

SERFF Tracking Number: AMST-125909726 State: Arkansas
 First Filing Company: American Interstate Insurance Company, ... State Tracking Number: EFT \$25
 Company Tracking Number: 08-0221 & 08-0222
 TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC
 Product Name: Rule Filing
 Project Name/Number: NCCI Item B-1412--Revisions to Basic Manual Classifications & Appendix E--Classifications by Hazard Group/08-0221 and 08-0222

Filing at a Glance

Companies: American Interstate Insurance Company, Silver Oak Casualty, Inc.

Product Name: Rule Filing	SERFF Tr Num: AMST-125909726	State: Arkansas
TOI: 16.0 Workers Compensation	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 16.0004 Standard WC	Co Tr Num: 08-0221 & 08-0222	State Status: Fees verified and received
Filing Type: Rule	Co Status:	Reviewer(s): Betty Montesi, Carol Stiffler
	Authors: Mary McManus, Paul Logue	Disposition Date: 11/21/2008
	Date Submitted: 11/21/2008	Disposition Status: Approved
Effective Date Requested (New): 07/01/2011		Effective Date (New): 07/01/2011
Effective Date Requested (Renewal): 07/01/2011		Effective Date (Renewal):
State Filing Description:		

General Information

Project Name: NCCI Item B-1412--Revisions to Basic Manual Classifications & Appendix E--Classifications by Hazard Group	Status of Filing in Domicile: Not Filed
Project Number: 08-0221 and 08-0222	Domicile Status Comments:
Reference Organization: NCCI	Reference Number: CIF-2008-44
Reference Title: Item Filing B-1412--Revisions to Basic Manual Classifications and Appendix E--Classifications by Hazard Group	Advisory Org. Circular: AR-2008-09
Filing Status Changed: 11/21/2008	
State Status Changed: 11/21/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Dear Commissioner Bowman:	

American Interstate Insurance Company and Silver Oak Casualty, Inc. wish to adopt the rules information pertaining to NCCI Circular AR-2008-09, Item Filing B-1412--Revisions to Basic Manual Classifications and Appendix E--

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Classifications by Hazard Group.

In accordance with Arkansas' prior approval, thirty-day waiting period regulations, we respectfully request an effective date of July 1, 2011. We will exercise the deemer provision on that date unless disapproved within the thirty-day waiting period or any extensions thereof.

The required filing fee of \$25.00 is being submitted via ETF. If you have any questions, please do not hesitate to contact me at 1-800-256-9052 extension 3275 or email me at mmcmanus@amerisafe.com.

Sincerely,

Mary McManus, CISR
Filing Services Specialist

Company and Contact

Filing Contact Information

Mary McManus, Filing Services Specialist
2301 Highway 190 West
DeRidder, LA 70634
mmcmanus@amerisafe.com
(800) 256-9052 [Phone]
(337) 460-3550[FAX]

Filing Company Information

American Interstate Insurance Company
2301 Highway 190 West
DeRidder, LA 70634
(800) 256-9052 ext. 3323[Phone]
CoCode: 31895
Group Code: 680
Group Name: Amerisafe, Inc.
FEIN Number: 58-1181498
State of Domicile: Louisiana
Company Type:
State ID Number:

Silver Oak Casualty, Inc.
2301 Highway 190 West
DeRidder, LA 70634
(800) 256-9052 ext. 3323[Phone]
CoCode: 26869
Group Code: 680
Group Name: Amerisafe, Inc.
FEIN Number: 72-1215354
State of Domicile: Louisiana
Company Type:
State ID Number:

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	11/21/2008	11/21/2008

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Disposition

Disposition Date: 11/21/2008

Effective Date (New): 07/01/2011

Effective Date (Renewal):

Status: Approved

Comment:

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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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	Yes
Supporting Document	NAIC loss cost data entry document	Approved	Yes
Supporting Document	Rate/Rule Schedule	Approved	Yes
Supporting Document	Explanatory Memorandum	Approved	Yes

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Rate Information

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty **Review Status:** Approved 11/21/2008

Comments:

Attachment:

P&CTransmit-08-0221&08-0222.pdf

Bypassed -Name: NAIC Loss Cost Filing Document for Workers' Compensation **Review Status:** Approved 11/21/2008

Bypass Reason: N/A - Rule Filing only

Comments:

Bypassed -Name: NAIC loss cost data entry document **Review Status:** Approved 11/21/2008

Bypass Reason: N/A - Rule Filing Only

Comments:

Satisfied -Name: Rate/Rule Schedule **Review Status:** Approved 11/21/2008

Comments:

Attachment:

Rate-RuleSched-08-0221&08-0222.pdf

Satisfied -Name: Explanatory Memorandum **Review Status:** Approved 11/21/2008

Comments:

Attachment:

ExplanMemo-08-0221&08-0222.pdf

Property & Casualty Transmittal Document

Reset Form

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	<input type="checkbox"/> New Business <input type="checkbox"/> Renewal Business	
	f. State Filing #	
	g. SERFF Filing # AMST-125909726	
h. Subject Codes		

3.	Group Name Amerisafe, Inc.	Group NAIC # 0680			
4.	Company Name(s)	Domicile	NAIC #	FEIN #	State #
	American Interstate Insurance Company	Louisiana	31895	58-1181498	
	Silver Oak Casualty, Inc.	Louisiana	26869	72-1215354	

5. Company Tracking Number	#08-0221 (AIC) & #08-0222 (SOI)
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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
	Mary McManus, 2301 Hwy 190 West DeRidder, LA 70634	Filing Services Specialist	(800)256-9052	337-463-3550	mmcmanus@amerisafe.com
7.	Signature of authorized filer		<i>Mary McManus</i>		
8.	Please print name of authorized filer		Mary McManus		

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

9.	Type of Insurance (TOI)	16.000 Workers' Compensation
10.	Sub-Type of Insurance (Sub-TOI)	16.004 Workers' Compensation
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing title)	WC Rule Filing; Item Filing B-1412
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: July 1, 2011 Renewal: July 1, 2011
15.	Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	Reference Organization (if applicable)	NCCI Circular CIF-2008-44
17.	Reference Organization # & Title	Item B-1412- Rev. to Basic Manual Classifications & Appendix B--Classification by Hazard Group
18.	Company's Date of Filing	November 19, 2008
19.	Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document-

20.	This filing transmittal is part of Company Tracking #	08-0221 & 08-0222
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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RE: American Interstate Insurance Company (AIIC) - NAIC # 31895
Silver Oak Casualty, Inc. (SOIC) - NAIC # 26869
Workers' Compensation: Rule Filing
NCCI Announcement Circular: CIF-2008-44; Item Filing B-1412 - Revisions to Basic Manual Classifications and Appendix E--Classifications by Hazard Group
Company Filing # 08-0221 (AIIC) & 08-0222 (SOIC)

Dear Commissioner:

AIIC and SOIC wish to adopt the rules information pertaining to NCCI Circular AR-2008-09, Item Filing B-1412--Revisions to Basic Manual Classifications and Appendix E--Classifications by Hazard Group.

In accordance with Arkansas' prior approval, thirty-day waiting period regulations, we respectfully request an effective date of July 1, 2011. We will exercise the deemer provision on that date unless disapproved within the thirty-day waiting period or any extensions thereof.

The required filing fee of \$25.00 is being submitted via ETF. If you have any questions, please do not hesitate to contact me at 1-800-256-9052 extension 3275 or email me at mmcmanus@amerisafe.com.

Sincerely,
Mary McManus, CISR
Filing Services Specialist

[View Complete Filing Description](#)

22.	Filing Fees (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]
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Check #-
Amount: \$25.00

Filing Fee submitted via ETF.

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

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

RATE / RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	08-0221 & 08-0222
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	N/A
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Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	Prior Approval
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4a.	Rate Change by Company (As Proposed)						
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
American Interstate Insurance Company	0%	0%	9,144,288	423	9,144,288	0%	0%

4b.	Rate Change by Company (As Accepted) For State Use Only						
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change
N/A							

5. Overall Rate Information (Complete for Multiple Company Filings only)

		COMPANY USE	STATE USE
5a	Overall percentage rate indication (when applicable)	N/A	
5b	Overall percentage rate impact for this filing	N/A	
5c	Effect of Rate Filing - Written premium change for this program	N/A	
5d	Effect of Rate Filing - Number of policyholders affected	N/A	

6.	Overall percentage of last rate revision	N/A
7.	Effective Date of last rate revision	N/A
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	N/A

	Rule # or Page # Submitted for Review	Replacement or withdrawn? N/A	Previous state filing number, if required by state
01		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

**ARKANSAS
EXPLANATORY MEMORANDUM**

American Interstate Insurance Company
Silver Oak Casualty, Inc.

Filing Number	08-0221 (AIC) & 08-0222 (SOI)
Company	American Interstate Insurance Company Silver Oak Casualty, Inc.
Address	2301 HIGHWAY 190 WEST DERIDDER, LA 70634
NAIC Number	31895 and 26869
State	Arkansas
Addressed to:	Julie Benefield Bowman Insurance Commissioner Arkansas Department of Insurance 1200 West Third Street Little Rock, AR 72201-1904
Date of Filing	11/19/2008
Line of Insurance	Workers' Compensation
Explanation of Filing	Adopt the rules information pertaining to NCCI's Circular CIF-2008-44, Item Filing B-1412, with an effective date of July 1, 2011. In accordance with Arkansas' prior approval, 30-day waiting period regulations, we will exercise deemer provision on that date unless disapproved within the 30-day waiting period or any extensions thereof.
State Filing Forms Attached	Property & Casualty Transmittal (2 pages) Rate/Rule Filing Schedule Explanatory Memorandum Payment made by ETF
Copies	1
Return Envelope	0
Filing Requirements	Prior Approval
Proposed Effective - -	7/1/2011
Check attached	N/A - \$25.00 payment made by ETF
Contact Person	Mary McManus Filing Services Specialist
Phone number -	1-800-256-9052 EXT. 3275 E-MAIL - mmcmanus@amerisafe.com