

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: AR-PC-07-025455  
Company Tracking Number: AR-WC-2007-04  
TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
Product Name: Adopt Revisions to Code 2719  
Project Name/Number: /

## Filing at a Glance

Companies: EMCASCO Insurance Company, Employers Mutual Casualty Company

Product Name: Adopt Revisions to Code 2719 SERFF Tr Num: EMCC-125233017 State: Arkansas

TOI: 16.0 Workers Compensation

SERFF Status: Closed

State Tr Num: AR-PC-07-025455

Sub-TOI: 16.0004 Standard WC

Co Tr Num: AR-WC-2007-04

State Status:

Filing Type: Rule

Co Status:

Reviewer(s): Betty Montesi, Carol Stiffler, Brittany Yielding

Author: Stephanie McBride

Disposition Date: 08/16/2007

Date Submitted: 07/16/2007

Disposition Status: Approved

Effective Date Requested (New): 07/01/2007

Effective Date (New): 08/16/2007

Effective Date Requested (Renewal): 07/01/2007

Effective Date (Renewal):

## General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Domicile Status Comments:

Reference Organization: NCCI

Reference Number: AR-2007-06

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 08/16/2007

State Status Changed: 07/16/2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

July 16, 2007

Honorable Julie Benafield Bowman

Commissioner of Insurance

Arkansas Insurance Department

1200 West Third Street

Little Rock, AR 72201-1904

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
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TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
Product Name: Adopt Revisions to Code 2719  
Project Name/Number: /

EMPLOYERS MUTUAL CASUALTY COMPANY 062-21415

EMCASCO INSURANCE COMPANY 062-21407

Workers Compensation

Adoption of Revisions to Basic Manual Classification Code 2719

Reference: AR-2007-06

Company File #: AR-WC-2007-04

Effective Date: July 1, 2007

The captioned companies are members of the National Council on Compensation Insurance and NCCI files the workers compensation program on our behalf.

With this filing, we are transmitting for filing our intention to adopt the Revisions to Basic Manual Classification Code 2719- Logging or Tree Removal- Certified Mechanized Harvesting Exclusively. This revision is found in reference AR-2007-06.

We supplement this filing with the following:

Transmittal Document

Filing Fee in the amount of \$25.00 sent via EFT

We respectfully request your acknowledgment of this filing. Thank you.

Stephanie McBride

Filings Analyst

Rates and Filings Dept.

800-247-2128 ext. 2684

Stephanie.M.McBride@EMCIns.com

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
 First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: AR-PC-07-025455  
 Company Tracking Number: AR-WC-2007-04  
 TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
 Product Name: Adopt Revisions to Code 2719  
 Project Name/Number: /

## Company and Contact

### Filing Contact Information

Stephanie McBride, Filings Analyst Stephanie.M.McBride@EMCIns.com  
 PO Box 712 (515) 345-2684 [Phone]  
 Des Moines, IA 50306-0712 (515) 345-2223[FAX]

### Filing Company Information

EMCASCO Insurance Company	CoCode: 21407	State of Domicile: Iowa
717 Mulberry Street	Group Code: 62	Company Type: P & C
Des Moines, IA 50309	Group Name:	State ID Number:
(800) 247-2128 ext. [Phone]	FEIN Number: 42-6070764	

Employers Mutual Casualty Company	CoCode: 21415	State of Domicile: Iowa
717 Mulberry Street	Group Code: 62	Company Type: P & C
Des Moines, IA 50309	Group Name:	State ID Number:
(800) 247-2128 ext. [Phone]	FEIN Number: 42-0234980	

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$25.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
EMCASCO Insurance Company	\$25.00	07/16/2007	14613040
Employers Mutual Casualty Company	\$0.00	07/16/2007	

SERFF Tracking Number: EMCC-125233017

State: Arkansas

First Filing Company: EMCASCO Insurance Company, ...

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TOI: 16.0 Workers Compensation

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	08/16/2007	08/16/2007

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Carol Stiffler	08/16/2007	08/16/2007	Stephanie McBride	08/16/2007	08/16/2007
Pending Industry Response	Carol Stiffler	07/16/2007	07/16/2007	Stephanie McBride	08/16/2007	08/16/2007

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Circular #s	Note To Filer	Carol Stiffler	08/16/2007	08/16/2007
Response to objection letters	Note To Filer	Carol Stiffler	08/16/2007	08/16/2007
FYI	Note To Reviewer	Stephanie McBride	08/14/2007	08/14/2007
Objection Letter	Note To Reviewer	Stephanie McBride	07/18/2007	07/18/2007

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: AR-PC-07-025455  
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## Disposition

Disposition Date: 08/16/2007

Effective Date (New): 08/16/2007

Effective Date (Renewal):

Status: Approved

Comment: Workers' compensation filings in Arkansas are prior approval and cannot be approved retroactively. This filing is being approved effective the date that the last correspondence was received on 8/16/07.

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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 Product Name: Adopt Revisions to Code 2719  
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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty		Yes
<b>Supporting Document</b>	NAIC Loss Cost Filing Document for Workers' Compensation		Yes
<b>Supporting Document</b>	NAIC loss cost data entry document		Yes
<b>Supporting Document</b>	Response to Objection Letter		Yes
<b>Supporting Document</b>	Circulars		Yes

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
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TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
Product Name: Adopt Revisions to Code 2719  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 08/16/2007

Submitted Date 08/16/2007

Respond By Date

Dear Stephanie McBride,

This will acknowledge receipt of the captioned filing.

As I previously stated, we do not receive circulars and I am not aware of any revisions filed to Item Filing #02-AR-2007. Maybe if you send me the circulars AR-2007-08 and AR-2007-09 we can determine what you filing.

The title of Item Filing #02-AR-2007 is Revisions to Basic Manual Classification Code 2719--Logging or Tree Removal--Certified Mechanized Harvesting Exclusively. Maybe you are seeing "Revisions" in the title of the Item filing shown in the circular and thinking there were revisions to the original filing?

Please feel free to contact me if you have questions.

Sincerely,

Carol Stiffler

## Response Letter

Response Letter Status Submitted to State

Response Letter Date 08/16/2007

Submitted Date 08/16/2007

Dear Carol Stiffler,

### Comments:

### Response 1

Comments: Carol,

Please see the attached circulars regarding the revision to Item Filing # 02-AR-2007. If you need anything further please let me know.

Thank you

SERFF Tracking Number: EMCC-125233017

State: Arkansas

First Filing Company: EMCASCO Insurance Company, ...

State Tracking Number: AR-PC-07-025455

Company Tracking Number: AR-WC-2007-04

TOI: 16.0 Workers Compensation

Sub-TOI: 16.0004 Standard WC

Product Name: Adopt Revisions to Code 2719

Project Name/Number: /

Stephanie McBride

### Changed Items:

### Supporting Document Schedule Item Changes

Satisfied -Name: Circulars

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

Stephanie McBride

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: AR-PC-07-025455  
Company Tracking Number: AR-WC-2007-04  
TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
Product Name: Adopt Revisions to Code 2719  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 07/16/2007

Submitted Date 07/16/2007

Respond By Date

Dear Stephanie McBride,

This will acknowledge receipt of the captioned filing.

The filing description indicates that you are adopting Reference: AR-2007-06. We have not approved any reference filing with that Item Filing Number. It is possible that you are referring to the Circular Number. We do not receive circulars which are issued after the Item Filing is approved. Often there are Circulars and Item Filings that have the same numbers but are not related to each other. We CANNOT accept the Circular number in lieu of the Item Filing Number. You must state the Item Filing Number. I believe the Item Filing # you want is 02-AR-2007.

Please feel free to contact me if you have questions.

Sincerely,

Carol Stiffler

## Response Letter

Response Letter Status Submitted to State

Response Letter Date 08/16/2007

Submitted Date 08/16/2007

Dear Carol Stiffler,

### Comments:

### Response 1

Comments: Please see attached response to objection letter. Thank you.

### Changed Items:

### Supporting Document Schedule Item Changes

Satisfied -Name: Response to Objection Letter

*SERFF Tracking Number:* EMCC-125233017

*State:* Arkansas

*First Filing Company:* EMCASCO Insurance Company, ...

*State Tracking Number:* AR-PC-07-025455

*Company Tracking Number:* AR-WC-2007-04

*TOI:* 16.0 Workers Compensation

*Sub-TOI:* 16.0004 Standard WC

*Product Name:* Adopt Revisions to Code 2719

*Project Name/Number:* /

**Comment:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

Stephanie McBride

*SERFF Tracking Number:* EMCC-125233017      *State:* Arkansas  
*First Filing Company:* EMCASCO Insurance Company, ...      *State Tracking Number:* AR-PC-07-025455  
*Company Tracking Number:* AR-WC-2007-04  
*TOI:* 16.0 Workers Compensation      *Sub-TOI:* 16.0004 Standard WC  
*Product Name:* Adopt Revisions to Code 2719  
*Project Name/Number:* /

**Note To Reviewer**

**Created By:**

Stephanie McBride on 08/14/2007 10:54 AM

**Subject:**

FYI

**Comments:**

We recently received a revision to Item 02-AR-2007. This revision was announced in circular AR-2007-08 and approved in circular AR-2007-09. We are hereby advising of our intention to adopt this revision. We appreciate your continued review of this filing.

Thank you

Stephanie McBride

*SERFF Tracking Number:* EMCC-125233017      *State:* Arkansas  
*First Filing Company:* EMCASCO Insurance Company, ...      *State Tracking Number:* AR-PC-07-025455  
*Company Tracking Number:* AR-WC-2007-04  
*TOI:* 16.0 Workers Compensation      *Sub-TOI:* 16.0004 Standard WC  
*Product Name:* Adopt Revisions to Code 2719  
*Project Name/Number:* /

**Note To Reviewer**

**Created By:**

Stephanie McBride on 07/18/2007 08:13 AM

**Subject:**

Objection Letter

**Comments:**

Carol,

Please see attached memo and let me know if you need anything else.

Thank you

Stephanie McBride



717 Mulberry  
Des Moines, IA 50309-3872  
P.O. Box 712  
Des Moines, IA 50303-0712  
Phone 515.280.2511  
www.emcinsurance.com

July 18, 2007

Carol Stiffler  
Arkansas Insurance Department  
1200 West Third Street  
Little Rock, AR 72201-1904

Dear Carol,

This is in regards to your objection letter dated 7-16-2007. I tried to amend the filing description on the General Information tab but was unable to do so. With this letter we are acknowledging that the Item Filing we wish to adopt is number 02-AR-2007. Please let me know if this is acceptable documentation to amend this filing. Thank you.

Stephanie McBride  
Filings Analyst  
Rates and Filings Dept.  
800-247-2128 ext. 2684  
Stephanie.M.McBride@EMCIns.com

*SERFF Tracking Number:*      *EMCC-125233017*                      *State:*                      *Arkansas*  
*First Filing Company:*      *EMCASCO Insurance Company, ...*                      *State Tracking Number:*      *AR-PC-07-025455*  
*Company Tracking Number:*      *AR-WC-2007-04*  
*TOI:*                      *16.0 Workers Compensation*                      *Sub-TOI:*                      *16.0004 Standard WC*  
*Product Name:*                      *Adopt Revisions to Code 2719*  
*Project Name/Number:*                      */*

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: EMCC-125233017 State: Arkansas  
First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: AR-PC-07-025455  
Company Tracking Number: AR-WC-2007-04  
TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC  
Product Name: Adopt Revisions to Code 2719  
Project Name/Number: /

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-Property & Casualty **Review Status:** 07/13/2007

**Comments:**

**Attachment:**

P&C Transmittal- Code 2719.pdf

**Bypassed -Name:** NAIC Loss Cost Filing Document for Workers' Compensation **Review Status:** 07/13/2007

**Bypass Reason:** N/A

**Comments:**

**Bypassed -Name:** NAIC loss cost data entry document **Review Status:** 07/13/2007

**Bypass Reason:** N/A

**Comments:**

**Satisfied -Name:** Response to Objection Letter **Review Status:** 08/16/2007

**Comments:**

**Attachment:**

Obj Letter Response 2.pdf

**Satisfied -Name:** Circulars **Review Status:** 08/16/2007

**Comments:**

**Attachments:**

Circular AR-2007-08.pdf

Circular AR-2007-09.pdf

## Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b> a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">New Business</td> <td></td> </tr> <tr> <td>Renewal Business</td> <td></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

<b>3. Group Name</b>	<b>Group NAIC #</b>
EMC Insurance Companies	062

4. Company Name(s)	Domicile	NAIC #	FEIN #
Employers Mutual Casualty Company	IA	21415	42-0234980
EMCASCO Insurance Company	IA	21407	42-6070764

<b>5. Company Tracking Number</b>	<b>AR-WC-2007-04</b>
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**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Stephanie McBride P. O. Box 712	Filings Analyst	800-247-2128 Ext. 2684	515-345-2223	Stephanie.M.McBride@EMCIns.com
	Des Moines IA 50306				

7.	Signature of authorized filer	
8.	Please print name of authorized filer	Stephanie McBride

**Filing information** (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	16.0000
10.	Sub-Type of Insurance (Sub-TOI)	16.0004
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	<b>Workers Compensation</b>
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: 7/1/07      Renewal: 7/1/07

## Property & Casualty Transmittal Document---

15.	<b>Reference Filing?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	<b>Reference Organization</b> (if applicable)	NCCI
17.	<b>Reference Organization # &amp; Title</b>	AR-2007-06
18.	<b>Company's Date of Filing</b>	7/16/07
19.	<b>Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

20.	<b>This filing transmittal is part of Company Tracking #</b>	AR-WC-2007-04
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21.	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	
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The captioned companies are members of the National Council on Compensation Insurance and NCCI files the workers compensation program on our behalf.

With this filing, we are transmitting for filing our intention to adopt the Revisions to Basic Manual Classification Code 2719- Logging or Tree Removal- Certified Mechanized Harvesting Exclusively. This revision is found in reference AR-2007-06.

We supplement this filing with the following:  
 Transmittal Document  
 Filing Fee in the amount of \$25.00 sent via EFT

We respectfully request your acknowledgment of this filing. Thank you

22.	<b>Filing Fees</b> (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]	
<p><b>Check #:</b> EFT  <b>Amount:</b> 25.00</p> <p><b>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</b></p>		

**\*\*\*Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**



717 Mulberry  
Des Moines, IA 50309-3872  
P.O. Box 712  
Des Moines, IA 50303-0712  
Phone 515.280.2511  
www.emcinsurance.com

August 16, 2007

Honorable Julie Benafield Bowman  
Commissioner of Insurance  
Arkansas Insurance Department  
1200 West Third Street  
Little Rock, AR 72201-1904

EMPLOYERS MUTUAL CASUALTY COMPANY – 062-21415  
EMCASCO INSURANCE COMPANY – 062-21407  
Workers Compensation  
Response to Objection Letter  
Company Filing #: AR-WC-2007-04

This is in regards to the objection letter dated 7-16-2007. With this letter we are acknowledging that the Item Filing we wish to adopt is number 02-AR-2007. We would also like to adopt the revision to this item which was announced in circular AR-2007-08 and approved in circular AR-2007-09. We appreciate your continued review of this filing. Thank you.

Stephanie McBride  
Filings Analyst  
Rates and Filings Dept.  
800-247-2128 ext. 2684  
Stephanie.M.McBride@EMCIns.com



# Circular

JULY 24, 2007

ANNOUNCEMENT

AR-2007-08

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**Arkansas—02-AR-2007—Revisions to Basic Manual Classification Code 2719—Logging or Tree Removal—Certified Mechanized Harvesting Exclusively—Revision to Circular AR-2007-06**

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**ACTION NEEDED**

Please review the changes outlined in the attachments to this circular for impact on your company's systems and procedures. Also review the *Status of Item Filings* circular for state approval of this item.

**Caution:** At the time of distribution of this circular, this filing has been filed with the regulator **but is not yet approved**. This information is provided for your convenience and analysis. Please do not use this information until the regulator has approved the filing.

**Arkansas law does not permit NCCI to file rules on its members' behalf. Therefore, an independent filing must be made with the Arkansas Insurance Department electing to adopt or not adopt Item 02-AR-2007 filed by NCCI and subsequently approved by the Department.**

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**BACKGROUND**

The Arkansas Insurance Department has directed NCCI to amend Arkansas state special Classification Code 2719. This code is applicable to all employers of forestry workers whose employees have obtained the appropriate safety training certification from the Arkansas Timber Producers Association (ATPA). These revisions will clarify the proper classification when the ATPA certification lapses during the policy period.

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**IMPACT**

Little or no reclassification of logging operations' payroll is expected due to this wording-only change. Likewise, no significant change in statewide premium is expected.

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**NCCI ACTION**

Upon approval, NCCI will release updated pages of NCCI's *Basic Manual for Workers Compensation and Employers Liability Insurance*. If you would like to subscribe to any of our manuals, please call our Customer Service Center at 800-NCCI-123.

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**PERSON TO CONTACT**

If you have any questions, please contact:  
Terri Robinson  
State Relations Executive  
NCCI, Inc.  
11430 Gravois Road, Suite 310  
St. Louis, MO 63126  
314-843-4001  
terri\_robinson@ncci.com

Technical Contact:  
Veruschka Zachtshinsky  
Regulatory Services Manager  
NCCI, Inc.  
901 Peninsula Corporate Circle  
Boca Raton, FL 33487  
561-893-3198  
veruschka\_zachtshinsky@ncci.com

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# Circular

JULY 27, 2007

APPROVAL

AR-2007-09

## Arkansas—02-AR-2007—Revision to Basic Manual Classification Code 2719—Logging or Tree Removal—Certified Mechanized Harvesting Exclusively

### ACTION NEEDED

This circular announces the approval of Item 02-AR-2007. Please review the proposed changes in the circular for impact on your company's procedures.

The Arkansas Insurance Department has approved this item with an **effective date of July 1, 2007** for new and renewal voluntary and assigned risk policies.

**Arkansas Law does not permit NCCI to file rules on its members' behalf. Therefore, an independent filing must be made with the Arkansas Insurance Department electing to adopt or not adopt Item 02-AR-2007 filed by NCCI and subsequently approved by the Department.**

### BACKGROUND

The Arkansas Insurance Department has directed NCCI to amend Arkansas state special Classification Code 2719. This code is applicable to all employers of forestry workers who have obtained the appropriate safety training certification from the Arkansas Timber Producers Association (ATPA). Revisions to Code 2719 will clarify the proper classification when the ATPA certification lapses during the policy period.

### IMPACT

Little or no reclassification of logging operations' payroll is expected due to this wording-only change. Likewise, no significant change in statewide premium is expected.

### NCCI ACTION

NCCI will update the *Status of Item Filings* circular with the approval of Item 02-AR-2007 in Arkansas. Updated pages will be mailed to subscribers of NCCI's *Basic Manual for Workers Compensation and Employers Liability Insurance* and posted on [ncci.com](http://ncci.com).

### PERSON TO CONTACT

If you have any questions, please contact:  
Terri Robinson  
State Relations Executive  
NCCI, Inc.  
11430 Gravois Road, Suite 310  
St. Louis, MO 63126  
314-843-4001  
[terri\\_robinson@ncci.com](mailto:terri_robinson@ncci.com)

Technical Contact:  
Veruschka Zachtshinsky  
Regulatory Services Manager  
NCCI, Inc.  
901 Peninsula Corporate Circle  
Boca Raton, FL 33487  
561-893-3198  
[veruschka\\_zachtshinsky@ncci.com](mailto:veruschka_zachtshinsky@ncci.com)