount Code from the vehicle's corresponding premium record.

★ **26. LOW FREQUENCY DISCOUNT CODE (Position 59)**

Report the one (1) digit numeric code. The Low Frequency Discount Code on the loss record must match the Low Frequency Discount Code from the vehicle's corresponding premium record.

★ **27. Reserved for Future Use (Position 60)**

Report spaces or zeros.

**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. Reserved for Future Use (Positions 67-71)**

Report spaces or zeros.

**Massachusetts Private Passenger Automobile  
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**Section B – No Fault**

**30. ZIP CODE (Positions 72-80)**

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.

**31. Reserved for Future Use (Positions 81-86)**

Report spaces or zeros.

**32. 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.

★ **33. Reserved for Future Use (Positions 89-90)**

Report spaces or zeros.

**34. 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 -99999999 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.

# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part V - Reporting Instructions - Losses**

### **Section B – No Fault**

#### **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. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)**

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.

**Massachusetts Private Passenger Automobile  
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Part V - Reporting Instructions - Losses**

**Section C – Physical Damage**

**1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)**

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. 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.

**Massachusetts Private Passenger Automobile  
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Part V - Reporting Instructions - Losses**

**Section C – Physical Damage**

**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. Reserved for Future Use (Position 16)**

Report space or zero.

**7. STATE CODE (Positions 17-18)**

Report State Code 20.

**★ 8. TERRITORY CODE (Positions 19-21)**

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

Refer to Appendix B for applicable codes.

**9. CAR IDENTIFICATION CODE (Position 22)**

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. TYPE OF RISK CODE (Position 23)**

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. SUBLINE CODE (Positions 27-29)**

Report Subline Code 628.

# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part V - Reporting Instructions - Losses**

### **Section C – Physical Damage**

**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. COVERAGE CODE (Positions 37-39)**

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. Reserved for Future Use (Positions 40-47)**

Report spaces or zeros.

★ **17. ANNUAL MILEAGE CODE (Positions 48-50)**

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.

**Massachusetts Private Passenger Automobile  
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**Section C – Physical Damage**

**18. 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.

★ **19. ANTI-THEFT DEVICE IDENTIFICATION CODE (Position 53)**

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

**20. Reserved for Future Use (Position 54)**

Report space or zero.

**21. 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.

**22. 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.

**23. DISCOUNT CODE (Position 57)**

Report the one (1) character alphanumeric 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.

**24. 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.



**Massachusetts Private Passenger Automobile  
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Part V - Reporting Instructions - Losses**

**Section C – Physical Damage**

**25. 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.

**26. 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.

**27. Reserved for Future Use (Position 68)**

Report space or zero.

**28. 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.

**29. Reserved for Future Use (Position 70)**

Report space or zero.

**30. 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.

**31. ZIP CODE (Positions 72-80)**

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.

**32. Reserved for Future Use (Positions 81-84)**

Report spaces or zeros.

**Massachusetts Private Passenger Automobile  
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**Section C – Physical Damage**

**33. CATASTROPHE CODE (Positions 85-86)**

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.

**34. 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.



**35. Reserved for Future Use (Positions 89-90)**

Report spaces or zeros.

**36. 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.

**37. 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.

# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part V - Reporting Instructions - Losses**

### **Section C – Physical Damage**

**38. 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.

**39. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)**

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.

**40. 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.

**Massachusetts Private Passenger Automobile  
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**Liability, No-Fault, and Physical Damage**

This section applies to all records

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**TRANSACTION TYPE CODE**

<b>Premium Codes</b>			
<b>Transaction Type</b>	<b>Liability Annual Statement Line of Business 19.2</b>	<b>No-Fault Annual Statement Line of Business 19.1</b>	<b>Physical Damage Annual Statement Line of Business 21.1</b>
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

<b>Loss Codes</b>			
<b>Transaction Type</b>	<b>Liability Annual Statement Line of Business 19.2</b>	<b>No-Fault Annual Statement Line of Business 19.1</b>	<b>Physical Damage Annual Statement Line of Business 21.1</b>
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 policies ceded to or assigned through the residual market, and optional for voluntary business.

**Massachusetts Private Passenger Automobile  
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**STATE CODE**

<b>State</b>	<b>Code</b>
Massachusetts	20

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**CAR IDENTIFICATION CODE**

★	<b>Description (Policy Effective Dates January 1, 1997 through March 31, 2008)</b>	<b>Code</b>
	Direct business written from Voluntary Agents or by the company (Representative Producers) that is not ceded to CAR	0
	Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is not ceded to CAR	1
	Direct business from Voluntary Agents or by the company (Representative Producers) that is ceded to CAR	4
	Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is ceded to CAR	5

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**CAR IDENTIFICATION CODE (continued)**



<b>Description (Policy Effective Dates April 1, 2008 through March 31, 2009)</b>	<b>Code</b>
Direct business written from Voluntary Agents or by the company (Representative Producers) that is not ceded to CAR and is not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	0
Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is not ceded to CAR and not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	1
Direct business written from Voluntary Agents or by the company (Representative Producers) that is ceded to CAR and is not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	4
Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is ceded to CAR and is not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	5
Direct business written voluntarily that is not assigned through the Massachusetts Automobile Insurance Plan (MAIP) and that would otherwise be eligible for placement through the Massachusetts Automobile Insurance Plan (MAIP)	8*
Direct business written that is assigned to the company through the Massachusetts Automobile Insurance Plan (MAIP) that is eligible for placement through the MAIP	9*

\* To be eligible for placement through the MAIP, the business:

- Must be defined as New Business as specified in Rule 22 of the MAIP Rules of Operation, or
- Must have ten or more Safe Driver Insurance Plan points, as specified in Rule 21 of the MAIP Rules of Operation, and
- Must not be defined as a Clean-in-Three risk as specified in Rule 22 of the MAIP Rules of Operation, with renewal dates during the period April 1, 2008 through March 31, 2009, subject to the exceptions specified in Rule 21 of the MAIP Rules of Operation



**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**CAR IDENTIFICATION CODE (continued)**

★	<b>Description (Policy Effective Dates April 1, 2009 through March 31, 2018)</b>	<b>Code</b>
	Direct business written voluntarily that meets both the Clean-in-Three definition in Rule 22 of the CAR Rules of Operation and the voluntary market share exclusion criteria specified in Rule 29 of the CAR Rules of Operation	1
	Direct business written voluntarily that does not meet the description of Code 1 above	8
	Direct business written that is assigned through the Massachusetts Automobile Insurance Plan (MAIP)	9

★	<b>Description (Policy Effective Dates April 1, 2018 and subsequent)</b>	<b>Code</b>
	Direct business written voluntarily	8
	Direct business written that is assigned through the Massachusetts Automobile Insurance Plan (MAIP)	9

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**★ TYPE OF RISK CODE**

<b>Description</b>	<b>Code</b>
Regular Business (Massachusetts Motor Vehicle Policies and Risks not coded below)	1
Business Written at a Rate Discount • Approved under Section 193R of Chapter 175 of the General Laws	3
Business Written at a Rate Discount (Risks Not Subject to the Compulsory Law) • Approved under Section 193R of Chapter 175 of the General Laws	5
Business Not Subject to the Compulsory Law and Not Written at a Rate Discount	7
Company Specific Coverage • Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08	9

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

★ **ANNUAL STATEMENT LINE OF BUSINESS CODE**

<b>Description</b>	<b>Line of Business</b>	<b>Code</b>
Private Passenger Auto No-Fault (Personal Injury Protection)	19.1	191
Other Private Passenger Auto Liability	19.2	192
Private Passenger Auto Physical Damage	21.1	211

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**SUBLINE CODE**

<b>Subline</b>	<b>Code</b>
Liability	621
PIP (No-Fault)	625
Physical Damage	628

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**CLASSIFICATION CODE**

**STATISTICAL CLASS CODE ASSIGNMENT**

- Statistical Class Code assignments shall be based on the characteristics of the individual used to rate the vehicle.



- 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

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**CLASSIFICATION CODE**

**PRIVATE PASSENGER DEFINITION**

<b>Description: First Three Positions (Statistical Class)</b>		<b>Code</b>
★ 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 the occupation, profession or business of the insured.		110
Qualifies for Class 110 except the operator of the automobile is age 65 through 74.		115
Qualifies for Class 110 except the 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 Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.		126
The automobile is owned by an individual and is used in the occupation, profession or business of the insured.		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 Commonwealth Automobile Reinsurers' 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 Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.		142

<b>Description: Fourth Position (Rating Class)</b>		<b>Code</b>
Rate Class 10: Experienced Operator - licensed at least 6 years		1
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

<b>Description: Fifth and Sixth Positions (Merit Rating Status)</b>		<b>Code</b>
Premium, Loss and Outstanding Loss Records		
No merit rating credit or points apply		00
Rated operator incident free for a period of at least 6 years		99
Rated operator incident free for a period of at least 5 years but less than 6		98
Merit rating points apply		01 – 45

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**CLASSIFICATION CODE**

**PRIVATE PASSENGER DEFINITION (continued)**

**Valid Statistical Class Code Reporting Table**

Stat Class	Rate Class (Fourth position of Class Code)								
	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	1154		1156	1157	1158	1159
116		1162	1163	1164		1166	1167	1168	1169
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	

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**CLASSIFICATION CODE**

**MISCELLANEOUS RATED AS PRIVATE PASSENGER DEFINITION**

<b>Description (Merit Rating does not apply)</b>	<b>Code</b>	
	<b>Liability</b>	<b>Physical Damage</b>
Snowmobiles	042600	042600
Antique Motor Cars and Antique Motorcycles	048300	048300
Golfmobiles (motorized)	049500	049500
Lawnmowers (motorized)	049500	049500
All Other – Miscellaneous Rated as Private Passenger	049900	049900

<b>Description: First Four Positions (Merit Rating does apply)</b>	<b>Code</b>	
	<b>Liability</b>	<b>Physical Damage</b>
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
Low Speed Vehicles	0460	0460
Vehicles Carrying School Children (Seating 0-9 passengers) Not registered for Carrying Passengers for hire	0539	0539

<b>Description: Fifth and Sixth Positions (Merit Rating Status)</b>	<b>Code</b>
Premium, Loss and Outstanding Loss Records	
No merit rating credit or points apply	00
Rated operator incident free for a period of at least 6 years	99
Rated operator incident free for a period of at least 5 years but less than 6	98
Merit rating points apply	01 – 45



# Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

## 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 Group	Cubic Centimeter Engine Displacement	Standard Class		Age sixty-five (65) or more
		Experienced Operator	Inexperienced Operator	
★ Electric	N/A	0401	0501	0601
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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**CLASSIFICATION CODE**

**PRIVATE PASSENGER MOTORCYCLE DEFINITION (continued)**



Description: Fifth and Sixth Positions (Merit Rating Status)	Code
Premium, Loss and Outstanding Loss Records	
No merit rating credit or points apply	00
Rated operator incident free for a period of at least 6 years	99
Rated operator incident free for a period of at least 5 years but less than 6	98
Merit rating points apply	01 – 45

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**CLASSIFICATION CODE**

**NON-OWNED AUTOMOBILES DEFINITION**

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

**SPECIAL RATING AND ADJUSTMENT DEFINITION**

Description	Code	
	Liability	Physical Damage
Public Transit Discount (Commuter Discount)	190000	190000
Non-Cedable Limits	800000	-----
★ Transportation Network Company (TNC) Driver Coverage <ul style="list-style-type: none"> <li>• Additional coverage for drivers using their personal automobiles for ride-sharing, ride-hailing, on-demand delivery and other transportation network services</li> <li>• Applies to voluntary business only</li> </ul>	900000	900000
All Other	998000	998000

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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:

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**



**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

Examples:

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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

Examples:

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
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**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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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 the reporting of partial/total losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan

Description	Code
Partial Loss	1
Total Vehicle Loss	2



**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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
Discount Applies <ul style="list-style-type: none"><li>• Vehicle contains at least one of the following occupant safety features: an airbag installed for either the driver's seating position or both front outboard designated seating positions or an automatic seatbelt installed for either the driver's seating position or both front outboard designated seating positions.</li></ul>	1



# Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

## DISCOUNT CODE



- For specific details relative to the application of the discounts listed below, refer to Rule 19 (Discounts) of the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.

Description	Code
<b>Mandatory for Policies Effective 1/1/09 and Subsequent and Optional for Policies Effective 4/1/08-12/31/08:</b>	
All Other Discount Applies	A
All Other and Multi-Car Discounts Apply	B
All Other and Annual Mileage Discounts Apply	C
All Other, Multi-Car and Annual Mileage Discounts Apply	D
All Other and Motorcycle Rider Training Discounts Apply	E
<b>For Policies Effective 7/1/06 and Subsequent and Optional for Policies Effective 1/1/06-6/30/06:</b>	
Multi-Car Discount Applies	1
Annual Mileage Discount Applies **	2
Multi-Car Discount and Annual Mileage Discount Apply	4
Motorcycle Rider Training Discount Applies	6
No Discount Applies	0

Description (For Policies Effective Prior to 1/1/06 and Optional for Policies Effective 1/1/06-6/30/06)	Multi-Car Status * Exists	Multi-Car Status * Does Not Exist
	Code	
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.

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**CONTINUOUS COVERAGE DISCOUNT CODE**

- This discount applies to Bodily Injury, PIP (No-Fault) and Property Damage coverages only.
- ★ • For specific details relative to the eligibility requirements of the Continuous Coverage discount, refer to Rule 19 – Discounts of the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.



★	<b>Description</b>	<b>Code</b>
	Eligible for Continuous Coverage Discount and Discount Applied	1
	Eligible for Continuous Coverage Discount and Discount Not Applied	2
	Not Eligible for Continuous Coverage Discount	0

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**LOW FREQUENCY DISCOUNT CODE**

- This discount applies to Bodily Injury, PIP (No-Fault) and Property Damage coverages only.
- ★ • For specific details relative to the eligibility requirements of the Low Frequency discount, refer to Rule 19 – Discounts of the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.



★

Description	Code
Eligible for Low Frequency Discount and Discount Applied	1
Eligible for Low Frequency Discount and Discount Not Applied	2
Not Eligible for Low Frequency Discount	0

**Massachusetts Private Passenger Automobile  
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**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*)
- ★ • Note that a unique Producer Code is required to be reported for each agency office location.

Examples:

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

**Massachusetts Private Passenger Automobile  
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**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*)

Examples:

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

# Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

## EXPOSURE

EXPOSURE		Effective Month OR Cancellation Month												
		Jan 1 to Jan 15	Jan 16 to Feb 15	Feb 16 to Mar 15	Mar 16 to Apr 15	Apr 16 to May 15	May 16 to Jun 15	Jun 16 to Jul 15	Jul 16 to Aug 15	Aug 16 to Sep 15	Sep 16 to Oct 15	Oct 16 to Nov 15	Nov 16 to Dec 15	Dec 16 to Dec 31
Same Year	Jan 1 to Jan 15	0												
	Jan 16 to Feb 15	1	0											
	Feb 16 to Mar 15	2	1	0										
	Mar 16 to Apr 15	3	2	1	0									
	Apr 16 to May 15	4	3	2	1	0								
	May 16 to Jun 15	5	4	3	2	1	0							
	Jun 16 to Jul 15	6	5	4	3	2	1	0						
	Jul 16 to Aug 15	7	6	5	4	3	2	1	0					
	Aug 16 to Sep 15	8	7	6	5	4	3	2	1	0				
	Sep 16 to Oct 15	9	8	7	6	5	4	3	2	1	0			
Following Year	Oct 16 to Nov 15	10	9	8	7	6	5	4	3	2	1	0		
	Nov 16 to Dec 15	11	10	9	8	7	6	5	4	3	2	1	0	
	Dec 16 to Jan 15	12	11	10	9	8	7	6	5	4	3	2	1	0
	Jan 16 to Feb 15	13	12	11	10	9	8	7	6	5	4	3	2	1
	Feb 16 to Mar 15	14	13	12	11	10	9	8	7	6	5	4	3	2
	Mar 16 to Apr 15	15	14	13	12	11	10	9	8	7	6	5	4	3
	Apr 16 to May 15	16	15	14	13	12	11	10	9	8	7	6	5	4
	May 16 to Jun 15	17	16	15	14	13	12	11	10	9	8	7	6	5
	Jun 16 to Jul 15	18	17	16	15	14	13	12	11	10	9	8	7	6
	Jul 16 to Aug 15	19	18	17	16	15	14	13	12	11	10	9	8	7
2nd Following Year	Aug 16 to Sep 15	20	19	18	17	16	15	14	13	12	11	10	9	8
	Sep 16 to Oct 15	21	20	19	18	17	16	15	14	13	12	11	10	9
	Oct 16 to Nov 15	22	21	20	19	18	17	16	15	14	13	12	11	10
	Nov 16 to Dec 15	23	22	21	20	19	18	17	16	15	14	13	12	11
	Dec 16 to Jan 15	24	23	22	21	20	19	18	17	16	15	14	13	12
	Jan 16 to Feb 15		24	23	22	21	20	19	18	17	16	15	14	13
	Feb 16 to Mar 15			24	23	22	21	20	19	18	17	16	15	14
	Mar 16 to Apr 15				24	23	22	21	20	19	18	17	16	15
	Apr 16 to May 15					24	23	22	21	20	19	18	17	16
	May 16 to Jun 15						24	23	22	21	20	19	18	17

EXAMPLES: The exposure for a car insured for one year is 12.  
The exposure for a car insured for two years is 24.  
The exposure for a car cancelled effective between April 16 and August 15 on a policy expiring between April 16 and May 15 of the following year is 9.

# Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

## RATE DEPARTURE FACTOR CODE

- ★ • This code is valid for policy effective years 2008 and prior
- 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:

Examples:

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



**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**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

Examples:

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**POLICY IDENTIFICATION NUMBER**

- Policy Identification Number is a sixteen position alphanumeric 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*)

Examples:

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

**Massachusetts Private Passenger Automobile  
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**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 (97000000000000000)

Examples:

Vehicle Identification Number	Code
1FABP28A6FF143890	1FABP28A6FF143890
1C3BH41J6MN109186	1C3BH41J6MN109186
ZC2FP1101KB202230	ZC2FP1101KB202230
GV5VK3212B	GV5VK3212Bbbbbbbb
MA12345	MA12345bbbbbbbbbb

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**Liability Only**

This section applies to liability records only

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**★ LIMITS IDENTIFIER CODE**

<b>Description</b>	<b>Code</b>
Combined Single Limit Liability policies <ul style="list-style-type: none"><li>• Separate premiums for Bodily Injury and Property Damage *</li></ul>	2
Split Limit Liability policies <ul style="list-style-type: none"><li>• Separate premiums for Bodily Injury and Property Damage</li></ul>	3

- \* For single limit liability policies the reported Bodily Injury premium must be based on the Bodily Injury portion of the single limit calculation (including Uninsured Motorist, Underinsured Motorist and Medical Payments premiums if applicable). The reported Property Damage premium must be based on the Property Damage portion of the single limit calculation.

# Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

## LIABILITY LIMITS CODE

BODILY INJURY		
Limits of Liability		Code
Per Claim	Per Accident	
\$ 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	500,000	15 #
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	
\$ 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	500,000	15 #
500,000	1,000,000	10 ***
1,000,000	1,000,000	14 ***
All Other Limits Not Above		49
No Uninsured Auto		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	
\$ 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	500,000	15 #
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.

★ # Mandatory for policies effective 4/1/07 and subsequent.

# Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

## ★ LIABILITY LIMITS CODE (Continued)

- If a policy is written at a per occurrence limit that is not identified by a specific code, the transaction shall be coded to the next higher per occurrence limit. However, if the per occurrence limit is greater than \$10,000,000, report code 49.

<b><u>COMBINED SINGLE LIMIT</u></b>	
<b>Limits of Liability Per Occurrence</b>	<b>Code</b>
\$ 45,000	04
50,000	08
75,000	09
100,000	10
150,000	11
200,000	12
250,000	13
300,000	14
400,000	15
500,000	16
750,000	17
1,000,000	18
1,500,000	19
2,000,000	20
2,500,000	21
3,000,000	22
5,000,000	23
7,500,000	24
10,000,000	25
All Other Limits Greater Than \$10,000,000	49

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**TYPE OF LOSS CODE - LIABILITY**

<b>Description</b>	<b>Code</b>
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
★ All Other types – Liability <ul style="list-style-type: none"> <li>• (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08)</li> </ul>	09



**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**No-Fault Only**

This section applies to no-fault records only

**Massachusetts Private Passenger Automobile  
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**PIP COVERAGE CODE**

<b>Description</b>	<b>Code</b>
Basic PIP (No-Fault) Coverage Only	1

**Massachusetts Private Passenger Automobile  
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**PIP DEDUCTIBLE CODE**

<b>Description</b>	<b>Deductible Amount</b>	<b>Code</b>
Full Coverage	\$ 0	01
Named Insured	\$ 100	12
	250	13
	500	14
	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

**Massachusetts Private Passenger Automobile  
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**TYPE OF CLAIMANT CODE**

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

**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**TYPE OF LOSS CODE – PIP (NO-FAULT)**

<b>Description</b>	<b>Code</b>
Non-Split Outstanding Loss	23
Medical Loss	24
Wage Loss	34
Other Economic Loss	44
Subrogation Recovery	45
★ All Other types – No-Fault • (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08)	09

**Massachusetts Private Passenger Automobile  
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**Physical Damage Only**

This section applies to physical damage records only

**Massachusetts Private Passenger Automobile  
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**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.

<b>OTC Coverage with Full Glass Coverage</b>			
<b>Description</b>	<b>Code</b>		
	<b>Towing and Labor Costs Coverage</b>		
	<b>\$50 Included</b>	★ <b>\$100 Included</b>	<b>Excluded</b>
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		

<b>OTC Coverage with Optional \$100 Glass Deductible</b>			
<b>Description</b>	<b>Code</b>		
	<b>Towing and Labor Costs Coverage</b>		
	<b>\$50 Included</b>	★ <b>\$100 Included</b>	<b>Excluded</b>
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

**Massachusetts Private Passenger Automobile  
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**OTHER THAN COLLISION COVERAGE CODE**

**MISCELLANEOUS COVERAGES**

<b>Description</b>	<b>Code</b>
Non-Owned Automobiles – Broad Form	056
Non-Owned Automobiles – Limited Form	057
★ Towing and Labor – \$100 per disablement <ul style="list-style-type: none"> <li>• No other comprehensive coverage afforded</li> <li>• Optional for policies effective 1/1/2002 – 12/31/2002. Mandatory for policies effective 1/1/2003 and subsequent.</li> </ul>	080
Towing and Labor – \$50 per disablement <ul style="list-style-type: none"> <li>• No other comprehensive coverage afforded</li> </ul>	082
Substitute Transportation - \$15 per day/ \$450 maximum	083
Substitute Transportation - \$45 per day/\$1,350 maximum <ul style="list-style-type: none"> <li>• Optional for policies effective 1/1/2001 – 12/31/2001. Mandatory for policies effective 1/1/2002 and subsequent.</li> </ul>	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



**Massachusetts Private Passenger Automobile  
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Part VI - Coding Section**

**COLLISION COVERAGE CODE**

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

<b>Collision Coverage With Waiver of Deductible</b>		
<b>Description</b>	<b>Code</b>	<b>Type of Loss Code</b>
\$ 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

<b>Limited Collision Coverage</b>		
<b>Description</b>	<b>Code</b>	<b>Type of Loss Code</b>
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

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**★ VALUE CODE**

**PRIVATE PASSENGER MOTORCYCLES**

- Motorcycles (including Motorbikes), Motorscooters (including Scootmobiles, Safticycles, Motorglides), Mopeds and similar Motor Vehicles
- Motorcycle 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

Examples:

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**PRE-INSURANCE INSPECTION IDENTIFICATION CODE**

- ★
- This code is valid for policy effective years 2009 and prior

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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**INTENSIFIED APPRAISAL IDENTIFICATION CODE**

- ★
- This code is valid for policy effective years 1995 and prior

<b>Description</b>	<b>Claims &lt;= \$4,000</b>	<b>Claims &gt; \$4,000</b>
Eligible for Intensified Appraisal and Appraised	3	5
Eligible for Intensified Appraisal and Not Appraised	4	6
Not Eligible	9	8

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**ANTI-THEFT DEVICE IDENTIFICATION CODE**

- Applies to other than collision coverage only
- ★ • Refer to Rule 23 – High-Theft Vehicles in the Commonwealth Automobile Reinsurers’ Private Passenger Automobile Insurance Manual for detailed descriptions of each category of anti-theft device or vehicle recovery system
- ★ • If multiple devices or systems are installed in the vehicle, report the code that represents the highest category

★	Description	Code
	No Device Installed	0
	Category III Device Installed	3
	Category IV Device Installed	4
	Category V Device Installed	8

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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.

<b>Description</b>	<b>Code</b>
OEM Coverage Applies	1
OEM Coverage Does Not Apply	0

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**HIGH-THEFT VEHICLE CODE**

- Applies to other than collision coverage only
- ★ • Refer to the High Theft Vehicle List in the Commonwealth Automobile Reinsurers' 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

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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 theft <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	1
Convicted of auto insurance related fraud <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	2
★ Material misrepresentation of a Physical Damage claim <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	3
Two or more total fire claims OR two or more total theft claims <ul style="list-style-type: none"> <li>• Within the last three years</li> </ul>	4
★ Material misrepresentation of a Physical Damage claim <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	5
Convicted of vehicular homicide <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	6
Convicted of driving under the influence of alcohol or drugs <ul style="list-style-type: none"> <li>• Within the last three years</li> </ul>	7
Four or more greater than 50% at-fault accidents <ul style="list-style-type: none"> <li>• Within the last three years</li> </ul>	8
Salvage Title – No new certificate issued	9



**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**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 homicide <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	1
Convicted of motor vehicle theft <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	2
Convicted of auto insurance related fraud <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	3
★ Material misrepresentation of a Physical Damage claim <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	4
★ Material misrepresentation of a Physical Damage claim <ul style="list-style-type: none"> <li>• Within the last five years</li> </ul>	5
Convicted of driving under the influence of alcohol or drugs <ul style="list-style-type: none"> <li>• Within the last three years</li> </ul>	6
Four or more greater than 50% at-fault accidents <ul style="list-style-type: none"> <li>• Within the last three years</li> </ul>	7
Two or more total fire claims OR two or more total theft claims <ul style="list-style-type: none"> <li>• Within the last three years</li> </ul>	8
Salvage Title – No new certificate issued	9

**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VI - Coding Section**

**TYPE OF LOSS CODE – PHYSICAL DAMAGE**

**OTHER THAN COLLISION**

<b>Description</b>	<b>Code</b>
Fire	01
Theft	02
Glass <ul style="list-style-type: none"> <li>For additional information on Glass Losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan</li> </ul>	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 <ul style="list-style-type: none"> <li>Refer to the Coverage Code Decision Table in Appendix A for reportable fields</li> </ul>	08
★ All Other types – Other Than Collision	09

**COLLISION**

<b>Description</b>	<b>Code</b>
Without Waiver of Deductible – <ul style="list-style-type: none"> <li>Collision loss payment when deductible is applied</li> <li>Limited Collision with a deductible</li> </ul>	10
With Waiver of Deductible – <ul style="list-style-type: none"> <li>Collision loss payment when deductible is applied</li> </ul>	11
With Waiver of Deductible – <ul style="list-style-type: none"> <li>Collision loss payment when deductible is waived</li> <li>Limited Collision with full coverage</li> </ul>	12
★ All Other types – Collision <ul style="list-style-type: none"> <li>(Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08)</li> </ul>	09

# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part VII – Statistical Data Quality Program**

### **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 calendar year 2009 Statutory Page 14 for Massachusetts indicates that a company has exceeded the reporting thresholds. This company will be instructed to begin reporting to CAR no later than the December 2011 submission.

# **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 and \$500,000 in paid losses for reportable coverages during the prior calendar year, based on the information contained on its Statutory Page 14 for Massachusetts, 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**

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.

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

**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. A record is considered to be a verification only error record when it has no statistical errors, but has one or more verification errors. Refer to CAR's Statistical Edit Package for a description of these errors. 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.

<b>LEX Tolerance Levels</b>	
<b>Field</b>	<b>Tolerance</b>
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. STATISTICAL ERRORS**

**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)**

<b>Statistical Error Tolerance Levels</b>		
<b>Private Passenger</b>	<b>Total Number Of Error Records</b>	<b>Total Exposures or Loss Dollars In Error</b>
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. MASSACHUSETTS ANNUAL STATEMENT**

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 Statutory Page 14 data for Massachusetts from companies via CAR's online Annual Statement Reconciliation System. Note that for all quarters, Annual Statement data must be submitted for each individual company within a group. 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 reported to CAR and how the situation that created 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.

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

**Section A - Statistical Data Quality Components**

★ 4. **DISTRIBUTIONAL ANALYSIS PROGRAM**

The Distributional Analysis Program is run on a semi-annual basis. Various reports are made available to companies on CAR's website which focus on the reporting of critical data elements used in a number of different processes such as quota share and ratemaking. Those data elements are used in comparing a company's distribution of statistically reported data to like distributions of industry-wide data. The edits are designed to determine whether significant variances are due to a company's unique book of business or reflective of a systemic reporting problem.

**a. Due Date**

Twice per year following the processing of the June and December monthly accounting/statistical shipments, CAR runs its Distributional Analysis program, posts results to its website for company review, and establishes a due date for the input of company explanations of any identified over tolerance conditions. The established due date for the entry of company explanations is approximately 60 calendar days from the date the Distributional Analysis reports are available.

**b. Acceptability**

In those instances where CAR identifies a potential reporting issue, it will formally notify those companies identified as having the potential reporting issue and provide a specific due date for the reporting issue to be resolved. In those instances where a company identifies a reporting issue, as a result of an over tolerance condition, the company should provide an action plan for fixing those issues going forward within a one year time period.



# **Massachusetts Private Passenger Automobile Statistical Plan**

## **Part VII – Statistical Data Quality Program**

### **Section B – Statistical Data Quality Penalties**

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 \$12,500 Statistical Data Quality Penalty the first calendar year. If non-compliance continues, a \$30,000 penalty will be assessed after the second calendar year, and a \$60,000 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 calendar year 2009 Statutory Page 14 for Massachusetts indicates that a company has exceeded the reporting thresholds. The company must begin reporting to CAR no later than the December 2011 submission. If a submission is not reported to CAR on or before this deadline, the company will be assessed a \$12,500 Statistical Data Quality Penalty. If the company again fails to report by the December 2012 submission, the company will be assessed a \$30,000 penalty. If the company fails to report by December 2013 submission, the company will be assessed a \$60,000 penalty, and the Division of Insurance will be notified of the company's non-compliance.

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

**Section B – Statistical Data Quality Penalties**

**1. STATISTICAL SUBMISSIONS (Continued)**

**b. Low Volume Company**

★ Low volume companies have a maximum penalty amount of \$1,500 for any one submission. Accordingly, low volume companies reporting on a quarterly basis will never be assessed more than \$6,000 in a calendar year, and low volume companies electing to report on a monthly basis will never be assessed more than \$18,000 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 \$3,000 for a particular range of shipment receipt dates as shown in the chart below. An additional \$3,000 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 \$3,000/month would be added to the \$3,000 amount previously accrued on the shipment since the displayed receipt date had passed.

<b>Receipt Date at CAR of Last Acceptable Portion</b>	<b>Penalty Amount</b>
After the shipment due date, but before the end of the month in which the shipment due date occurs	\$ 500
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	\$ 1,250
After the due date of the next accounting month's shipment, but before the end of the month in which this due date occurs	\$ 3,000
Each additional calendar month	\$3,000/month

<b>Example: January Monthly Accounting Shipment Due 3/15</b>		
<b>Receipt Date of Shipment</b>	<b>Calculation of Penalty</b>	<b>Penalty Dollars</b>
3/16 – 3/31	\$ 500	\$ 500
4/1 – 4/15	\$ 1,250	\$ 1,250
4/16 – 4/30	\$ 3,000	\$ 3,000
5/1	\$ 3,000 + \$ 3,000	\$ 6,000
6/1	\$ 6,000 + \$ 3,000	\$ 9,000

# Massachusetts Private Passenger Automobile Statistical Plan

## Part VII – Statistical Data Quality Program

### Section B – Statistical Data Quality Penalties

#### 2. STATISTICAL ERRORS

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%	\$ 150
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%	\$ 600
Each additional re-listing with error percentages not less than or equal to 5%	\$ 1,250

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	\$ 150	\$ 150
6/30	\$600	\$ 600
8/30	\$ 1,250	\$ 1,250
10/30	\$ 1,250 + \$ 1,250	\$2,500

#### 3. MASSACHUSETTS ANNUAL STATEMENT AND QUARTERLY STATUTORY PAGE 14 FOR MASSACHUSETTS

A Statistical Data Quality Penalty of \$100 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 \$100 per CAR business day will be assessed for a late Fourth Quarter Massachusetts Annual Statement Reconciliation response until CAR receives the response.

A Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for the late submission of quarterly Statutory Page 14 data for Massachusetts. Also, a Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for a late response to the reconciliation of the quarterly Statutory Page 14 for Massachusetts until CAR receives the response.

Since each company that is affiliated with a group is required to report its statistical data on an individual company number level and is required to report separate Massachusetts Annual Statement data and quarterly Statutory Page 14 for Massachusetts data, the Annual Statement penalties will also be assessed on an individual company basis.

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

**Section B – Statistical Data Quality Penalties**

★ 4. **DISTRIBUTIONAL ANALYSIS PROGRAM**

This section details the Statistical Data Quality Penalty amounts that companies will be assessed if a company does not respond to an over tolerance condition by the established due date and/or does not correct its statistical reporting issue, on a going forward basis, within one year of having been identified. Since each company that is affiliated with a group is required to provide a response on an individual company level, the penalties are also assessed on an individual company basis. Furthermore, the penalty is also assessed separately for premium and loss reporting.

<b>Distributional Analysis Reports Meeting the Following Criteria</b>	<b>Penalty Amount</b>
The initial due date has expired and the company has not responded to at least 75% of the cited over tolerance conditions	\$150
The company was notified of its missing explanation, the second due date has expired (60 days after the first due date), and the company has not responded to at least 75% of the cited over tolerance conditions	\$150
The one year due date for resolving an identified reporting issue has passed and the issue is not yet resolved	\$3,000
Each additional calendar month that the reporting issue is not resolved.	\$3,000

<b>Example: June release of Distributional Analysis Reports approximately September 1</b>		
<b>Due Date For Response</b>	<b>Calculation of Penalty</b>	<b>Penalty Dollars</b>
11/1	\$150	\$150
1/1	\$150 + \$150	\$300

<b>Due Date For Resolved Reporting Issue</b>	<b>Calculation of Penalty</b>	<b>Penalty Dollars</b>
June Monthly Submission of following year: approx. 8/15	\$3,000	\$3,000
July Monthly Submission of following year: approx. 9/15	\$3,000 + \$3,000	\$6,000
August Monthly Submission of following year: approx. 10/15	\$3,000 + \$3,000 + \$3,000	\$9,000

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

**Section B – Statistical Data Quality Penalties**

★ **5. 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.

# Massachusetts Private Passenger Automobile Statistical Plan

## Part VIII – Record Layouts

### 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](http://www.commauto.com))).

No.	Valid Policy Effective Date(s)	Field	Annual Statement Line of Business Codes	Reporting Position
①	1989 through 1995	Intensified Appraisal ID Code	21.1 Losses	47
	1996 and subsequent	Reserved for Future Use		
②	1991 and subsequent	Producer Code	All	61 – 66
③	1995 and prior	Model Year Code	21.1	43 – 44
④	1995 and subsequent	ZIP Code	All	72 – 80
		Vehicle Identification Number	All	131 – 147
⑤	1996 and subsequent	Model Year Code	All	51 – 52
⑥	2001 and subsequent	OEM Coverage Code	21.1	56
⑦	2001 and subsequent Optional 1/1/1999-12/31/2000	Model Year Century Code	All	36
⑧	2001 and subsequent	Property Damage Limit Code	19.2	39 – 40
	2000 and prior			40
⑨	2002 and prior	Class Group Code	All	54
	2003 and subsequent	Reserved for Future Use		
⑩	2002 and prior	Claim Count	All Losses	90
	2003 and subsequent	Reserved for Future Use		
⑪	2002 and prior	Estimated Annual Mileage Code	All	48-50
	2003 and subsequent	Annual Mileage Code		
⑫	1996 – 2008	Rate Departure Factor Code	All Premiums	88 - 90
	2009 and subsequent	Reserved for Future Use		
⑬	2009 and prior	Accident Town Code	All Losses	40 - 42
	2010 and subsequent	Reserved for Future Use		
⑭	2009 and prior	Pre-Insurance Inspection ID Code	21.1 Premiums	47
	2010 and subsequent	Reserved for Future Use		
⑮	2011 and subsequent Optional 4/1/2010-12/31/2010	Continuous Coverage Discount Code	19.1, 19.2	58
⑯	2011 and subsequent Optional 4/1/2010-12/31/2010	Low Frequency Discount Code	19.1, 19.2	59
⑰	2010 and prior	Symbol Code	21.1	45-46
	2011 and subsequent	Reserved for Future Use		



**Massachusetts Private Passenger Automobile  
Statistical Plan  
Part VIII – Record Layouts**

**PRIVATE PASSENGER RECORD LAYOUT MODIFICATION KEY (continued)**

No.	Valid Policy Effective Date(s)	Field	Annual Statement Line of Business Codes	Reporting Position
⑮	2013 and subsequent Optional 7/1/12 – 12/31/12	Limits Identifier Code	19.2	47
★ ⑯	2020 and subsequent Optional 1/1/20 – 6/30/20	Anti-Theft Device Identification Code	21.1	53
	2019 and prior	Anti-Theft Device Discount Code		

# Massachusetts Private Passenger Automobile Statistical Plan

## Part VIII – Record Layouts

### LIABILITY PREMIUM

1	COMPANY OR GROUP NUMBER CODE	
2		
3		
4	TRANSACTION TYPE CODE	
5		
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY EFFECTIVE DATE	Month
9		Year
10		Year
11		
12	TRANSACTION	Month
13	EFFECTIVE	Year
14	DATE	Year
15	POLICY	Month
16	EXPIRATION	Year
17	DATE	Year
18	STATE CODE	
19	TERRITORY CODE	
20		
21		
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT LINE OF BUSINESS CODE	
25		
26		
27	SUBLINE CODE	
28		
29		
30	CLASSIFICATION CODE	
31		
32		
33		
34		
35		
36	MODEL YEAR CENTURY CODE ⑦	
37	BODILY INJURY LIMITS CODE	
38	PROPERTY DAMAGE LIMIT CODE	
39		
40	⑧	
41	MEDICAL PAYMENTS LIMIT CODE	
42	BODILY INJURY CAUSED BY AN UNINSURED AUTO LIMITS CODE	
43		
44	BODILY INJURY CAUSED BY AN UNDERINSURED AUTO LIMITS CODE	
45		
46	LIMITS IDENTIFIER CODE ⑩	
47		
48	ANNUAL MILEAGE ⑪	
49		
50		

51	MODEL YEAR CODE ⑤	
52	Reserved for Future Use ⑨	
53		
54		
55	PASSIVE RESTRAINT DISC. CODE	
56	DISCOUNT CODE	
57	CONTINUOUS COV. DISC. CODE ⑮	
58	LOW FREQUENCY DISC. CODE ⑯	
59	Reserved for Future Use	
60	PRODUCER CODE ②	
61		
62		
63		
64		
65	Reserved for Future Use	
66		
67		
68		
69		
70	ZIP CODE ④	
71		
72		
73		
74		
75		
76		
77	EXPOSURE	
78		
79		
80		
81		
82		
83		
84	Reserved for Future Use ⑫	
85		
86		
87	Reserved for Future Use	
88		
89		
90		
91		
92	BODILY INJURY PREMIUM	
93		
94		
95		
96		
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101	BODILY INJURY PREMIUM (Continued)	
102	PROPERTY DAMAGE PREMIUM	
103		
104		
105		
106		
107		
108		
109		
110		
111		
112	Reserved for Future Use	
113		
114	POLICY IDENTIFICATION NUMBER	
115		
116		
117		
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119		
120		
121		
122		
123		
124	VEHICLE IDENTIFICATION NUMBER ④	
125		
126		
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128		
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133		
134	COMPANY USE	
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Refer to the Private Passenger Record Layout Modification Key for further information on prior modifications to the noted fields.



# Massachusetts Private Passenger Automobile Statistical Plan Part VIII – Record Layouts

## LIABILITY LOSS

1	COMPANY OR GROUP NUMBER CODE	
2		
3		
4	TRANSACTION TYPE CODE	
5		
6	ACCOUNTING DATE	Month
7		Year
8	POLICY EFFECTIVE DATE	Month
9		Year
10		Year
11	ACCIDENT DATE	Month
12		Day
13		Day
14		Year
15		Year
16	Reserved for Future Use	
17	STATE CODE	
18		
19	TERRITORY CODE	
20		
21		
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT LINE OF BUSINESS CODE	
25		
26		
27	SUBLINE CODE	
28		
29		
30	CLASSIFICATION CODE	
31		
32		
33		
34		
35		
36	MODEL YEAR CENTURY CODE ⑦	
37	LIABILITY LIMITS CODE	
38	Reserved for Future Use	
39		
40		
41	Reserved for Future Use ⑬	
42		
43		
44	Reserved for Future Use	
45		
46		
47	LIMITS IDENTIFIER CODE ⑱	
48	ANNUAL MILEAGE ⑪	
49		
50		

51	MODEL YEAR CODE ⑤	
52		
53	Reserved for Future Use ⑨	
54		
55	PARTIAL/TOTAL LOSS INDICATOR	
56	PASSIVE RESTRAINT DISC. CODE	
57	DISCOUNT CODE	
58	CONTINUOUS COV. DISC. CODE ⑮	
59	LOW FREQUENCY DISC. CODE ⑯	
60	Reserved for Future Use	
61		
62	PRODUCER CODE  ②	
63		
64		
65		
66		
67	Reserved for Future Use	
68		
69		
70		
71		
72	ZIP CODE  ④	
73		
74		
75		
76		
77		
78		
79		
80		
81	Reserved for Future Use	
82	REPORTING DATE	Month
83		Year
84		Year
85	Reserved for Future Use	
86		
87	TYPE OF LOSS CODE	
88	Reserved for Future Use ⑩	
89		
90		
91	LOSS AMOUNT	
92		
93		
94		
95		
96		
97		
98		
99	CLAIM IDENTIFICATION NUMBER	
100		

101	CLAIM IDENTIFICATION NUMBER (Continued)
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	POLICY IDENTIFICATION NUMBER
112	
113	
114	
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116	
117	
118	
119	
120	
121	VEHICLE IDENTIFICATION NUMBER  ④
122	
123	
124	
125	
126	
127	
128	
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131	COMPANY USE
132	
133	
134	
135	
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Refer to the Private Passenger Record Layout Modification Key for further information on prior modifications to the noted fields.

# Massachusetts Private Passenger Automobile Statistical Plan

## Part VIII – Record Layouts

### NO-FAULT PREMIUM

1	COMPANY OR GROUP NUMBER CODE	
2		
3		
4	TRANSACTION TYPE CODE	
5		
6	ACCOUNTING DATE	Month
7		Year
8	POLICY EFFECTIVE DATE	Month
9		Year
10		Year
11	TRANSACTION EFFECTIVE DATE	Month
12		Year
13	POLICY EXPIRATION DATE	Year
14		Month
15		Year
16	STATE CODE	Year
17		
18		
19	TERRITORY CODE	
20		
21		
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT LINE OF BUSINESS CODE	
25		
26		
27	SUBLINE CODE	
28		
29		
30	CLASSIFICATION CODE	
31		
32		
33		
34		
35		
36	MODEL YEAR CENTURY CODE ⑦	
37	PIP COVERAGE CODE	
38	PIP DEDUCTIBLE CODE	
39		
40	Reserved for Future Use	
41		
42		
43		
44		
45		
46		
47		
48	ANNUAL MILEAGE ⑪	
49		
50		

51	MODEL YEAR CODE ⑤
52	
53	
54	Reserved for Future Use ⑨
55	
56	
57	PASSIVE RESTRAINT DISC. CODE
58	DISCOUNT CODE
59	CONTINUOUS COV DISC. CODE ⑯
60	LOW FREQUENCY DISC. CODE ⑰
61	Reserved for Future Use
62	PRODUCER CODE ②
63	
64	
65	
66	
67	Reserved for Future Use
68	
69	
70	
71	
72	ZIP CODE ④
73	
74	
75	
76	
77	
78	
79	
80	EXPOSURE
81	
82	
83	
84	
85	
86	Reserved for Future Use ⑫
87	
88	
89	Reserved for Future Use
90	
91	
92	
93	
94	
95	PIP (NO-FAULT) PREMIUM
96	
97	
98	
99	
100	

101	PIP (NO-FAULT) PREMIUM (Continued)
102	
103	
104	Reserved for Future Use
105	
106	
107	
108	
109	
110	POLICY IDENTIFICATION NUMBER
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	VEHICLE IDENTIFICATION NUMBER ④
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	COMPANY USE
131	
132	
133	
134	
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Refer to the Private Passenger Record Layout Modification Key for further information on prior modifications to the noted fields.

# Massachusetts Private Passenger Automobile Statistical Plan Part VIII – Record Layouts

## NO-FAULT LOSS

1	COMPANY OR GROUP NUMBER CODE	
2		
3		
4	TRANSACTION TYPE CODE	
5		
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY EFFECTIVE DATE	Month
9		Year
10		Year
11	ACCIDENT DATE	Month
12		Day
13		Day
14		Year
15		Year
16	Reserved for Future Use	
17	STATE CODE	
18		
19	TERRITORY CODE	
20		
21		
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT LINE OF BUSINESS CODE	
25		
26		
27	SUBLINE CODE	
28		
29		
30	CLASSIFICATION CODE	
31		
32		
33		
34		
35		
36	MODEL YEAR CENTURY CODE ⑦	
37	PIP COVERAGE CODE	
38	PIP DEDUCTIBLE CODE	
39	Reserved for Future Use	
40		
41		
42	⑬	
43	Reserved for Future Use	
44		
45		
46		
47		
48	ANNUAL MILEAGE ⑪	
49		
50	CODE	

51	MODEL YEAR CODE ⑤
52	
53	
54	TYPE OF CLAIMANT
55	
56	
57	PASSIVE RESTRAINT DISC. CODE
58	DISCOUNT CODE
59	CONTINUOUS COV DISC. CODE ⑮
60	LOW FREQUENCY DISC. CODE ⑯
61	Reserved for Future Use
62	PRODUCER CODE
63	
64	
65	
66	
67	Reserved for Future Use
68	
69	
70	
71	ZIP CODE
72	
73	
74	
75	
76	④
77	
78	
79	
80	Reserved for Future Use
81	
82	
83	
84	
85	
86	TYPE OF LOSS CODE
87	
88	
89	Reserved for Future Use ⑩
90	
91	
92	LOSS AMOUNT
93	
94	
95	
96	
97	
98	
99	
100	CLAIM IDENTIFICATION NUMBER

101	CLAIM IDENTIFICATION NUMBER (Continued)
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	POLICY IDENTIFICATION NUMBER
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	VEHICLE IDENTIFICATION NUMBER
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	④
132	
133	
134	
135	
136	
137	
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141	COMPANY USE
142	
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Refer to the Private Passenger Record Layout Modification Key for further information on prior modifications to the noted fields.

# Massachusetts Private Passenger Automobile Statistical Plan Part VIII – Record Layouts

## PHYSICAL DAMAGE PREMIUM

1	COMPANY OR GROUP NUMBER CODE		51	MODEL YEAR CODE ⑤	101	OTHER THAN COLLISION PREMIUM (Continued)
2			52		102	
3			★53	ANTI-THEFT DEVICE ID CODE ⑯	103	
4	TRANSACTION TYPE CODE		54	Reserved for Future Use ⑨	104	COLLISION PREMIUM
5			55		105	
6	ACCOUNTING DATE	Month	56	OEM COVERAGE CODE ⑥	106	
7		Year	57	DISCOUNT CODE	107	
8	POLICY EFFECTIVE DATE	Month	58	VALUE CODE	108	
9		Year	59		109	
10		Year	60		110	
11	TRANSACTION EFFECTIVE DATE	Month	61	PRODUCER CODE ②	111	Reserved for Future Use
12		Year	62		112	
13	POLICY EXPIRATION DATE	Year	63		113	
14		Month	64		114	POLICY IDENTIFICATION NUMBER
15		Year	65		115	
16		Year	66		116	
17	STATE CODE		67	HIGH-THEFT VEHICLE CODE	117	
18			68	Reserved for Future Use	118	
19	TERRITORY CODE		69	EXTRA-RISK RATING CODE – OTC	119	
20			70	Reserved for Future Use	120	
21			71	EXTRA-RISK RATING CODE – COLL	121	
22	CAR IDENTIFICATION CODE		72	ZIP CODE ④	122	
23	TYPE OF RISK CODE		73		123	
24	ANNUAL STATEMENT LINE OF BUSINESS CODE		74		124	
25			75		125	
26			76		126	
27	SUBLINE CODE		77		127	
28			78		128	
29			79		129	
30	CLASSIFICATION CODE		80	EXPOSURE	130	VEHICLE IDENTIFICATION NUMBER ④
31			81		131	
32			82		132	
33			83		133	
34			84		134	
35			85		135	
36	MODEL YEAR CENTURY CODE ⑦		86	Reserved For Future Use ⑫	136	
37	OTHER THAN COLLISION COVERAGE CODE		87		137	
38			88		138	
39			89	Reserved for Future Use	139	
40	COLLISION COVERAGE CODE		90		140	
41			91		141	
42	Reserved for Future Use ③		92		142	
43			93		143	
44			94		144	
45	Reserved for Future Use ⑰		95	OTHER THAN COLLISION PREMIUM	145	
46			96		146	
47	Reserved for Future Use ⑭		97		147	
48			98		148	COMPANY USE
49			99		149	
50	ANNUAL MILEAGE ⑪ CODE		100		150	

Refer to the Private Passenger Record Layout Modification Key for further information on prior modifications to the noted fields.

# Massachusetts Private Passenger Automobile Statistical Plan

## Part VIII – Record Layouts

### PHYSICAL DAMAGE LOSS

1	COMPANY OR GROUP NUMBER CODE		51	MODEL YEAR CODE ⑤	101	CLAIM IDENTIFICATION NUMBER (Continued)							
2			52		102								
3			★53	103									
4	TRANSACTION TYPE CODE		54	Reserved for Future Use ⑨	104		POLICY IDENTIFICATION NUMBER						
5			55	PARTIAL/TOTAL LOSS INDICATOR	105								
6	ACCOUNTING DATE	Month	56	OEM COVERAGE CODE ⑥	106			VEHICLE IDENTIFICATION NUMBER ④					
7		Year	57	DISCOUNT CODE	107								
8	POLICY EFFECTIVE DATE	Month	58	VALUE CODE	108				COMPANY USE				
9		Year	59										
10		Year	60										
11	ACCIDENT DATE	Month	61	PRODUCER CODE  ②	110					VEHICLE IDENTIFICATION NUMBER ④			
12		Day	62		111								
13		Day	63		112								
14		Year	64		113								
15		Year	65		114								
16	Reserved for Future Use		66		115	VEHICLE IDENTIFICATION NUMBER ④							
17	STATE CODE		67		HIGH-THEFT VEHICLE CODE						116		
18			68	Reserved for Future Use	117								
19	TERRITORY CODE		69	EXTRA-RISK RATING CODE – OTC	118		VEHICLE IDENTIFICATION NUMBER ④						
20			70	Reserved for Future Use	119								
21			71	EXTRA-RISK RATING CODE – COLL.	120								
22	CAR IDENTIFICATION CODE		72	ZIP CODE  ④	121			VEHICLE IDENTIFICATION NUMBER ④					
23	TYPE OF RISK CODE		73		122								
24	ANNUAL STATEMENT LINE OF BUSINESS CODE		74		123								
25			75		124								
26			76		125								
27	SUBLINE CODE		77		126				127	VEHICLE IDENTIFICATION NUMBER ④			
28			78		128								
29			79	129									
30	CLASSIFICATION CODE		80	Reserved for Future Use	130				VEHICLE IDENTIFICATION NUMBER ④				
31			81		131								
32			82		132								
33			83		133								
34			84		134								
35	MODEL YEAR CENTURY CODE ⑦		85	CATASTROPHE CODE	135	VEHICLE IDENTIFICATION NUMBER ④							
36			86	136									
37	COVERAGE CODE		87	TYPE OF LOSS CODE	137		VEHICLE IDENTIFICATION NUMBER ④						
38			88	138									
39	Reserved for Future Use ⑬		89	Reserved for Future Use ⑩	139			VEHICLE IDENTIFICATION NUMBER ④					
40			90		140								
41			91		141								
42	Reserved for Future Use ③		92	LOSS AMOUNT	142					VEHICLE IDENTIFICATION NUMBER ④			
43			93		143								
44			94		144								
45	Reserved for Future Use ⑰		95		LOSS AMOUNT				145		VEHICLE IDENTIFICATION NUMBER ④		
46			96						146				
47	Reserved for Future Use ①		97						LOSS AMOUNT			147	VEHICLE IDENTIFICATION NUMBER ④
48			98									148	
49	ANNUAL MILEAGE ⑪		99	LOSS AMOUNT								149	
50			100			150							

Refer to the Private Passenger Record Layout Modification Key for further information on prior modifications to the noted fields.

# Massachusetts Private Passenger Automobile Statistical Plan Index

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