

SERFF Tracking Number: METX-125510641 State: Arkansas
Filing Company: Metropolitan Property and Casualty Insurance Company State Tracking Number: EFT \$25
Company Tracking Number: BOTAR0004201R01
TOI: 09.0 Inland Marine Sub-TOI: 09.0006 Other Personal Inland Marine
Product Name: Payment Plans
Project Name/Number: /BOTAR0004201R01

Filing at a Glance

Company: Metropolitan Property and Casualty Insurance Company

Product Name: Payment Plans	SERFF Tr Num: METX-125510641	State: Arkansas
TOI: 09.0 Inland Marine	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 09.0006 Other Personal Inland Marine	Co Tr Num: BOTAR0004201R01	State Status: Fees verified and received
Filing Type: Rule	Co Status:	Reviewer(s): Becky Harrington, Betty Montesi, Brittany Yielding
	Author: Richard Collard	Disposition Date: 02/29/2008
	Date Submitted: 02/27/2008	Disposition Status: Filed
Effective Date Requested (New): 06/19/2008		Effective Date (New): 06/19/2008
Effective Date Requested (Renewal): 07/24/2008		Effective Date (Renewal): 07/24/2008

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile:
Project Number: BOTAR0004201R01	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 02/29/2008	
State Status Changed: 02/27/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Metropolitan filed and introduced a Recurring Credit Card payment option on February 15, 2007. Since that time, it has become an increasingly popular choice among our new business policyholders. Unfortunately, we are incurring an unplanned expense from the various credit card companies with whom we are transacting of approximately two percent

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of each policy's premium. In researching this matter further, we have found that our major competitors, who are also offering this payment option, are offsetting their expenses by charging a monthly transaction fee. Therefore, in order to maintain our competitiveness in continuing to offer this payment option, we propose to begin charging a monthly transaction fee of two dollars (\$2.00) to partially offset a portion of our expenses incurred.

Company and Contact

Filing Contact Information

Mary Tilton, State Filings Specialist mtilton@metlife.com
 700 Quaker Lane (401) 827-2035 [Phone]
 Warwick, RI 02887 (401) 827-3929[FAX]

Filing Company Information

Metropolitan Property and Casualty Insurance CoCode: 26298 State of Domicile: Rhode Island
 Company
 700 Quaker Lane Group Code: 241 Company Type: Property and
 Casualty
 Warwick, RI 02887 Group Name: Metropolitan PropertyState ID Number:
 and Casualty Insurance Company
 (401) 827-2000 ext. [Phone] FEIN Number: 13-2725441

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Metropolitan Property and Casualty Insurance Company	\$25.00	02/27/2008	18181076

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	02/29/2008	02/29/2008

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	Becky Harrington	02/27/2008	02/27/2008	Richard Collard	02/29/2008	02/29/2008

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Disposition

Disposition Date: 02/29/2008

Effective Date (New): 06/19/2008

Effective Date (Renewal): 07/24/2008

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC loss cost data entry document		No
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp		No
Rate (revised)	AR BOAT PAYMENT PLAN-6-2008	Filed	Yes
Rate	AR BOAT PAYMENT PLAN-6-2008		Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 02/27/2008
Submitted Date 02/27/2008
Respond By Date
Dear Mary Tilton,

This will acknowledge receipt of the captioned filing.

Objection 1

- AR BOAT PAYMENT PLAN-6-2008 (Rate)

Comment: The information for recurring credit card billing is not shown in the chart. Please explain.

Please feel free to contact me if you have questions.

In accordance with Regulation 23, Section 7.A., this filing may not be implemented until 20 days after the requested amendment(s) and/or information is received.

Sincerely,
Becky Harrington

Response Letter

Response Letter Status Submitted to State
Response Letter Date 02/29/2008
Submitted Date 02/29/2008

Dear Becky Harrington,

Comments:

Thank you for the opportunity to provide you with the correct manual page.

Response 1

Comments: Attached please find the correct manual page.

Related Objection 1

Applies To:

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- AR BOAT PAYMENT PLAN-6-2008 (Rate)

Comment:

The information for recurring credit card billing is not shown in the chart. Please explain.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
AR BOAT PAYMENT PLAN- 6-2008	Page 1	Replacement	
Previous Version			
AR BOAT PAYMENT PLAN- 6-2008	Page 1	Replacement	

If you have any questions please feel free to contact me.

Sincerely,

Mary Tilton

Sincerely,
Richard Collard

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	AR BOAT PAYMENT PLAN-6-2008	Page 1	Replacement	Page 1.PDF

METROPOLITAN PROPERTY AND CASUALTY INSURANCE COMPANY
BOATOWNERS PROGRAM
ARKANSAS

PAYMENT PLANS

Payment plans for **12-month** policies are applicable to the following company:

METROPOLITAN PROPERTY AND CASUALTY INSURANCE COMPANY

Payment Plan Type	Payment Plan Description	Premium Remaining/ Approximate Bill Date(s)
1 Pay	100% of premium paid at application or by renewal effective date.	0%
2 Pay	50% of total premium with application or by renewal effective date.	50%/Day 129
4-Pay	25% of total premium with application or by renewal effective date.	25%/Days 40,99 & 160
9-Pay	25% of total premium with application or by renewal effective date.	9.375%/Billed every 31 days
Flexible Payment	NEW BUSINESS - 20% of the total premium with application. Eight additional monthly installments of 10% due in months 3-10. RENEWAL BUSINESS - Installments of 10% billed over 10 months, with 1 st payment due by the renewal effective date. Used to bill a customer for an individual policy or account billing.	10%/Monthly in months 3-10 10%/Monthly over 10 months, 1 st payment by renewal effective date
Payroll Deduction	A payroll deduction system designed to interface with payroll systems of franchise accounts doing business with Metropolitan.	Billed according to payroll system
ExpressIt	Metropolitan will deduct monthly premium payments authorized by the insured from the insured's designated bank account.	Monthly/ Selected date
Recurring Credit Card	Metropolitan will bill monthly premium payments, authorized by the insured, to the insured's credit card.	Monthly/Selected date
Home Account Bill	Metropolitan will send a comprehensive bill for multiple P&C products to the home of the insured. The premium installments will be billed monthly.*	Billed monthly

*Available to franchise accounts only.

Notes: A non-sufficient fund charge of \$20.00 is applicable to all installment payment plans.
A late payment fee of \$25.00 is applicable to all installment payment plans.
A processing fee of \$4.00 is applicable for payments two and subsequent.
A monthly transaction fee of \$2.00 is applicable to the Recurring Credit Card Payment Plan.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Filed 02/29/2008

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

Property & Casualty Transmittal Document

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: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">New Business</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

3.	Group Name	Group NAIC #			
	Metropolitan Property and Casualty Insurance Company	241			
4.	Company Name(s)	Domicile	NAIC #	FEIN #	State #
	Metropolitan Property and Casualty Insurance Company	RI	26298	13-2725441	

5. Company Tracking Number	BOTAR0004201R01
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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 E. Tilton, AIS API 700 Quaker Lane Warwick RI 02887	State Filings Specialist	800-257-5049	401-827-3929	mtilton@metlife.com
7.	Signature of authorized filer		<i>Mary Tilton</i>		
8.	Please print name of authorized filer		Mary E. Tilton, AIS API		

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

9.	Type of Insurance (TOI)	09.0 Inland Marine
10.	Sub-Type of Insurance (Sub-TOI)	09.0006 Other Personal Inland Marine
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	Boatowners Program
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: 06/19/2008 Renewal: 07/24/2008
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	2-26-08
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 #	BOTAR0004201R01
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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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22.	<p>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]</p> <p>Check #: Amount:</p> <p>Filing fee submitted via EFT</p> <p style="text-align: center;">Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>
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***Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

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Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Rate and Rule	AR BOAT PAYMENT PLAN-6-2008	02/27/2008	Page 1.PDF

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BOATOWNERS PROGRAM
ARKANSAS

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A monthly transaction fee of \$2.00 is applicable to the Recurring Credit Card Payment Plan.