

SERFF Tracking Number: PHAR-125593733 State: Arkansas
Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AR-APV-07-08-RR
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Automobile
Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Filing at a Glance

Company: Pharmacists Mutual Insurance Company

Product Name: Personal Automobile SERFF Tr Num: PHAR-125593733 State: Arkansas
TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: EFT \$50
Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: AR-APV-07-08-RR State Status: Fees verified and received (PPA)
Filing Type: Rate/Rule Co Status: Reviewer(s): Alexa Grissom, Betty Montesi, Brittany Yielding
Author: Kris Laubenthal Disposition Date: 05/05/2008
Date Submitted: 04/28/2008 Disposition Status: Filed
Effective Date Requested (New): 07/01/2008 Effective Date (New): 07/01/2008
Effective Date Requested (Renewal): 07/01/2008 Effective Date (Renewal):

State Filing Description:

General Information

Project Name: AR-APV-07-08-RR Status of Filing in Domicile:
Project Number: AR-APV-07-08-RR Domicile Status Comments:
Reference Organization: ISO Reference Number: PP-2007-BRLA2
Reference Title: Advisory Org. Circular: LI-PA-2007-360

Filing Status Changed: 05/05/2008
State Status Changed: 04/29/2008 Deemer Date:
Corresponding Filing Tracking Number: PHAR-125593732 (our file #AR-APV-07-08-F)

Filing Description:

Pharmacists Mutual Insurance Company is a member of ISO for our Personal Automobile program in Alabama and is requesting that this filing become effective for all policies effective on and after July 1, 2008 to coincide with our adoption of ISO's loss cost revision, PP-2007-BRLA2. We are also filing our revised Exception Pages at this time.

In addition, PMIC wishes to adopt a new multi-variate rating structure which will replace our present Safe Driver Credit program. The new rating program includes four rating components: customer loyalty, payment method, insurance

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

scoring and safe driver.

Please refer to the attached documentation for details.

Company and Contact

Filing Contact Information

Kris Laubenthal, State Filings Analyst kris.laubenthal@phmic.com
 PO Box 370 (515) 295-2461 [Phone]
 Algona, IA 50511

Filing Company Information

Pharmacists Mutual Insurance Company CoCode: 13714 State of Domicile: Iowa
 808 Highway 18 West Group Code: 775 Company Type: Mutual
 P.O. Box 370
 Algona, IA 50511 Group Name: State ID Number:
 (800) 247-5930 ext. [Phone] FEIN Number: 42-0223390

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: \$50.00 per rate/rule filing
 Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|--------------------------------------|---------|----------------|---------------|
| Pharmacists Mutual Insurance Company | \$50.00 | 04/28/2008 | 19934095 |

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|--------|---------------|------------|----------------|
| Filed | Alexa Grissom | 05/05/2008 | 05/05/2008 |

Objection Letters and Response Letters

| Objection Letters | | | | Response Letters | | |
|-------------------|---------------|------------|----------------|------------------|------------|----------------|
| Status | Created By | Created On | Date Submitted | Responded By | Created On | Date Submitted |
| Pending | Alexa Grissom | 04/29/2008 | 04/29/2008 | Kris Laubenthal | 04/30/2008 | 04/30/2008 |
| Industry Response | | | | | | |

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Disposition

Disposition Date: 05/05/2008
 Effective Date (New): 07/01/2008
 Effective Date (Renewal):
 Status: Filed
 Comment:

| Company Name: | Overall % Rate Impact: | Written Premium Change for this Program: | # of Policy Holders Affected for this Program: | Premium: | Maximum % Change (where required): | Minimum % Change (where required): | Overall % Indicated Change: |
|--------------------------------------|------------------------|--|--|-----------|------------------------------------|------------------------------------|-----------------------------|
| Pharmacists Mutual Insurance Company | -3.700% | \$29,556 | 419 | \$798,819 | % | % | -3.800% |

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

| Item Type | Item Name | Item Status | Public Access |
|-------------------------------|---|-------------|---------------|
| Supporting Document | A-1 Private Passenger Auto Abstract | Filed | Yes |
| Supporting Document (revised) | APCS-Auto Premium Comparison Survey | Filed | Yes |
| Supporting Document | APCS-Auto Premium Comparison Survey | Filed | Yes |
| Supporting Document | NAIC loss cost data entry document | Filed | Yes |
| Supporting Document | NAIC Loss Cost Filing Document for OTHER than Workers' Comp | Filed | Yes |
| Supporting Document | Uniform Transmittal Document-Property & Casualty | Filed | Yes |
| Supporting Document | Rate Filing Memo & Exhibits | Filed | Yes |
| Rate | Personal Vehicle Manual | Filed | Yes |
| Rate | Personal Automobile Program Manual | Filed | Yes |

SERFF Tracking Number: PHAR-125593733 State: Arkansas
Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AR-APV-07-08-RR
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Automobile
Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 04/29/2008

Submitted Date 04/29/2008

Respond By Date

Dear Kris Laubenthal,

This will acknowledge receipt of the captioned filing. Please submit the APCS in Excel.

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

Response Letter

Response Letter Status Submitted to State

Response Letter Date 04/30/2008

Submitted Date 04/30/2008

Dear Alexa Grissom,

Comments:

Response 1

Comments: Per your request, I have attached the APCS, Premium Survey, in Excel format. Please advise if anything else is required.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: APCS-Auto Premium Comparison Survey

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

SERFF Tracking Number: PHAR-125593733 *State:* Arkansas
Filing Company: Pharmacists Mutual Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: AR-APV-07-08-RR
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Automobile
Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Sincerely,
Kris Laubenthal

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Rate Information

Rate data applies to filing.

Filing Method: File and Use
Rate Change Type: Decrease
Overall Percentage of Last Rate Revision: 0.000%
Effective Date of Last Rate Revision: 08/01/2007
Filing Method of Last Filing: File and Use

Company Rate Information

| Company Name: | Overall % Indicated Change: | Overall % Rate Impact: | Written Premium Change for this Program: | # of Policy Holders Affected for this Program: | Premium: | Maximum % Change (where required): | Minimum % Change (where required): |
|--------------------------------------|-----------------------------|------------------------|--|--|-----------|------------------------------------|------------------------------------|
| Pharmacists Mutual Insurance Company | -3.800% | -3.700% | \$29,556 | 419 | \$798,819 | % | % |

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Rate/Rule Schedule

| Review Status: | Exhibit Name: | Rule # or Page #: | Rate Action | Previous State Filing Attachments Number: | |
|----------------|------------------------------------|-------------------|-------------|---|---------------------------------|
| Filed | Personal Vehicle Manual | AR-R-1 through 7 | Replacement | AR-PC-07-024683 | Rate Pages AR APV 07-08.pdf |
| Filed | Personal Automobile Program Manual | PMIC-1 through 3 | Replacement | AR-PC-07-024683 | AR APV Exception Page 07-08.pdf |

Filed Base Rates by Territory

| <u>Terr</u> | \$75,000 CSL | 25/50 B.I. | \$25,000 P.D | 1,000 MP |
|-------------|-------------------------|-----------------------|-------------------------|---------------------|
| 21 | 528 | 252 | 194 | 33 |
| 22 | 484 | 202 | 218 | 21 |
| 23 | 415 | 166 | 196 | 16 |
| 24 | 421 | 186 | 176 | 18 |
| 25 | 456 | 222 | 163 | 22 |
| 26 | 356 | 161 | 143 | 17 |
| 27 | 302 | 133 | 127 | 16 |
| 28 | 343 | 160 | 131 | 16 |
| 29 | 283 | 121 | 125 | 14 |
| 30 | 369 | 155 | 165 | 14 |
| 31 | 372 | 148 | 177 | 17 |
| 32 | 321 | 143 | 133 | 17 |
| 33 | 354 | 156 | 148 | 16 |

| Increased Limit Factors | | | | | | | |
|--------------------------------|------|----------------------|------|------------------------|------|----------------|------|
| Single Limit | | Bodily Injury | | Property Damage | | Med Pay | |
| 75,000 | 1.00 | 25/50 | 1.00 | 25,000 | 1.00 | 1,000 | 1.00 |
| 100,000 | 1.06 | 50/100 | 1.23 | 50,000 | 1.06 | 2,000 | 1.70 |
| 200,000 | 1.21 | 100/200 | 1.48 | 100,000 | 1.10 | 5,000 | 2.70 |
| 300,000 | 1.30 | 100/300 | 1.49 | 150,000 | 1.13 | 10,000 | 3.46 |
| 500,000 | 1.40 | 250/500 | 1.84 | 200,000 | 1.15 | 25,000 | 4.52 |
| 1,000,000 | 1.48 | 300/300 | 1.90 | 250,000 | 1.17 | 50,000 | 5.26 |
| | | 500/500 | 2.08 | 500,000 | 1.22 | 75,000 | 5.50 |
| | | 500/1000 | 2.09 | 750,000 | 1.24 | 100,000 | 5.58 |
| | | 1000/1000 | 2.23 | 1,000,000 | 1.25 | | |

COMPREHENSIVE \$500 Deductible

| <u>Terr</u> | Base Yr | | | | | | | | | |
|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | <u>2010</u> | <u>2009</u> | <u>2008</u> | <u>2007</u> | <u>2006</u> | <u>2005</u> | <u>2004</u> | <u>2003</u> | <u>2002</u> | <u>2001</u> |
| 21 | 145 | 139 | 132 | 126 | 119 | 114 | 107 | 102 | 98 | 93 |
| 22 | 104 | 100 | 95 | 90 | 85 | 82 | 77 | 73 | 70 | 66 |
| 23 | 77 | 74 | 70 | 67 | 63 | 60 | 57 | 54 | 52 | 49 |
| 24 | 106 | 101 | 96 | 92 | 87 | 83 | 78 | 74 | 71 | 68 |
| 25 | 154 | 147 | 140 | 133 | 126 | 120 | 113 | 108 | 104 | 98 |
| 26 | 142 | 136 | 129 | 123 | 116 | 111 | 105 | 99 | 96 | 90 |
| 27 | 190 | 181 | 173 | 164 | 155 | 149 | 140 | 133 | 128 | 121 |
| 28 | 156 | 149 | 142 | 135 | 127 | 122 | 115 | 109 | 105 | 99 |
| 29 | 132 | 126 | 120 | 114 | 108 | 103 | 97 | 92 | 89 | 84 |
| 30 | 82 | 78 | 75 | 71 | 67 | 64 | 60 | 58 | 55 | 52 |
| 31 | 101 | 96 | 92 | 87 | 83 | 79 | 74 | 71 | 68 | 64 |
| 32 | 156 | 149 | 142 | 135 | 127 | 122 | 115 | 109 | 105 | 99 |
| 33 | 118 | 113 | 107 | 102 | 97 | 92 | 87 | 83 | 79 | 75 |

Symbol Relativities

| | | | | | | | | |
|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| <u>1</u> | <u>2</u> | <u>3</u> | <u>4</u> | <u>5</u> | <u>6</u> | <u>7</u> | <u>8</u> | <u>10</u> |
| 0.38 | 0.49 | 0.59 | 0.67 | 0.75 | 0.84 | 0.92 | 1.00 | 1.09 |
| <u>11</u> | <u>12</u> | <u>13</u> | <u>14</u> | <u>15</u> | <u>16</u> | <u>17</u> | <u>18</u> | |
| 1.20 | 1.31 | 1.43 | 1.56 | 1.72 | 1.87 | 2.02 | 2.16 | |

Deductible Factors

| | | | | | |
|-----------|------------|------------|------------|------------|-------------|
| <u>50</u> | <u>100</u> | <u>200</u> | <u>250</u> | <u>500</u> | <u>1000</u> |
| 1.58 | 1.49 | 1.33 | 1.26 | 1.00 | 0.74 |

COLLISION \$500 Deductible

| Terr | Base Yr | | | | | | | | | |
|-------------|----------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2010 | 2009 | 2008 | 2007 | 2006 | 2005 | 2004 | 2003 | 2002 | 2001 |
| 21 | 531 | 506 | 482 | 453 | 424 | 400 | 367 | 338 | 318 | 299 |
| 22 | 440 | 420 | 400 | 376 | 352 | 332 | 304 | 280 | 264 | 248 |
| 23 | 370 | 353 | 336 | 316 | 296 | 279 | 255 | 235 | 222 | 208 |
| 24 | 409 | 390 | 372 | 350 | 327 | 309 | 283 | 260 | 245 | 231 |
| 25 | 447 | 426 | 406 | 382 | 357 | 337 | 309 | 284 | 268 | 252 |
| 26 | 382 | 364 | 347 | 326 | 305 | 288 | 264 | 243 | 229 | 215 |
| 27 | 389 | 371 | 353 | 332 | 311 | 293 | 268 | 247 | 233 | 219 |
| 28 | 404 | 386 | 367 | 345 | 323 | 305 | 279 | 257 | 242 | 228 |
| 29 | 368 | 351 | 335 | 314 | 294 | 278 | 254 | 234 | 221 | 207 |
| 30 | 346 | 330 | 314 | 295 | 277 | 261 | 239 | 220 | 207 | 195 |
| 31 | 378 | 361 | 344 | 323 | 303 | 285 | 261 | 241 | 227 | 213 |
| 32 | 416 | 397 | 378 | 355 | 333 | 314 | 287 | 265 | 250 | 234 |
| 33 | 346 | 330 | 314 | 295 | 277 | 261 | 239 | 220 | 207 | 195 |

Symbol Relativities

| | | | | | | | | |
|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| <u>1</u> | <u>2</u> | <u>3</u> | <u>4</u> | <u>5</u> | <u>6</u> | <u>7</u> | <u>8</u> | <u>10</u> |
| 0.62 | 0.70 | 0.77 | 0.82 | 0.86 | 0.90 | 0.95 | 1.00 | 1.05 |
| <u>11</u> | <u>12</u> | <u>13</u> | <u>14</u> | <u>15</u> | <u>16</u> | <u>17</u> | <u>18</u> | |
| 1.10 | 1.15 | 1.21 | 1.28 | 1.37 | 1.44 | 1.52 | 1.60 | |

Deductible Factors

| | | | | | |
|------------------|-------------------|-------------------|-------------------|-------------------|--------------------|
| <u>50</u> | <u>100</u> | <u>200</u> | <u>250</u> | <u>500</u> | <u>1000</u> |
| ~ | 1.18 | 1.13 | 1.11 | 1.00 | 0.83 |

PVM RULE 14.A - Uninsured Motorists Coverage

SPLIT LIMITS

BASIC LIMITS - Charge the rates per registered auto displayed below depending on whether the risk is a Single Car or a Multi-Car risk. For Multi-Car risks, apply the rate to each car including the first car.

| Coverage | Territories | Single Car | Multi-Car (Per Car) |
|-----------------------|-----------------|------------|---------------------|
| \$25,000/50,000 BI UM | 21 | \$34 | \$27 |
| | 22, 23, 24 & 25 | \$23 | \$18 |
| | All Remaining | \$16 | \$13 |

SINGLE LIMIT

BASIC LIMITS - Charge the rates per registered auto displayed below depending on whether the risk is a Single Car or a Multi-Car risk. For Multi-Car risks, apply the rate to each car including the first car.

| Coverage | Territories | Single Car | Multi-Car (Per Car) |
|-----------------------------|-----------------|------------|---------------------|
| \$50,000 Single Limit BI UM | 21 | \$42 | \$34 |
| | 22, 23, 24 & 25 | \$28 | \$23 |
| | All Remaining | \$20 | \$16 |

INCREASED LIMITS - Add the additional rate increments shown to the basic limit rates.

| | <u>Single Car</u> | <u>Multi-Car per Car</u> |
|-----------------------|-------------------|--------------------------|
| Territory 21 | | |
| 50/100 | \$11 | \$9 |
| 100/200 | \$23 | \$19 |
| 100/300 | \$23 | \$19 |
| 250/500 | \$39 | \$31 |
| 300/300 | \$42 | \$33 |
| 500/500 | \$49 | \$39 |
| 500/1,000 | \$50 | \$40 |
| 1,000/1,000 | \$57 | \$46 |
| Terr: 22, 23, 24 & 25 | | |
| 50/100 | \$7 | \$6 |
| 100/200 | \$16 | \$12 |
| 100/300 | \$16 | \$13 |
| 250/500 | \$26 | \$21 |
| 300/300 | \$28 | \$22 |
| 500/500 | \$33 | \$26 |
| 500/1,000 | \$33 | \$27 |
| 1,000/1,000 | \$38 | \$31 |
| Terr: All Remaining | | |
| 50/100 | \$5 | \$4 |
| 100/200 | \$11 | \$9 |
| 100/300 | \$11 | \$9 |
| 250/500 | \$18 | \$15 |
| 300/300 | \$20 | \$16 |
| 500/500 | \$23 | \$18 |
| 500/1,000 | \$23 | \$19 |
| 1,000/1,000 | \$27 | \$22 |

INCREASED LIMITS - Add the additional rate increments shown to the basic limit rates.

| | <u>Single Car</u> | <u>Multi-Car per Car</u> |
|-----------------------|-------------------|--------------------------|
| Territory 21 | | |
| 75,000 | \$7 | \$6 |
| 100,000 | \$13 | \$10 |
| 200,000 | \$26 | \$21 |
| 300,000 | \$33 | \$26 |
| 500,000 | \$41 | \$32 |
| 1,000,000 | \$49 | \$39 |
| Terr: 22, 23, 24 & 25 | | |
| 75,000 | \$5 | \$4 |
| 100,000 | \$9 | \$7 |
| 200,000 | \$17 | \$14 |
| 300,000 | \$22 | \$18 |
| 500,000 | \$27 | \$22 |
| 1,000,000 | \$33 | \$26 |
| Terr: All Remaining | | |
| 75,000 | \$3 | \$3 |
| 100,000 | \$6 | \$5 |
| 200,000 | \$12 | \$10 |
| 300,000 | \$15 | \$12 |
| 500,000 | \$19 | \$15 |
| 1,000,000 | \$23 | \$18 |

PVM RULE 14.A - Uninsured Motorists Coverage

SPLIT LIMITS

BASIC LIMITS - Charge the rates per registered auto displayed below depending on whether the risk is a Single Car or a Multi-Car risk. For Multi-Car risks, apply the rate to each car including the first car.

| Coverage | Territories | Single Car | Multi-Car (Per Car) |
|---|-----------------|------------|---------------------|
| \$25,000/50,000/25,000 Bodily Injury & Property Damage* | 21 | \$60 | \$48 |
| | 22, 23, 24 & 25 | \$44 | \$35 |
| | All Remaining | \$34 | \$27 |

*Property Damage Uninsured Motorists Coverage is subject to a \$200 deductible.

SINGLE LIMIT

BASIC LIMITS - Charge the rates per registered auto displayed below depending on whether the risk is a Single Car or a Multi-Car risk. For Multi-Car risks, apply the rate to each car including the first car.

| Coverage | Territories | Single Car | Multi-Car (Per Car) |
|---|-----------------|------------|---------------------|
| \$75,000 Bodily Injury & Property Damage* | 21 | \$75 | \$60 |
| | 22, 23, 24 & 25 | \$55 | \$44 |
| | All Remaining | \$41 | \$33 |

*Property Damage Uninsured Motorists Coverage is subject to a \$200 deductible.

INCREASED LIMITS BI UM - Add the additional rate increments shown to the basic limit rates.

| | Single Car | Multi-Car per Car |
|-----------------------|------------|-------------------|
| Territory 21 | | |
| 50/100 | \$11 | \$9 |
| 100/200 | \$23 | \$19 |
| 100/300 | \$23 | \$19 |
| 250/500 | \$39 | \$31 |
| 300/300 | \$42 | \$33 |
| 500/500 | \$49 | \$39 |
| 500/1,000 | \$50 | \$40 |
| 1,000/1,000 | \$57 | \$46 |
| Terr: 22, 23, 24 & 25 | | |
| 50/100 | \$7 | \$6 |
| 100/200 | \$16 | \$12 |
| 100/300 | \$16 | \$13 |
| 250/500 | \$26 | \$21 |
| 300/300 | \$28 | \$22 |
| 500/500 | \$33 | \$26 |
| 500/1,000 | \$33 | \$27 |
| 1,000/1,000 | \$38 | \$31 |
| Terr: All Remaining | | |
| 50/100 | \$5 | \$4 |
| 100/200 | \$11 | \$9 |
| 100/300 | \$11 | \$9 |
| 250/500 | \$18 | \$15 |
| 300/300 | \$20 | \$16 |
| 500/500 | \$23 | \$18 |
| 500/1,000 | \$23 | \$19 |
| 1,000/1,000 | \$27 | \$22 |

INCREASED LIMITS BI & PD - Add the additional rate increments shown to the basic limit rates.

| | Single Car | Multi-Car per Car |
|-----------------------|------------|-------------------|
| Territory 21 | | |
| 100,000 | \$6 | \$5 |
| 200,000 | \$19 | \$15 |
| 300,000 | \$26 | \$21 |
| 500,000 | \$33 | \$27 |
| 1,000,000 | \$41 | \$33 |
| Terr: 22, 23, 24 & 25 | | |
| 100,000 | \$4 | \$3 |
| 200,000 | \$12 | \$10 |
| 300,000 | \$17 | \$14 |
| 500,000 | \$22 | \$18 |
| 1,000,000 | \$28 | \$22 |
| Terr: All Remaining | | |
| 100,000 | \$3 | \$2 |
| 200,000 | \$9 | \$7 |
| 300,000 | \$12 | \$10 |
| 500,000 | \$16 | \$13 |
| 1,000,000 | \$19 | \$16 |

INCREASED LIMITS PD UM - Add the additional rate increments shown to the basic limit rates.

| | Terr: All Remaining | |
|-----------|---------------------|-----|
| 50,000 | \$1 | \$1 |
| 100,000 | \$2 | \$2 |
| 200,000 | \$3 | \$2 |
| 300,000 | \$4 | \$3 |
| 500,000 | \$5 | \$4 |
| 1,000,000 | \$6 | \$5 |

PVM RULE 14.B - Underinsured Motorists Coverage

| SPLIT LIMITS | <u>Single</u> | <u>Multi-Car</u> | SINGLE LIMIT | <u>Single</u> | <u>Multi-Car</u> |
|--------------|-----------------------|------------------|--------------|-----------------------|------------------|
| | <u>Car</u> | <u>per Car</u> | | <u>Car</u> | <u>per Car</u> |
| | Territory 21 | | | Territory 21 | |
| \$ 25/50 | \$33 | \$27 | \$50,000 | \$56 | \$45 |
| 50/100 | \$57 | \$45 | 75,000 | \$73 | \$59 |
| 100/200 | \$89 | \$71 | 100,000 | \$88 | \$71 |
| 100/300 | \$90 | \$72 | 200,000 | \$126 | \$101 |
| 250/500 | \$141 | \$113 | 300,000 | \$149 | \$120 |
| 300/300 | \$149 | \$120 | 500,000 | \$177 | \$142 |
| 500/500 | \$177 | \$142 | 1,000,000 | \$208 | \$167 |
| 500/1,000 | \$178 | \$143 | | | |
| 1,000/1,000 | \$208 | \$167 | | | |
| | Terr: 22, 23, 24 & 25 | | | Terr: 22, 23, 24 & 25 | |
| \$ 25/50 | \$34 | \$27 | \$50,000 | \$57 | \$46 |
| 50/100 | \$58 | \$47 | 75,000 | \$75 | \$60 |
| 100/200 | \$92 | \$73 | 100,000 | \$91 | \$72 |
| 100/300 | \$93 | \$74 | 200,000 | \$129 | \$103 |
| 250/500 | \$144 | \$116 | 300,000 | \$153 | \$123 |
| 300/300 | \$153 | \$123 | 500,000 | \$182 | \$146 |
| 500/500 | \$182 | \$146 | 1,000,000 | \$214 | \$171 |
| 500/1,000 | \$183 | \$147 | | | |
| 1,000/1,000 | \$214 | \$171 | | | |
| | Terr: All Remaining | | | Terr: All Remaining | |
| \$ 25/50 | \$27 | \$21 | \$50,000 | \$44 | \$35 |
| 50/100 | \$45 | \$36 | 75,000 | \$58 | \$47 |
| 100/200 | \$71 | \$57 | 100,000 | \$70 | \$56 |
| 100/300 | \$72 | \$58 | 200,000 | \$100 | \$80 |
| 250/500 | \$112 | \$90 | 300,000 | \$119 | \$95 |
| 300/300 | \$119 | \$95 | 500,000 | \$141 | \$113 |
| 500/500 | \$141 | \$113 | 1,000,000 | \$166 | \$133 |
| 500/1,000 | \$142 | \$114 | | | |
| 1,000/1,000 | \$166 | \$133 | | | |

14. MISCELLANEOUS COVERAGES

D. Optional Limits Transportation Expenses Coverage

| Coverage | Annual Rate Per Auto |
|----------|-------------------------|
|----------|-------------------------|

\$30/\$900 Optional Limits

| | |
|-------------------------------|-----|
| Transportation Expenses Cover | \$9 |
|-------------------------------|-----|

\$40/1200 Optional Limits

| | |
|-------------------------------|------|
| Transportation Expenses Cover | \$17 |
|-------------------------------|------|

\$50/\$1500 Optional Limits

| | |
|-------------------------------|------|
| Transportation Expenses Cover | \$25 |
|-------------------------------|------|

E. Towing and Labor Costs

| Limit Per Disablement | Rate Per Vehicle, Per Year |
|--------------------------|-------------------------------|
| \$25 | \$4 |
| \$50 | \$6 |
| \$75 | \$8 |
| \$100 | \$10 |

| Limit Per Disablement | Rate Per Motor Home Per Year |
|--------------------------|------------------------------------|
| \$150 | \$10 |
| \$200 | \$13 |
| \$250 | \$17 |

F. Increased Limits for Excess Electronic Equipment

| Maximum Limit of Liability for Excess Electronic | Rate |
|---|----------------|
| \$1,500 | \$45 |
| \$2,000 | \$91 |
| \$2,500 | \$136 |
| \$3,000 | \$181 |
| \$3,500 | \$227 |
| \$4,000 | \$272 |
| \$4,500 | \$317 |
| \$5,000 | \$362 |
| \$5,001 & over | \$32 per \$500 |

G. Tapes, Records, Disks and Other Media Coverage

| Limit of Coverage | Rate per Year |
|-------------------|---------------|
| \$200 | \$15 |

J. Limited Mexico Coverage

| | |
|---------------|-----|
| Rate per Year | \$6 |
|---------------|-----|

K. Trip Interruption Coverage

| Limit of Coverage | Rate per Year |
|-------------------|---------------|
| \$600 | \$14 |

19. MISCELLANEOUS TYPES

B. Trailers Designed For Use With Private Passenger Autos and Camper Bodies

All Other Trailers

| Coverage | Deductible | Rate Per \$100 |
|---------------|------------|-------------------|
| Comprehensive | \$500 | \$0.72 |
| Collision | \$500 | \$0.73 |

D. Snowmobiles and All-Terrain Vehicles

| Coverage | Deductible | \$100 |
|---------------|------------|--------|
| Comprehensive | \$500 | \$1.40 |
| Collision | \$500 | \$1.60 |

E. Dune Buggies

| Coverage | Deductible | \$100 |
|---------------|------------|--------|
| Comprehensive | \$500 | \$1.48 |
| Collision | \$500 | \$5.77 |

F. Golf Carts

| Coverage | Deductible | \$100 |
|---------------|------------|--------|
| Comprehensive | \$500 | \$0.50 |
| Collision | \$500 | \$0.78 |

G. Antique Autos

| Coverage | Deductible | \$100 |
|---------------|------------|--------|
| Comprehensive | \$500 | \$0.75 |
| Collision | \$500 | \$1.10 |

Additional Rule - Arkansas Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit

The rates for Section B. are as follows:

2. Work Loss Coverage
 - b. Rates
 - (2) All other motor vehicles

| | |
|-------------------|-----|
| Rate | |
| Per car, per year | \$5 |
3. Accidental Death Benefit
 - b. Rates
 - (2) All other motor vehicles

| | |
|-------------------|-----|
| Rate | |
| Per car, per year | \$3 |

PHARMACISTS MUTUAL INSURANCE COMPANY
PERSONAL AUTOMOBILE PROGRAM MANUAL
ARKANSAS

Rule 3.E has been withdrawn and replaced by the following:

3.E Premium Determination

This rule is deleted, as Expense Fees will not be added to the premiums.

Rule 4.C.2.c has been withdrawn and replaced by the following:

c. AGE means the age attained within the first six months of the policy period.

Rule 7. has been withdrawn and replaced by the following:

7. Minimum Premium Rule

This rule is deleted.

Rule 9.C. has been amended by the following:

9.C. Minimal Premium Adjustments

The company's "Minimal Premium" is \$5.00.

Rule 10.A. has been withdrawn and replaced by the following:

10.A. If a policy, vehicle or form of coverage is cancelled, return premium will be computed pro rata.

Rule 18.A.2 has been amended by the addition of the following limit option:

18. Increased Limits

A. Liability Increased Limits Tables
\$25,000/50,000 Bodily Injury Liability Increased Limits

| <u>Limit</u> | <u>Factor</u> |
|--------------|---------------|
| 500/500 | 2.08 |

Rule 19.A.2.a. and 19.A.3.e have been withdrawn and replaced by the following:

19. Miscellaneous Types

Rules 19.A.2.a and 19.A.3.e are deleted, as Expense Fees will not be added to the premiums.

PHARMACISTS MUTUAL INSURANCE COMPANY
PERSONAL AUTOMOBILE PROGRAM MANUAL
ARKANSAS

Rule 22. has been added:

22. Personal Package Discount

If an insured has their Personal Auto and Homeowners/ Mobile Homeowners policies with Pharmacists Mutual a premium credit will be given according to the following rules:

1. **Eligibility** - This rule applies only if Personal Auto and Homeowners/Mobile Homeowners policies are written for the same named insured with Pharmacists Mutual.
2. **Premium Discount** - A 5% credit shall apply separately to each policy, after application of all other premium modifications.
3. **Policy Term** - Policies should be written with concurrent inception or expiration dates if possible.

Rule 23. has been added:

23. Multivariate Rating Factors

- A. Safe Driver – One at-fault accident takes the policy back to year 0. Premium adjustments will be applied to bodily injury liability, property damage liability, medical expenses and the collision sections of the policy.

| Accident Free Years | Discount |
|---------------------|----------|
| <4 | 0% |
| 4 -5 | 5% |
| 6+ | 10% |

- B. Loyalty - the premium adjustment will be applied to the total policy premium.

| # Years Personal Auto Policy with PhMIC | Discount |
|---|----------|
| <4 | 0% |
| 4 | 3% |
| 5 | 3.5% |
| 6 | 4% |
| 7 | 5% |
| 8 | 6% |
| 9 | 7% |
| 10 | 8% |
| 11 | 9% |
| 12+ | 10% |

PHARMACISTS MUTUAL INSURANCE COMPANY

PERSONAL AUTOMOBILE PROGRAM MANUAL

ARKANSAS

- C. Payment Method –Full payment must be received by due date for discount to remain on the policy. If partial or EFT payment chosen, policy will be eligible for full payment option at next renewal date. The premium adjustment will be applied to the total policy premium.

| Payment Method | Discount |
|-----------------------|-----------------|
| Partial/EFT | 0% |
| Full | 5% |

- D. Insurance Score – the lowest insurance score of the named insured shown in the Declarations, and the spouse if a resident of the same household, will be used to determine this surcharge/discount. The premium adjustment will be applied to the total policy premium.

| Insurance Score | Surcharge/Discount |
|------------------------|---------------------------|
| No Hit/Thin File | 0% |
| Under 600 | -15% |
| 600-649 | -7.5% |
| 650-749 | 0% |
| 750-849 | 5% |
| 850+ | 10% |

SERFF Tracking Number: PHAR-125593733 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AR-APV-07-08-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Automobile
 Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Supporting Document Schedules

Satisfied -Name: A-1 Private Passenger Auto
 Abstract

Review Status:
 Filed 05/05/2008

Comments:

Attachment:

Form A-1 PPA Abstract - AR APV 07-08.pdf

Satisfied -Name: APCS-Auto Premium Comparison
 Survey

Review Status:
 Filed 05/05/2008

Comments:

Attachment:

PPA Survey FORM APCS - AR APV 07-08.xls

Satisfied -Name: NAIC loss cost data entry document

Review Status:
 Filed 05/05/2008

Comments:

Attachment:

loss_cost_data_entry AR APV 07-08.pdf

Satisfied -Name: NAIC Loss Cost Filing Document
 for OTHER than Workers' Comp

Review Status:
 Filed 05/05/2008

Comments:

Attachments:

NAIC loss cost cover - physical damage coverages.pdf
 NAIC loss cost filing document - Physical Damage LCM.pdf
 NAIC loss cost cover - liability coverages.pdf
 NAIC loss cost filing document - Liability LCM.pdf

Satisfied -Name: Uniform Transmittal Document-
 Property & Casualty

Review Status:
 Filed 05/05/2008

SERFF Tracking Number: PHAR-125593733 *State:* Arkansas
Filing Company: Pharmacists Mutual Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: AR-APV-07-08-RR
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Automobile
Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Comments:

Attachment:

NAIC Transmittal Doc AR APV 07-08-RR.pdf

SERFF Tracking Number: PHAR-125593733 State: Arkansas
Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AR-APV-07-08-RR
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Automobile
Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

Review Status:

Satisfied -Name: Rate Filing Memo & Exhibits

Filed

05/05/2008

Comments:

Attachments:

AR APV Rate Filing Memo 07-08.pdf
Exhibits AR APV 07-08.pdf
Filing Summary AR APV 07-08.pdf
Technical Appendix 0508.pdf
Attract One NCOIL Model.pdf

ARKANSAS INSURANCE DEPARTMENT

FORM A-1 PRIVATE PASSENGER AUTOMOBILE ABSTRACT

Instructions: All questions must be answered. If the answer is "none" or "Not applicable, so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent private passenger auto rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name Pharmacists Mutual Insurance Company
 NAIC # (including group #) NAIC Company #13714; Group #0775

1. Are there any areas in the State of Arkansas in which your company will not write automobile insurance? Yes No
 If yes, list the areas: _____

2. Do you furnish a market for young drivers? Yes No

3. Do require collateral business to support a youthful driver? Yes No

4. Do you insure drivers with an international or foreign driver's license? Yes No

5. Specify the percentage you allow in credit or discounts for the following:

- a. Driver over 55 10%
- b. Good Student Discount 15%
- c. Multi-car Discount 20%
- d. Accident Free Discount* 0-10%

Please Specify Qualification for Discount:
 Please see the Exceptions Page #PMIC-2 in the filing for criteria.

- e. Anti-Theft Discount 15%
- f. Other (specify) %

Airbag/Seatbelt 30%
 Anti-lock brake 5%
 Personal Package (if have HO and APV) 5%
 Driver Training 25%

6. Do you have an installment payment plan for automobile insurance? Yes No
 If so, what is the fee for installment payments?

- A Electronic Funds Transfer = \$1 per month
- B Quarterly: \$5 per installment, not counting the first
- C Semi-annual: \$5 per installment, not counting the first

7. Does your company utilize a tiered rating plan? Yes No
 If so, list the programs and percentage difference and current volume for each plan:

| Program | Percentage Difference | Volume |
|------------------------------|-----------------------|---|
| Multi-variate Rating Program | | Please see our Technical Appendix attached to the filing. |

THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.



Signature

Kris Laubenthal

Printed Name

Rate Filing Analyst

Title

800-247-5930, extension 7322

Telephone Number

Kris.Laubenthal@phmic.com

Email address

AID PC A-1 (1/06)

NAIC LOSS COST DATA ENTRY DOCUMENT (EFFECTIVE AUG. 16, 2004)

1. This filing transmittal is part of Company Tracking # **AR-APV-07-08**

2. If filing is an adoption of an advisory organization loss cost filing, give name of advisory organization and Reference/Item Filing Number **ISO – PP-2007-BRLA2; circular #LI-PA-2007-360**

| | | | | |
|----|----|---|----|---------------------|
| | | Company Name | | Company NAIC Number |
| 3. | A. | Pharmacists Mutual Insurance Company | B. | 13714 |

| | | | | |
|----|----|--|----|---|
| | | Product Coding Matrix Line of Business (i.e., Type of Insurance) | | Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance) |
| 4. | A. | 19.0 Personal Auto | B. | 19.0001 Private Passenger Auto |

5.

| (A) COVERAGE (See Instructions) | (B) Indicated % Rate Level Change | (C) Requested % Rate Level Change | FOR LOSS COSTS ONLY | | | | |
|---------------------------------------|--|--|-------------------------------|--|--|---|---|
| | | | (D) Expected Loss Ratio | (E) Loss Cost Modification Factor | (F) Selected Loss Cost Multiplier | (G) Expense Constant (If Applicable) | (H) Co. Current Loss Cost Multiplier |
| Personal Automobile | Liab: 0.7% | -3.8% | 63.1 | .940 | 1.300 | | 1.300 |
| | Phys Dmg : - 7.1% | -3.7% | 58.1 | 1.08 | 1.556 | | 1.556 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| TOTAL OVERALL EFFECT | -3.8% | -3.7% | | | | | |

6. 5 Year History Rate Change History

| Year | Policy Count | % of Change | Effective Date | State Earned Premium (000) | Incurred Losses (000) | State Loss Ratio | Countrywide Loss Ratio |
|-------------|--------------|-------------|----------------|----------------------------|-----------------------|------------------|------------------------|
| 2003 | 566 | 9.65 | 8/15/03 | 620 | 364 | 58.8 | 64 |
| 2004 | 469 | 9.70 | 9/1/04 | 733 | 538 | 73.3 | 88.7 |
| 2005 | 456 | 7.10 | 8/1/05 | 788 | 624 | 79.2 | 69.9 |
| 2006 | 437 | -0.3 | 8/1/06 | 801 | 521 | 65 | 74.2 |
| 2007 | 419 | 0.0 | 8/1/07 | 805 | 349 | 43 | 57.5 |

7.

| Expense Constants | Selected Provisions |
|---|------------------------------------|
| A. Total Production Expense | 18.5 |
| B. General Expense | 5.0 |
| C. Taxes, License & Fees | 2.5 |
| D. Underwriting Profit & Contingencies | 5.0 |
| E. Other (explain) INVESTMENT INCOME | LI: -4.1 PD: -0.3 |
| F. TOTAL | LI: 26.9 PD: 30.7 |

8. Y Apply Lost Cost Factors to Future filings? (Y or N)
9. **4.6%** Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____
10. **-1.3%** Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): Territory 31 _____

Date: 4/14/2008

| |
|--|
| Space Reserved for Insurance Department Use |
| |

**OTHER THAN WORKERS' COMPENSATION
LOSS COST FILING DOCUMENT COVER FORM**

**INSURER RATE FILING
ADOPTION OF ADVISORY ORGANIZATION
PROSPECTIVE LOSS COSTS**

1. INSURER NAME Pharmacists Mutual Insurance Company _____

 ADDRESS PO Box 370 _____
 Algona IA 50511 _____

2. PERSON RESPONSIBLE FOR FILING Kris Laubenthal _____

 TITLE Rate Filing Analyst _____ TELEPHONE # 800-247-5930, ext 7322 _____

3. INSURER NAIC # 13714 _____

4. LINE OF INSURANCE ___Personal Automobile – physical damage coverages _____

5. ADVISORY ORGANIZATION ISO _____

6. PROPOSED RATE LEVEL CHANGE -3.7 _____ % EFFECTIVE DATE 7/1/08

7. PRIOR RATE LEVEL CHANGE ___0.0% _____ % EFFECTIVE DATE 8/1/07

8. ATTACH "NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION" (Use the above document separately for each insurer elected loss cost multiplier.)

CALCULATION OF COMPANY LOSS COST MULTIPLIER

(EFFECTIVE AUG. 16, 2004)

| | |
|---|--|
| This filing transmittal is part of Company Tracking # | |
| This filing corresponds to form filing number (Company tracking number of form filing, if applicable) | |

() **Loss Cost Reference Filing** _____ () **Independent Rate Filing**
(Advisory Org. & Reference filing #)

If this is a loss cost filing adopting an advisory organization's loss costs, the above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.

1. Check one of the following:

| | |
|--------------------------|--|
| <input type="checkbox"/> | The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer. Note: Some states have statutes that prohibit this option for some lines of business. |
| <input type="checkbox"/> | The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing. |

2. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: _____

3. Loss cost modification:

A. The insurer hereby files to adopt the prospective loss costs in the captioned reference filing (Check One):
 () Without Modification (factor = 1.000)
 () With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) _____

B. Loss Cost Modification Expressed as a Factor: (See Examples Below) _____

Example 1: Loss cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2: Loss cost Modification Factor: If your company's loss cost modification is =15%, a factor of 1.15 (1.000 + .150) should be used.

NOTE: IF EXPENSE CONSTANTS ARE UTILIZED ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 4-8 BELOW.

4. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

| | | Selected Provisions |
|----|---|---------------------|
| A. | Total Production Expense | % |
| B. | General Expense | % |
| C. | Taxes, Licenses & Fee | % |
| D. | Underwriting profit & Contingencies (explain how investment income is taken into account) | % |
| E. | Other (explain) | % |
| F. | Total | % |

| | | | | |
|----|----|---|--|---|
| 5. | A. | A. Expected Loss Ratio: $ELR = 100\% - 4F = A$ | | % |
| | B. | B. ELR in Decimal Form = | | |
| 6. | | Company Formula Loss Cost Multiplier (3B/5B) | | |
| 7. | | Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7) | | |
| 8. | | Rate Level Change for the coverage(s) to which this page applies | | |

Date: 4/14/2008

| |
|--|
| Space Reserved for Insurance Department Use |
| |

**OTHER THAN WORKERS' COMPENSATION
LOSS COST FILING DOCUMENT COVER FORM**

**INSURER RATE FILING
ADOPTION OF ADVISORY ORGANIZATION
PROSPECTIVE LOSS COSTS**

1. INSURER NAME Pharmacists Mutual Insurance Company _____

ADDRESS PO Box 370 _____
 Algona IA 50511 _____

2. PERSON RESPONSIBLE FOR FILING Kris Laubenthal _____

TITLE Rate Filing Analyst _____ TELEPHONE # 800-247-5930, ext 7322 _____

3. INSURER NAIC # 13714 _____

4. LINE OF INSURANCE __Personal Automobile – liability coverages _____

5. ADVISORY ORGANIZATION ISO _____

6. PROPOSED RATE LEVEL CHANGE -3.8 _____ % EFFECTIVE DATE 7/1/08

7. PRIOR RATE LEVEL CHANGE __0.0% _____ % EFFECTIVE DATE 8/1/07

8. ATTACH "NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION" (Use the above document separately for each insurer elected loss cost multiplier.)

CALCULATION OF COMPANY LOSS COST MULTIPLIER

(EFFECTIVE AUG. 16, 2004)

| | |
|---|--|
| This filing transmittal is part of Company Tracking # | |
| This filing corresponds to form filing number (Company tracking number of form filing, if applicable) | |

() **Loss Cost Reference Filing** _____ () **Independent Rate Filing**
(Advisory Org. & Reference filing #)

If this is a loss cost filing adopting an advisory organization's loss costs, the above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.

1. Check one of the following:

| | |
|--------------------------|--|
| <input type="checkbox"/> | The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer. Note: Some states have statutes that prohibit this option for some lines of business. |
| <input type="checkbox"/> | The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing. |

2. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: _____

3. Loss cost modification:

A. The insurer hereby files to adopt the prospective loss costs in the captioned reference filing (Check One):
 () Without Modification (factor = 1.000)
 () With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) _____

B. Loss Cost Modification Expressed as a Factor: (See Examples Below) _____

Example 1: Loss cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2: Loss cost Modification Factor: If your company's loss cost modification is =15%, a factor of 1.15 (1.000 + .150) should be used.

NOTE: IF EXPENSE CONSTANTS ARE UTILIZED ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 4-8 BELOW.

4. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

| | | Selected Provisions |
|----|---|---------------------|
| A. | Total Production Expense | % |
| B. | General Expense | % |
| C. | Taxes, Licenses & Fee | % |
| D. | Underwriting profit & Contingencies (explain how investment income is taken into account) | % |
| E. | Other (explain) | % |
| F. | Total | % |

| | | | |
|----|----|---|---|
| 5. | A. | A. Expected Loss Ratio: $ELR = 100\% - 4F = A$ | % |
| | B. | B. ELR in Decimal Form = | |
| 6. | | Company Formula Loss Cost Multiplier (3B/5B) | |
| 7. | | Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7) | |
| 8. | | Rate Level Change for the coverage(s) to which this page applies | |

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: 60%; 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 # |
| | |

| 4. Company Name(s) | Domicile | NAIC # | FEIN # | State # |
|--------------------|----------|--------|--------|---------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | |
|-----------------------------------|--|
| 5. Company Tracking Number | |
|-----------------------------------|--|

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

| 6. | Name and address | Title | Telephone #s | FAX # | e-mail |
|----|------------------|-------|--------------|-------|--------|
| | | | | | |
| | | | | | |

| | |
|--|--|
| 7. Signature of authorized filer | |
| 8. Please print name of authorized filer | |

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

| | |
|--|---|
| 9. Type of Insurance (TOI) | |
| 10. Sub-Type of Insurance (Sub-TOI) | |
| 11. State Specific Product code(s)(if applicable)[See State Specific Requirements] | |
| 12. Company Program Title (Marketing title) | |
| 13. Filing Type | <input type="checkbox"/> Rate/Loss Cost <input 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: <input type="text"/> Renewal: <input type="text"/> |
| 15. Reference Filing? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 16. Reference Organization (if applicable) | |
| 17. Reference Organization # & Title | |
| 18. Company's Date of Filing | |
| 19. Status of filing in domicile | <input 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 #

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

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]

Check #:
Amount:

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.)

PC TD-1 pg 2 of 2

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

| | | |
|-----------|--|--|
| 1. | This filing transmittal is part of Company Tracking # | |
|-----------|--|--|

| | | |
|-----------|---|--|
| 2. | This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable) | |
|-----------|---|--|

| 3. | Form Name /Description/Synopsis | Form # Include edition date | Replacement Or withdrawn? | If replacement, give form # it replaces | 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 | | |
| 04 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 05 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 06 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 07 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 08 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 09 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 10 | | | <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |

PC FFS-1

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 # | |
|-----------|--|--|

| | | |
|-----------|---|--|
| 2. | This filing corresponds to form filing number (Company tracking number of form filing, if applicable) | |
|-----------|---|--|

Rate Increase
 Rate Decrease
 Rate Neutral (0%)

| | | |
|-----------|--|--|
| 3. | Filing Method (Prior Approval, File & Use, Flex Band, etc.) | |
|-----------|--|--|

| | |
|------------|---|
| 4a. | Rate Change by Company (As Proposed) |
|------------|---|

| 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) |
|--------------|--|-----------------------|---|--|----------------------------------|-----------------------------------|-----------------------------------|
| | | | | | | | |
| | | | | | | | |

| | |
|------------|--|
| 4b. | Rate Change by Company (As Accepted) For State Use Only |
|------------|--|

| 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 |
|--------------|--|-----------------------|---|--|----------------------------------|------------------|------------------|
| | | | | | | | |
| | | | | | | | |

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

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

| | | |
|-----------|---|--|
| 6. | Overall percentage of last rate revision | |
|-----------|---|--|

| | | |
|-----------|---|--|
| 7. | Effective Date of last rate revision | |
|-----------|---|--|

| | | |
|-----------|---|--|
| 8. | Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.) | |
|-----------|---|--|

| 9. | Rule # or Page # Submitted for Review | Replacement or withdrawn? | 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 | |

PHARMACISTS MUTUAL INSURANCE COMPANY

Personal Automobile ARKANSAS Rate Filing Memorandum

Pharmacists Mutual Insurance Company (PMIC) is a member and subscriber of ISO for its personal automobile program. PMIC is filing a revision to their personal automobile program, along with the adoption of PP-2007-BRLA2, the overall effect of which is an increase of -3.7%, including an overall loss cost increase of 0.3%, and the introduction of a multivariate rating program expected to decrease rates -4.0%.

Under the new multivariate program, Pharmacists is modifying its current Safe Driver Discount program and introducing three new discount options. All discounts will be applied at the policy level after the premium for all drivers and coverages has been calculated. The expected impact on current rate levels is an average premium decrease of 4.0%. Please refer to the Technical Appendix for a detailed description of the analysis behind the multivariate rating portion of this filing as well as for the effect of the proposed rating variables individually. For the credit component of this rating, we will be using ChoicePoint's ATTRACT ONE Model.

Along with the rating revisions described above, PMIC has made a number of minor modifications to our Exception Pages. We have redefined "age" to mean age attained within the first six months of the policy period (Rule 4.C.2.c.) In addition, we have defined our minimal premium adjustment (Rule 9.C.) amount as \$5.00; and we have clarified the language of our company Personal Package Discount Rule 22.

The following exhibits contain the justification for the selected overall rate level change in this filing. We will continue to review our results annually and take appropriate action as needed.

Exhibit 1

Exhibit 1 presents the rate level indications for liability and physical damage for accident years 2003 – 2007 as of 12/31/2007. Actual earned premiums have been adjusted to current manual rates and losses have been developed to an ultimate settlement value and trended to the midpoint of the period that the rates are expected to be in effect. The resulting loss ratio is then compared to the expected loss ratio producing a gross indication. A credibility value has been assigned to the company data based on reported claim counts. The complement to the company data is a weighted average of the annual loss trend. The weighted indicated change is 0.7% for liability and 7.1% for physical damage.

Exhibit 2

Exhibit 2 contains Company rate change history and the calculation of current rate level factors.

Exhibit 3

In Exhibit 3 the Adjusted Earned Premium is calculated by applying the Current Rate Level Factors (Exhibit 2) to the accident year Actual Earned Premium.

Exhibits 4a, 4b and 4c

Exhibit 4a contains PMIC's loss development through 2007 from Schedule P – Part 1B – Private Passenger Auto Liability/Medical. The selected loss link ratios are most reflective of what we expect in the future, and represent the ratios used to measure company reserves for this line.

Exhibit 4b contains PMIC's loss development through 2007 from Schedule P – Part 1J – Auto Physical Damage. We have selected the following loss development factors from this data, 2007-2003: 1.000. We believe these to be most reflective of what we expect in the future. The selected factors in both 4a & 4b are applied to PMIC territory level data in Exhibit 4c. At the bottom of Exhibit 4c are calculated Weighted Average Combined Loss Development Factors used for our book in total (see Exhibit 5.)

Exhibit 5

Exhibit 5 contains the calculation of PMIC annual loss trend factors. The source of the selected Annual Loss Trend Factor is ISO's filing PP-2007-BRLA2, pg EX-4, for Arkansas. ISO's trend factors have been applied to PMIC's actual premium by coverage for a weighted average factor for our book of 2.5% for liability and 1.8% for physical damage.

Exhibit 6

In Exhibit 6 the Trended Annual Losses are calculated by applying the Loss Development Factors (Exhibits 4a and 4b) and Loss Trend Factors (Exhibit 5) to the accident year Actual Reported Losses.

Exhibit 7

PMIC's Countrywide and Arkansas Underwriting Expense History for the personal automobile line is contained in Exhibit 7. Selected Total Underwriting Expenses of 25% are used in this filing because that is our anticipated long-term expense ratio.

Exhibits 8a and 8b

Exhibits 8a (liability only) and 8b (physical damage only) contain the calculation of investment income from unearned premium reserves and loss and loss expense reserves.

Exhibit 9

Exhibit 9 contains the calculation of the value of credibility assigned to the company data in the indications. 7,445 is used as the number of claims needed for full credibility for liability; 2,982 is used for physical damage.

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 1

**Personal Automobile
Rate Level Indications at 12/31/2007
ARKANSAS**

| Liability | Accident Year | | | | | 5 year |
|--------------------------------|---------------|---------|---------|---------|---------|-----------|
| | 2003 | 2004 | 2005 | 2006 | 2007 | Total |
| (1) Adjusted Earned Premium | 472,306 | 509,505 | 496,186 | 469,777 | 467,793 | 2,415,568 |
| (2) Developed - Trended Losses | 201,232 | 519,948 | 339,152 | 139,785 | 252,010 | 1,452,127 |
| (3) Actual Loss Ratio | 42.6% | 102.0% | 68.4% | 29.8% | 53.9% | 60.1% |

| Physical Damage | | | | | | |
|--------------------------------|---------|---------|---------|---------|---------|-----------|
| (1) Adjusted Earned Premium | 317,010 | 368,393 | 358,692 | 339,465 | 336,847 | 1,720,407 |
| (2) Developed - Trended Losses | 220,415 | 255,020 | 271,897 | 198,379 | 166,867 | 1,112,578 |
| (3) Actual Loss Ratio | 69.5% | 69.2% | 75.8% | 58.4% | 49.5% | 64.7% |

| Total | | | | | | |
|----------------------------|---------|---------|---------|---------|---------|-----------|
| Adjusted Earned Premium | 789,316 | 877,898 | 854,878 | 809,243 | 804,640 | 4,135,975 |
| Developed - Trended Losses | 421,647 | 774,968 | 611,048 | 338,164 | 418,877 | 2,564,705 |
| Actual Loss Ratio | 53.4% | 88.3% | 71.5% | 41.8% | 52.1% | 62.0% |

| | LI | PD | Total |
|--------------------------------|--------------|--------------|--------------|
| (3) Actual Loss Ratio - 5 Year | 60.1% | 64.7% | 62.0% |
| (4) Expected Loss Ratio | 63.1% | 58.1% | 60.7% |
| (5) Indicated Change | -4.7% | 11.3% | 2.1% |
| (6) Credibility | 24.7% | 55.2% | 40.3% |
| (7) Complement | 75.3% | 44.8% | 59.7% |
| (8) Annual Trend | 2.5% | 1.8% | 2.1% |
| (9) Weighted Indicated Chg | 0.7% | 7.1% | 2.1% |
| (10) Selected Change | -3.8% | -3.7% | -3.7% |

- (1) Exhibit 3
- (2) Exhibit 7
- (3) (2) / (1)
- (4) Exhibit 8
- (5) ((3) / (4)) - 1.00

- (6) Exhibit 10
- (7) 1.0 - (6)
- (8) Exhibit 6
- (9) (5) * (6) + (7) * (8)
- (10) Filing Summary

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 2

**Personal Automobile
Rate Change History and Current Rate Level Factors
ARKANSAS**

Rate Change History

| Effective Date | Liability | | Physical Damage | |
|----------------|-------------|------------------|-----------------|------------------|
| | Rate Change | Cumulative Index | Rate Change | Cumulative Index |
| | | 1.000 | | 1.000 |
| 8/1/2003 | 16.76% | 1.168 | 2.80% | 1.028 |
| 9/1/2004 | 14.40% | 1.336 | 4.80% | 1.077 |
| 8/1/2005 | 10.40% | 1.475 | 3.40% | 1.114 |
| 8/1/2006 | 4.50% | 1.541 | -6.00% | 1.047 |
| 8/1/2007 | 0.00% | 1.541 | 0.00% | 1.047 |

| Year | Average Rate Level | Current Rate Level | Average Rate Level | Current Rate Level |
|------|--------------------|--------------------|--------------------|--------------------|
| 2003 | 1.029 | 1.497 | 1.005 | 1.042 |
| 2004 | 1.129 | 1.365 | 1.024 | 1.023 |
| 2005 | 1.311 | 1.176 | 1.070 | 0.979 |
| 2006 | 1.457 | 1.058 | 1.102 | 0.950 |
| 2007 | 1.530 | 1.007 | 1.058 | 0.989 |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 3

**Personal Automobile
Adjusted Earned Premium
ARKANSAS**

| (1) Accident Year | Liability | | | Physical Damage | | |
|-------------------------|------------------------------------|--|--------------------------------------|------------------------------------|--|--------------------------------------|
| | (2) Actual Earned Premium | (3) Current Rate Level Factor | (4) Adjusted Earned Premium | (2) Actual Earned Premium | (3) Current Rate Level Factor | (4) Adjusted Earned Premium |
| 2003 | 315,502 | 1.497 | 472,306 | 304,232 | 1.042 | 317,010 |
| 2004 | 373,264 | 1.365 | 509,505 | 360,110 | 1.023 | 368,393 |
| 2005 | 421,927 | 1.176 | 496,186 | 366,386 | 0.979 | 358,692 |
| 2006 | 444,024 | 1.058 | 469,777 | 357,332 | 0.950 | 339,465 |
| 2007 | 464,541 | 1.007 | 467,793 | 340,594 | 0.989 | 336,847 |

Source: (2) Internal Reports
 (3) Exhibit 2
 (4) = (2) * (3)

PHARMACISTS MUTUAL INSURANCE COMPANY Exhibit 4a
PROJECTED DIRECT & ASSUMED ULTIMATE LOSSES BASED ON REPORTED LOSS DEVELOPMENT
 Schedule P - Part 1B - Private Passenger Auto Liability / Medical

| Direct & Assumed Cumulative Losses Reported (\$000's) | | | | | | | | | | |
|--|-----------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Accident Year | Months of Development | | | | | | | | | |
| | 12 | 24 | 36 | 48 | 60 | 72 | 84 | 96 | 108 | 120 |
| 1998 | 3,914 | 4,557 | 5,852 | 5,854 | 5,755 | 5,682 | 5,662 | 5,662 | 5,714 | 5,714 |
| 1999 | 3,892 | 5,086 | 4,600 | 4,710 | 4,744 | 4,760 | 4,772 | 4,708 | 4,708 | |
| 2000 | 2,560 | 3,549 | 3,592 | 4,697 | 5,114 | 5,198 | 5,268 | 5,268 | | |
| 2001 | 3,470 | 4,491 | 5,305 | 5,609 | 5,577 | 5,526 | 5,537 | | | |
| 2002 | 3,226 | 3,795 | 4,388 | 4,634 | 4,616 | 4,580 | | | | |
| 2003 | 4,990 | 7,213 | 7,390 | 7,149 | 7,140 | | | | | |
| 2004 | 5,378 | 6,787 | 6,547 | 6,744 | | | | | | |
| 2005 | 4,386 | 6,133 | 6,095 | | | | | | | |
| 2006 | 4,197 | 4,685 | | | | | | | | |
| 2007 | 3,463 | | | | | | | | | |

| Direct & Assumed Reported Loss Link Ratios | | | | | | | | | | |
|---|-----------------------|-------|-------|-------|-------|-------|-------|--------|---------|---------|
| Accident Year | Development Intervals | | | | | | | | | |
| | 12:24 | 24:36 | 36:48 | 48:60 | 60:72 | 72:84 | 84:96 | 96:108 | 108:120 | 120:Ult |
| 1998 | 1.164 | 1.284 | 1.000 | 0.983 | 0.987 | 0.996 | 1.000 | 1.009 | 1.000 | |
| 1999 | 1.307 | 0.904 | 1.024 | 1.007 | 1.003 | 1.003 | 0.987 | 1.000 | | |
| 2000 | 1.386 | 1.012 | 1.308 | 1.089 | 1.016 | 1.013 | 1.000 | | | |
| 2001 | 1.294 | 1.181 | 1.057 | 0.994 | 0.991 | 1.002 | | | | |
| 2002 | 1.176 | 1.156 | 1.056 | 0.996 | 0.992 | | | | | |
| 2003 | 1.445 | 1.025 | 0.967 | 0.999 | | | | | | |
| 2004 | 1.262 | 0.965 | 1.030 | | | | | | | |
| 2005 | 1.398 | 0.994 | | | | | | | | |
| 2006 | 1.116 | | | | | | | | | |

| Summary of Direct & Assumed Link Ratios | | | | | | | | | | |
|--|-----------------------|-------|-------|-------|-------|-------|-------|--------|---------|---------|
| | Development Intervals | | | | | | | | | |
| | 12:24 | 24:36 | 36:48 | 48:60 | 60:72 | 72:84 | 84:96 | 96:108 | 108:120 | 120:Ult |
| Average | 1.283 | 1.065 | 1.063 | 1.011 | 0.998 | 1.004 | 0.996 | 1.005 | 1.000 | |
| 3 Yr. Wght. Avg. | 1.261 | 0.995 | 1.011 | 0.997 | 1.000 | 1.006 | 0.996 | 1.005 | 1.000 | |
| Excl H-L | 1.284 | 1.056 | 1.033 | 0.999 | 0.995 | 1.003 | 1.000 | 1.005 | 1.000 | |
| Weighted Average | 1.286 | 1.052 | 1.046 | 1.009 | 0.998 | 1.003 | 0.996 | 1.005 | 1.000 | |
| Selected | 1.300 | 1.065 | 1.030 | 1.005 | 1.000 | 1.000 | 1.000 | 1.000 | 1.000 | 1.000 |
| Cumulative | 1.433 | 1.102 | 1.035 | 1.005 | 1.000 | 1.000 | 1.000 | 1.000 | 1.000 | 1.000 |

| | | | | | |
|-----------------|-------|-------|-------|-------|-------|
| | 2007 | 2006 | 2005 | 2004 | 2003 |
| Loss Dev Factor | 1.433 | 1.102 | 1.035 | 1.005 | 1.000 |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 4b

PROJECTED DIRECT & ASSUMED ULTIMATE LOSSES BASED ON REPORTED LOSS DEVELOPMENT

Schedule P - Part 1J - Auto Physical Damage

| Direct & Assumed Cumulative Losses Reported (\$000's) | | | |
|--|-----------------------|-------|-------|
| Accident Year | Months of Development | | |
| | 12 | 24 | Prior |
| 1998 | 3,351 | 3,015 | (5) |
| 1999 | 3,273 | 3,081 | (36) |
| 2000 | 3,705 | 3,486 | (48) |
| 2001 | 4,660 | 4,493 | (90) |
| 2002 | 5,703 | 5,347 | (71) |
| 2003 | 6,272 | 5,984 | (51) |
| 2004 | 6,213 | 5,863 | 2 |
| 2005 | 5,786 | 5,733 | (44) |
| 2006 | 5,894 | 5,740 | |
| 2007 | 5,252 | | |

| Direct & Assumed Reported Loss Link Ratios | | |
|---|-----------------------|------------------|
| Accident Year | Development Intervals | |
| | 12 to 24 months | Beyond 24 months |
| 1998 | 0.900 | -0.002 |
| 1999 | 0.941 | -0.012 |
| 2000 | 0.941 | -0.014 |
| 2001 | 0.964 | -0.020 |
| 2002 | 0.938 | -0.013 |
| 2003 | 0.954 | -0.009 |
| 2004 | 0.944 | 0.000 |
| 2005 | 0.991 | -0.008 |
| 2006 | 0.974 | |

| Summary of Direct & Assumed Link Ratios | | |
|--|-----------------------|------------------|
| | Development Intervals | |
| | 12 to 24 months | Beyond 24 months |
| Average | 0.950 | -0.010 |
| 3 Year Wgt. Average | 0.969 | -0.005 |
| Weighted Average | 0.953 | -0.009 |
| <hr/> | | |
| Selected | 1.000 | 1.000 |
| Cumulative | 1.000 | 1.000 |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 4c

**Personal Automobile
Actual & Developed Incurred Losses
ARKANSAS**

| Actual Incurred Losses | | | | | | |
|--------------------------------|---------|---------|---------|---------|---------|---------------|
| Liability/Med (as of 12/31/07) | | | | | | |
| | 2003 | 2004 | 2005 | 2006 | 2007 | 5 Yr Total |
| Total | 173,411 | 457,028 | 296,695 | 117,706 | 167,333 | 1,212,173 |

| Physical Damage (as of 12/31/07) | | | | | | |
|---|---------|---------|---------|---------|---------|---------------|
| | 2003 | 2004 | 2005 | 2006 | 2007 | 5 Yr Total |
| Total | 197,788 | 233,010 | 252,955 | 187,921 | 160,950 | 1,032,624 |

| Developed Incurred Losses | | | | | | |
|----------------------------------|--|--------------|--------------|--------------|--------------|---------------|
| Liability/Med | | | | | | |
| | Loss Development Factors (Exhibit 4a) | | | | | |
| | 1.000 | 1.005 | 1.035 | 1.102 | 1.433 | |
| | 2003 | 2004 | 2005 | 2006 | 2007 | 5 Yr Total |
| Total | 173,411 | 459,313 | 307,124 | 129,763 | 239,816 | 1,309,427 |

| Physical Damage | | | | | | |
|------------------------|--|--------------|--------------|--------------|--------------|---------------|
| | Loss Development Factors (Exhibit 4b) | | | | | |
| | 1.000 | 1.000 | 1.000 | 1.000 | 1.000 | |
| | 2003 | 2004 | 2005 | 2006 | 2007 | 5 Yr Total |
| Total | 197,788 | 233,010 | 252,955 | 187,921 | 160,950 | 1,032,624 |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 5

**Personal Automobile
Loss Trend
ARKANSAS**

LIABILITY

Selected Annual Loss Trend 2.5%
Assumed Effective Date 7/1/2008

| AY | (1) | (2) | (3) | (4) | (5) |
|------|----------|----------|-------|-------|-------|
| 2003 | 7/1/2003 | 7/1/2009 | 6.000 | 1.025 | 1.160 |
| 2004 | 7/1/2004 | 7/1/2009 | 5.000 | 1.025 | 1.132 |
| 2005 | 7/1/2005 | 7/1/2009 | 4.000 | 1.025 | 1.104 |
| 2006 | 7/1/2006 | 7/1/2009 | 3.000 | 1.025 | 1.077 |
| 2007 | 7/1/2007 | 7/1/2009 | 2.000 | 1.025 | 1.051 |

Physical Damage

Selected Annual Loss Trend 1.8%
Assumed Effective Date 7/1/2008

| AY | (1) | (2) | (3) | (4) | (5) |
|------|----------|----------|-------|-------|-------|
| 2003 | 7/1/2003 | 7/1/2009 | 6.000 | 1.018 | 1.114 |
| 2004 | 7/1/2004 | 7/1/2009 | 5.000 | 1.018 | 1.094 |
| 2005 | 7/1/2005 | 7/1/2009 | 4.000 | 1.018 | 1.075 |
| 2006 | 7/1/2006 | 7/1/2009 | 3.000 | 1.018 | 1.056 |
| 2007 | 7/1/2007 | 7/1/2009 | 2.000 | 1.018 | 1.037 |

- (1) Average Loss Date for experience years
- (2) Trend Date, average loss date when new rates are expected to be in effect
- (3) Number of years between (1) and (2)
- (4) Annual Exposure Trend - source: ISO Filing PP-2007-BRLA2, pg EX-4, Annual Loss Trend factors applied to PMIC premium by coverage, 0% applied to all other coverage premiums; see below
- (5) Trend Factor

| ISO Loss Trend Assumptions | | |
|-----------------------------------|---------------------|------------------|
| <u>Liability Coverage</u> | <u>Trend Factor</u> | <u>PMIC Prem</u> |
| BI | 3.8% | 174,518 |
| Med Pay | 1.0% | 29,978 |
| UM BI | 3.8% | 17,613 |
| UM PD | 2.1% | 11,699 |
| LI All Other | 0.0% | 78,684 |
| wtd avg | 2.5% | 312,492 |
| <u>Physical Damage Coverage</u> | | |
| PD | 2.1% | 128,401 |
| Comp | 1.6% | 91,799 |
| Coll | 1.8% | 233,144 |
| PD All Other | 0.0% | 5,681 |
| wtd avg | 1.8% | 459,025 |
| Total All Coverages | 2.1% | 771,517 |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 6

Personal Automobile Trended Ultimate Losses ARKANSAS

Liability

| (1) Accident Year | (2) Actual Reported Losses | (3) Loss Development Factor | (4) Loss Trend Factor | (5) Trended Ultimate Losses |
|-------------------------|-------------------------------------|--------------------------------------|--------------------------------|--------------------------------------|
| 2003 | 173,411 | 1.000 | 1.160 | 201,232 |
| 2004 | 457,028 | 1.005 | 1.132 | 519,948 |
| 2005 | 296,695 | 1.035 | 1.104 | 339,152 |
| 2006 | 117,706 | 1.102 | 1.077 | 139,785 |
| 2007 | 167,333 | 1.433 | 1.051 | 252,010 |

Physical Damage

| (1) Accident Year | (2) Actual Reported Losses | (3) Loss Development Factor | (4) Loss Trend Factor | (5) Trended Ultimate Losses |
|-------------------------|-------------------------------------|--------------------------------------|--------------------------------|--------------------------------------|
| 2003 | 197,788 | 1.000 | 1.114 | 220,415 |
| 2004 | 233,010 | 1.000 | 1.094 | 255,020 |
| 2005 | 252,955 | 1.000 | 1.075 | 271,897 |
| 2006 | 187,921 | 1.000 | 1.056 | 198,379 |
| 2007 | 160,950 | 1.000 | 1.037 | 166,867 |

Source: (2) Internal Reports
(3) Exhibit 4
(4) Exhibit 5
(5) = (2) * (3) * (4) * (5)

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 7

**Personal Automobile
Underwriting Expense History
ARKANSAS**

| Countrywide (\$000's omitted) | | | | | | | | | | | | |
|-------------------------------|----------|---------|----------|---------|----------|---------|----------|---------|----------|---------|----------|---------|
| | 2003 | | 2004 | | 2005 | | 2006 | | 2007 | | Total | |
| | Dollars | Percent |
| Written Premium | \$14,511 | | \$14,133 | | \$13,437 | | \$13,078 | | \$12,611 | | \$67,770 | |
| Earned Premium | \$14,831 | | \$14,088 | | \$13,757 | | \$13,275 | | \$12,834 | | \$68,785 | |
| Commission and Brokerage (W) | \$8 | 0.1% | \$4 | 0.0% | \$5 | 0.0% | \$1 | 0.0% | \$2 | 0.0% | \$20 | 0.0% |
| Other Acquisition Expense (W) | \$2,220 | 15.3% | \$2,117 | 15.0% | \$1,987 | 14.8% | \$1,964 | 15.0% | \$1,877 | 14.9% | \$10,165 | 15.0% |
| General Expense (E) | \$596 | 4.0% | \$576 | 4.1% | \$629 | 4.6% | \$734 | 5.5% | \$828 | 6.5% | \$3,363 | 4.9% |
| Taxes, Licenses, and Fees (W) | \$798 | 5.5% | \$316 | 2.2% | \$309 | 2.3% | \$269 | 2.1% | \$265 | 2.1% | \$1,957 | 2.9% |
| Incurring Loss | \$12,590 | | \$13,347 | | \$10,793 | | \$9,564 | | \$8,266 | | \$54,560 | |
| Defense Expense | \$656 | 5.2% | \$513 | 3.8% | \$732 | 6.8% | \$425 | 4.4% | \$335 | 4.1% | \$2,661 | 4.9% |
| Adjusting Expense | \$1,111 | 8.8% | \$1,051 | 7.9% | \$1,272 | 11.8% | \$1,284 | 13.4% | \$1,292 | 15.6% | \$6,010 | 11.0% |
| Total LAE | \$1,767 | 14.0% | \$1,564 | 11.7% | \$2,004 | 18.6% | \$1,709 | 17.9% | \$1,627 | 19.7% | \$8,671 | 15.9% |

| State of AR (Actual Dollars) | | | | | | | | | | | | |
|-------------------------------|-----------|---------|-------------|---------|-----------|---------|-----------|---------|-----------|---------|-------------|---------|
| | 2003 | | 2004 | | 2005 | | 2006 | | 2007 | | Total | |
| | Dollars | Percent | Dollars | Percent | Dollars | Percent | Dollars | Percent | Dollars | Percent | Dollars | Percent |
| Written Premium | \$676,701 | | \$1,069,386 | | \$803,944 | | \$806,648 | | \$798,819 | | \$4,155,498 | |
| Earned Premium | 675,218 | | 733,730 | | 788,314 | | 801,357 | | 805,134 | | \$3,803,753 | |
| Commission and Brokerage (W) | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | \$0 | 0.0% |
| Taxes, Licenses, and Fees (W) | 20,985 | 3.1% | 23,698 | 2.2% | 26,090 | 3.2% | 25,044 | 3.1% | 25,065 | 3.1% | \$120,882 | 2.9% |
| Incurring Loss | \$396,876 | | \$606,878 | | \$659,484 | | \$527,490 | | \$417,905 | | \$2,608,633 | |
| Defense Expense | 878 | 0.2% | 2,726 | 0.4% | 5,918 | 0.9% | 26,032 | 4.9% | 51,799 | 12.4% | \$87,353 | 3.3% |

| Selected Expense Provisions | LI | PD | Total |
|-------------------------------|-------|-------|-------|
| Commission and Brokerage | 0.0% | 0.0% | 0.0% |
| Other Acquisition Expense | 16.0% | 16.0% | 16.0% |
| General Expense | 6.5% | 6.5% | 6.5% |
| Taxes, Licenses, and Fees | 2.5% | 2.5% | 2.5% |
| Total Underwriting Expenses | 25.0% | 25.0% | 25.0% |
| Profit Provision | 5.0% | 5.0% | 5.0% |
| Investment Income | -4.1% | -0.3% | -2.3% |
| Total Expense Provision | 25.9% | 29.7% | 27.7% |
| Expected Loss & LAE Ratio | 74.1% | 70.3% | 72.3% |
| Loss Adjustment Expense Ratio | 17.5% | 21.0% | 19.1% |
| Expected Loss Ratio | 63.1% | 58.1% | 60.7% |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 8a

Countrywide - 2007

Personal Automobile

Estimated Investment Earnings on Unearned Premium Reserves and on Loss & Loss Expense Reserves

Liability Only

| | | |
|---|---------------|-------------|
| A. Unearned Premium Reserve | | |
| 1. Direct Earned Premium for Latest Available Year | | \$7,199 |
| 2. Mean Unearned Premium Reserve: (1) 50.3% | | \$3,622 |
| 3. Deduction for Prepaid Expenses | | |
| Commission and Brokerage Expense | 8.0% | |
| Taxes, Licenses and Fees | 2.5% | |
| 50% of Other Acquisition Expense | 4.0% | |
| 50% of Company Operating Expense | 3.3% | |
| Total | 17.8% | |
| 4. Deduction for Federal Taxes Payable | | 6.8% |
| 5. (2) x [(3) + (4)] | | \$889 |
| 6. Net Subject to Investment (2) - (5) | | \$2,732 |
| B. Delayed Remission of Premium (Agents' Balances) | | |
| 1. Direct Earned Premium (A.1) | | \$7,199 |
| 2. Average Agents' Balance | | 0.3002 |
| 3. Delayed Remission (1) x (2) | | \$2,161 |
| C. Loss Reserve | | |
| 1. Direct Earned Premium (A.1) | | \$7,199 |
| 2. Expected Incurred Losses and Loss Adjustment Expense: (1) x | 74.1% | \$5,334 |
| 3. Expected Mean Loss Reserv (2) x | <u>146.8%</u> | \$7,833 |
| D. Net Subject to Investment | | |
| (A.6) - (B.3) + (C.3) | | \$8,405 |
| E. Average Rate of Return | | |
| | | 4.4% |
| F. Investment Earnings on Net Subject to Investment | | |
| (D) x (E) | | \$372 |
| G. Average Rate of Return as a Percent of Direct Earned Premium (F)/(A.1) | | |
| | | 5.2% |
| H. Average rate of Return as a Percent of Direct Earned Premium | | |
| After Federal Income Taxes (G) x (1-25.9%) | <u>78.6%</u> | 4.1% |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 8b

Countrywide - 2007

Personal Automobile

Estimated Investment Earnings on Unearned Premium Reserves and on Loss & Loss Expense Reserves

Physical Damage Only

| | | |
|---|--------------|-------------|
| A. Unearned Premium Reserve | | |
| 1. Direct Earned Premium for Latest Available Year | | \$5,635 |
| 2. Mean Unearned Premium Reserve: (1) 50.2% | | \$2,828 |
| 3. Deduction for Prepaid Expenses | | |
| Commission and Brokerage Expense | 8.0% | |
| Taxes, Licenses and Fees | 2.5% | |
| 50% of Other Acquisition Expense | 4.0% | |
| 50% of Company Operating Expense | 3.3% | |
| Total | 17.8% | |
| 4. Deduction for Federal Taxes Payable | | 6.8% |
| 5. (2) x [(3) + (4)] | | \$694 |
| 6. Net Subject to Investment (2) - (5) | | \$2,134 |
| B. Delayed Remission of Premium (Agents' Balances) | | |
| 1. Direct Earned Premium (A.1) | | \$5,635 |
| 2. Average Agents' Balance | | 0.3002 |
| 3. Delayed Remission (1) x (2) | | \$1,691 |
| C. Loss Reserve | | |
| 1. Direct Earned Premium (A.1) | | \$5,635 |
| 2. Expected Incurred Losses and Loss | | |
| Adjustment Expense: (1) x | 70.3% | \$3,961 |
| 3. Expected Mean Loss Reserv (2) x | <u>1.5%</u> | \$60 |
| D. Net Subject to Investment | | |
| (A.6) - (B.3) + (C.3) | | \$502 |
| E. Average Rate of Return | | |
| | | 4.4% |
| F. Investment Earnings on Net Subject to Investment | | |
| (D) x (E) | | \$22 |
| G. Average Rate of Return as a Percent of Direct Earned Premium (F)/(A.1) | | |
| | | 0.4% |
| H. Average rate of Return as a Percent of Direct Earned Premium | | |
| After Federal Income Taxes (G) x (1-25.9%) | <u>78.6%</u> | 0.3% |

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 9

**Personal Automobile
Credibility
ARKANSAS**

A value of 1,082 claims implies that the number of claims (n) is within 5% of the expected value 90% of the time.

That is to say that $1,082 = (1.645/.05)^2$, where 1.645 is the 90th percentile of standard normal distribution.

If we assume a Poisson claim distribution, then CV is the coefficient of variation where:
CV = standard deviation/mean

Then the number of claims for full credibility = $N = n * (1 + CV^2)$

Based on a review of actual company data a coefficient of variation of 2.6 has been selected. This would imply that the number of claims needed for full credibility would be: 7,445 for liability and 2,982 for physical damage

Partial Credibility = $(\text{Actual number of claims} / N)^{.5}$

| Accident Year | LI Claims Reported | PD Claims Reported | Total Claims |
|---------------|--------------------|--------------------|--------------|
| 2003 | 93 | 201 | 294 |
| 2004 | 125 | 200 | 325 |
| 2005 | 102 | 181 | 283 |
| 2006 | 70 | 169 | 239 |
| 2007 | 66 | 157 | 223 |
| Total | 456 | 908 | 1,364 |

Claims for Full Credibility 7,445 2,982 8,396

Credibility 24.7% 55.2% 40.3%

Mean 91 182

Std Dev 24.2 19.2

PHARMACISTS MUTUAL INSURANCE COMPANY

Summary of Automobile Changes ARKANSAS

| Coverage | Annualized Premium | Base Rates | Deductible Relativity | Increased Limits | LCM | Multi-variate Program | Total Change |
|-----------------------------------|-----------------------|---------------|--------------------------|---------------------|-------------|--------------------------|-----------------|
| Combined Single Limit | \$59,792 | 0.2% | 0.0% | 0.0% | 0.0% | -4.0% | -3.8% |
| Bodily Injury | \$144,622 | -7.8% | 0.0% | 0.0% | 0.0% | -4.0% | -11.5% |
| Property Damage | \$98,505 | 13.6% | 0.0% | 0.0% | 0.0% | -4.0% | 9.1% |
| MP | \$29,978 | -1.7% | 0.0% | 0.0% | 0.0% | -4.0% | -5.7% |
| Added PIP | \$6,291 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Uninsured Motorists | \$17,613 | 4.0% | 0.0% | 0.0% | 0.0% | -4.0% | -0.2% |
| Uninsured Motorists - CSL | \$80 | 7.5% | 0.0% | 0.0% | 0.0% | -4.0% | 3.2% |
| Uninsured - PD | \$11,699 | 11.0% | 0.0% | 0.0% | 0.0% | -4.0% | 6.6% |
| Uninsured - SLPD | \$8,145 | 7.5% | 0.0% | 0.0% | 0.0% | -4.0% | 3.2% |
| Underinsured Motorists | \$47,483 | -5.2% | 0.0% | 0.0% | 0.0% | -4.0% | -9.0% |
| Underinsured Motorists - CSL | \$16,685 | -5.2% | 0.0% | 0.0% | 0.0% | -4.0% | -9.0% |
| Underinsured Motorists - PD | \$0 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Other | \$0 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Liability Subtotal | \$440,893 | 0.2% | 0.0% | 0.0% | 0.0% | -4.0% | -3.8% |
| Comprehensive | \$91,799 | 11.0% | 0.0% | 0.0% | 0.0% | -4.0% | 6.6% |
| Collison | 233,144 | -3.8% | 0.0% | 0.0% | 0.0% | -4.0% | -7.7% |
| Full Glass Coverage | 0 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Towing | 2,721 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Rental Reimbursement | 0 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Increased Extended Transportation | 1,789 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Auto Loan/Lease | 1,171 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Other | 0 | 0.0% | 0.0% | 0.0% | 0.0% | -4.0% | -4.0% |
| Physical Damage Subtotal | \$330,624 | 0.4% | 0.0% | 0.0% | 0.0% | -4.0% | -3.7% |
| Total All Coverages | \$771,517 | 0.3% | 0.0% | 0.0% | 0.0% | -4.0% | -3.7% |

| | | | |
|------------------------------|--------------|-------------------------------|--------------|
| Current LCM Liability | 1.300 | Proposed LCM Liability | 1.300 |
| Phys Dam | 1.556 | Phys Dam | 1.556 |

Technical Appendix
Pharmacists Mutual Insurance Company
Private Passenger Auto Rate Change

Introduction

This appendix provides a detailed explanation of the data and information used in developing the new discounts and surcharges for Pharmacists Mutual Insurance Company’s (“Pharmacists” or the “Company”) Private Passenger Auto rating plan. The expected premium impact on current rate levels for this revision is an average decrease of 4.0%.

This document has been written by Stephen J. Streff, ACAS, MAAA, Vice President of the firm Streff Insurance Services and consultant to the Company. Mr. Streff asserts that he is independent of the Company.

This document begins with a summary of the rate changes, then proceeds with a technical justification of the discounts, and finishes with a discussion of the combined impact of individual insureds.

Summary

Pharmacists proposes changing one of its current discount tables and implementing three new discount tables. The discounts are to be applied at the policy level after the premium for all drivers and coverages has been calculated. The expected total premium impact on current rate levels for this revision is an average decrease of 4.0%. The impact from each of the four adjustments is shown in Table 1.

Table 1

Summary of Proposed Changes

| Program | Impact |
|--|--------|
| 1) Revising the Current Safe Driver Discount | 5.4% |
| 2) Implementing a Loyalty Discount | -8.4% |
| 3) Implementing a Full Pay Discount | -0.9% |
| 4) Implementing Insurance score Discounts and Surcharges | -0.1% |
| Overall Impact | -4.0% |

The Company currently recognizes insureds with accident free driving records. This program is being scaled back to make room for other important rating factors. It is also being moved from the driver level to the policy level. Thus, the accident record of the entire policy will be the determining factor of the discount. Table 2 shows the current and new safe driver discounts. As with the company's current safe driver program, premium adjustments will be applied to bodily injury liability, property damage liability, medical expenses and the collision sections of the policy.

Table 2

| Safe Driver Discount | | | |
|-----------------------------|---------------------------|------------------------|---------------------------------|
| Accident Free Years | Current Program | | New Program |
| | Less than 25 Years Old | Older than 25 years | (All Ages & at Policy Level) |
| Less than 4 | 0% | 0% | 0% |
| 4 | 0% | -10% | -5% |
| 5 | 0% | -10% | -5% |
| 6 | -5% | -15% | -10% |
| 7 | -10% | -15% | -10% |
| 8 or more | -15% | -20% | -10% |

Pharmacists wishes to recognize loyal customers by implementing a loyalty discount. This discount will range from 3% upon the fourth renewal up to 10% after the eleventh renewal. Table 3 displays the loyalty discounts.

Table 3

| Loyalty Discount | |
|-------------------------|----------|
| Years | Discount |
| New Policy | 0.0% |
| 1st Renewal | 0.0% |
| 2nd Renewal | 0.0% |
| 3rd Renewal | 0.0% |
| 4th Renewal | -3.0% |
| 5th Renewal | -3.5% |
| 6th Renewal | -4.0% |
| 7th Renewal | -5.0% |
| 8th Renewal | -6.0% |
| 9th Renewal | -7.0% |
| 10th Renewal | -8.0% |
| 11th Renewal | -9.0% |
| Thereafter | -10.0% |

The Company has discovered that their Private Passenger Auto customers paying premium in full have better loss experience than those who pay over the course of the policy period. To that end, a 5% discount will be applied to policies where the premium is paid in full at the beginning of the policy period. Table 4 shows the full pay discount.

Table 4

| Payment Method Discount | |
|------------------------------------|----------|
| Method | Discount |
| Partial | 0% |
| Full | -5% |

Lastly, the Company wishes to introduce modest discounts and surcharges based on insurance score. For policies with multiple drivers and insurance scores, the lowest insurance score will be used. No discount or surcharge will be applied in cases where no insurance score can be obtained. ChoicePoint is the Company’s insurance score vendor. Table 5 shows the discounts and surcharges by insurance score range.

Table 5

| Insurance Score Discounts and Surcharges | |
|---|-------------------------------|
| Insurance score Range | Surcharge (+) Discount (-) |
| No Hit | 0.0% |
| Under 600 | +15.0% |
| 600-649 | +7.5% |
| 650-749 | 0.0% |
| 750-849 | -5.0% |
| 850 and Above | -10.0% |

Technical Discussion

Pharmacists' Private Passenger Auto business has been unprofitable in recent years. Table 6 shows the carried direct loss and loss adjusting expense ratios for Private Passenger Auto Liability and Auto Physical Damage from 2000 through 2007. The data was taken from the Company's 2007 Annual Statement. When an underwriting expense ratio of approximately 27% is added to the loss and LAE ratios, it is clear that the Company's Private Passenger Auto business is unprofitable.

Table 6

Private Passenger Auto Loss and LAE Ratios

| Accident Year | Auto Liability | Physical Damage | Total |
|------------------|-------------------|--------------------|--------|
| 2000 | 124.5% | 95.9% | 115.5% |
| 2001 | 107.0% | 104.7% | 106.2% |
| 2002 | 72.4% | 96.1% | 80.3% |
| 2003 | 99.0% | 85.3% | 94.1% |
| 2004 | 101.9% | 79.1% | 92.9% |
| 2005 | 98.0% | 79.3% | 90.7% |
| 2006 | 84.1% | 84.3% | 84.2% |
| 2007 | 96.0% | 77.4% | 89.1% |

The Company's rates are based on filings from the Insurance Services Office ("ISO"). After determining the rates based on each driver's specifications, a loss cost multiplier ("LCM") is applied to arrive at the final premium. The LCMs vary by state and are actuarially calculated by the Company's staff.

It has been concluded by Pharmacists that its rating structure is too simple: low risk insureds have been paying premium that is too high and high risk insureds have not been paying enough premium. This has left the Company in an uncompetitive position relative to its peers.

The proposed discounts were arrived at after a careful consideration of their relevance and impact. Premium and loss data from 2000 through 2005 was used to analyze the four discounts discussed below. The losses were evaluated through July 2006.

The following tables show the historical loss ratios for all policies from 2000 through 2005. The new discounts are expected to bring improved, but not complete, balance to the loss ratios by generally raising the premium on the categories with high historical loss ratios and lowering the premium on categories with low historical loss ratios.

Loyalty Discount

It is well understood that loyal and tenured customers have lower loss ratios than new customers. Pharmacists' experience supports this general theory. Table 7 shows the historical losses, premium and resulting loss ratios by tenure. New policies carry a loss ratio of 87% while loyal policies carry much lower loss ratios. The proposed discounts recognize that loyalty is to be encouraged and rewarded.

Table 7

| Loss Ratios by Tenure | | | |
|------------------------------|--------------|--------------|------------|
| Years | Losses | Premium | Loss Ratio |
| New Policy | \$5,120,365 | \$5,882,106 | 87% |
| 1 | 5,821,939 | 6,634,791 | 88% |
| 2 | 7,625,419 | 9,714,446 | 78% |
| 3 | 7,602,784 | 10,005,247 | 76% |
| 4 | 6,218,874 | 9,159,077 | 68% |
| 5 | 4,789,482 | 8,271,697 | 58% |
| 6 | 4,759,755 | 7,495,739 | 63% |
| 7 and More | 3,810,675 | 9,800,682 | 39% |
| Total | \$45,749,292 | \$66,963,785 | 68% |

Payment Method Discount

Insureds that pay in full at the outset of a policy have a clear loss ratio advantage over those that pay incrementally over the course of the policy as shown in Table 8.

Table 8

| Loss Ratios by Payment Method | | | |
|--------------------------------------|--------------|--------------|------------|
| Method | Losses | Premium | Loss Ratio |
| Partial | \$40,622,404 | \$57,690,484 | 70% |
| Full | 5,126,888 | 9,273,300 | 55% |
| Total | \$45,749,292 | \$66,963,785 | 68% |

Insurance Score Discounts and Surcharges

In recent years the use of insurance scores in the ratemaking process has become commonplace. There is ample industry evidence supporting the relationship between high insurance scores and low loss ratios.

A “Correlation Study” was conducted on the Company’s 11,479 active policies between 2000 and 2005 to examine the relationship between insurance score and loss ratios. About one-third of the policies in that timeframe were inactive by July 2006. Another 4% of policies did not generate insurance scores. The loss experience and insurance scores from the remaining 63% policies were grouped into ten equal deciles. This yielded about 720 policies in each decile. Table 9 shows the correlation study results.

Table 9

| Insurance Scores and Loss Ratios | | | | | |
|---|-------------|--------------|--------------|------------|--------|
| Decile | Score Range | Losses | Premium | Loss Ratio | Count |
| 1 | 467-589 | \$4,402,842 | \$4,994,855 | 88% | 717 |
| 2 | 590-632 | 4,438,086 | 5,120,450 | 87% | 720 |
| 3 | 633-661 | 3,060,939 | 5,349,481 | 57% | 722 |
| 4 | 662-683 | 2,957,445 | 5,105,915 | 58% | 703 |
| 5 | 684-702 | 2,814,697 | 5,076,861 | 55% | 701 |
| 6 | 703-722 | 3,238,860 | 5,181,829 | 63% | 725 |
| 7 | 723-745 | 2,401,653 | 5,103,329 | 47% | 719 |
| 8 | 746-780 | 2,405,340 | 5,104,506 | 47% | 733 |
| 9 | 781-829 | 2,347,686 | 4,731,989 | 50% | 720 |
| 10 | 830-947 | 2,130,873 | 4,453,911 | 48% | 724 |
| No Hits | | 1,743,667 | 3,284,203 | 53% | 466 |
| Insufficient Data | | 93,055 | 121,324 | 77% | 20 |
| Inactive Policies | | 13,714,149 | 13,335,132 | 103% | 3,809 |
| Total | | \$45,749,292 | \$66,963,785 | 68% | 11,479 |

The graph of this insurance score analysis is shown below. A trend line has been drawn indicating the relationship between low insurance score and high loss ratios.



Pharmacists will apply a 15% surcharge to policies with insurance scores under 600 and a surcharge of 7.5% to those with insurance scores between 600 and 649, inclusive. No surcharge or discount will be applied to policies with insurance scores between 650 and 749, inclusive. A 5% discount will apply to policies with insurance scores between 750 and 849, inclusive, and a 10% discount will apply to those with insurance scores above 849. These ranges, along with the statistical evidence, are summarized in Table 10.

Table 10

| Insurance Scores and Loss Ratios | | | | |
|----------------------------------|------------|------------|------------|-------|
| Score Range | Losses | Premium | Loss Ratio | Count |
| Under 600 | 5,334,177 | 6,146,105 | 87% | 862 |
| 600-649 | 5,200,592 | 6,896,118 | 75% | 970 |
| 650-749 | 13,093,320 | 23,612,536 | 55% | 3,284 |
| 750-849 | 5,318,548 | 10,562,684 | 50% | 1,570 |
| 850 and Above | 1,251,784 | 3,005,682 | 42% | 498 |
| Total | 30,198,421 | 50,223,125 | 60% | 7,184 |

The Company will use the lowest insurance score on policies for which there is more than one insurance score.

Safe Driver Discount

The three new discount schedules discussed so far result in a total premium reduction of 9.4%. Since Pharmacists' Private Passenger Auto experience has been unprofitable, the current safe driver discount program needs to be cut back. Table 11 shows the loss ratios by accident free years under the current safe driver program.

Table 11

| Accident Free Years and Loss Ratios | | | |
|--|--------------|--------------|------------|
| Accident Free Years | Losses | Premium | Loss Ratio |
| Less than 4 | \$22,376,769 | \$29,954,294 | 75% |
| 4 | 3,469,859 | 5,925,047 | 59% |
| 5 | 3,425,505 | 4,791,226 | 71% |
| 6 | 2,978,091 | 4,038,458 | 74% |
| 7 | 2,147,765 | 3,009,298 | 71% |
| 8 or more | 11,351,302 | 19,245,461 | 59% |
| Total | \$45,749,292 | \$66,963,785 | 68% |

The new loyalty discounts, when taken together with the new safe driver discount program, almost reconstruct the current safe driver discount. Table 11 shows that the loss ratios are balanced by accident free category under the current program. This balance is expected to continue with the proposed segmentation of loyalty and driving experience.

Combined Impact of the New Tables

The new discounts and surcharges will result in a premium change for most policyholders. Some premium changes will be modest while others could be considered material. It is estimated that about 73% of all policyholders will see a change in premium between -10% and +10%.

Table 12

| Impact of New Rates | |
|----------------------------|-------------------|
| Range of Impact | Share of Insureds |
| Between -40% and -31% | 0.02% |
| Between -30% and -21% | 1.39% |
| Between -20% and -11% | 19.82% |
| Between -10% and -1% | 47.62% |
| No Change | 4.81% |
| Between +1% and +10% | 20.65% |
| Between +11% and +20% | 5.11% |
| Between +21% and +30% | 0.57% |
| Between +31% and +40% | 0.01% |
| Total | 100.00% |

CHOICEPOINT
Attract One

| Description | Interval | Interval Points |
|--|---|---|
| Constant | | 0.41938275 |
| # OF ACCOUNTS EVER 30 DAYS LATE OR WORSE | 0 1 2 or more bypass no accts | 0.00000000 0.03710475 0.05445702 0.00000000 0.05445702 |
| AVERAGE # OF/MONTHS ACCTS HAVE BEEN OPEN | 0 - 17 18 - 26 27 - 38 39 - 77 78 - 118 119 - 129 130 - 146 147 or more | 0.00000000 -0.01853491 -0.06557460 -0.08455045 -0.08939881 -0.09419093 -0.09992764 -0.10608044 |
| # OF DEROGATORY PUBLIC RECORD ITEMS LESS MEDICAL COLLECTIONS | 1 2 or more no public recs | 0.05758274 0.10445912 0.00000000 |
| # OF ACCOUNTS ON FILE | 1 - 6 7 - 14 15 - 17 18 - 22 23 - 30 31 or more collection accts only | 0.00000000 0.02530460 0.02550220 0.05115582 0.06718021 0.07807018 0.06718021 |
| # OF BANK REVOLVING ACCOUNTS PAID SATISFACTORY IN THE LAST 24 MONTHS | 0 1 - 4 5 or more | 0.00000000 -0.00694762 -0.03286667 |
| # OF CONSUMER INITIATED INQUIRIES IN THE LAST 6 MONTHS EXCLUDING INSURANCE INQUIRIES AUTO & MORTGAGE ARE DE-DUPED WITHIN 30 DAYS | 0 1 2 3 - 4 5 - 6 7 or more | 0.00000000 0.00624916 0.02263173 0.02450539 0.05516139 0.07783899 |
| TOTAL AVERAGE DEBT BURDEN (TOTAL BALANCE/TOTAL HIGH CREDIT) | 0.0000 - 0.0116 0.0117 - 0.0480 0.0481 - 0.4046 0.4047 - 0.7254 0.7255 or more bypass/no accts | 0.00000000 -0.00668316 0.01124870 0.02229914 0.02712739 0.02712739 |
| # OF ACCOUNTS ALWAYS PAID SATISFACTORY | 0 - 1 2 3 4 5 - 8 9 - 14 15 or more | 0.00000000 -0.00616366 -0.02320315 -0.02736071 -0.03674721 -0.01718164 0.00000000 |
| AMOUNT OF PAST DUE BALANCES / TOTAL BALANCES | 0 0.0001 - 0.0258 0.0259 or more | 0.00000000 0.00587737 0.03218474 |
| # OF OPEN BANK INSTALLMENT ACCOUNTS | 0 - 1 2 or more bypass/no bank install | 0.00000000 0.02979519 -0.00919318 |
| # OF OPEN RETAIL ACCOUNTS | 0 1 2 3 or more | 0.00000000 0.01518899 0.02551045 0.02867840 |
| NO AUTO FINANCE ACCOUNTS ESTABLISHED | auto finance accts no auto finance | 0.00000000 -0.02217035 |
| % OF ACCOUNTS PAID SATISFACTORY TO TOTAL ACCOUNTS ON FILE | 0.0000 - 0.7143 0.7144 or more | 0.00000000 -0.01724891 |

CHOICEPOINT
Attract One

| Description | Interval | Interval Points |
|---|--|---|
| AGE OF OLDEST BANK REVOLVING ACCOUNT (IN MONTHS) | 0 1 - 23 24 - 56 57 - 98 99 - 140 141 or more | 0.00000000 -0.00497433 -0.02070378 -0.02129159 -0.03797212 -0.04634066 |
| # OF BANK REVOLVING ACCOUNTS WITH BALANCE TO HIGH CREDIT 75% OR MORE | 0 1 2 3 or more | 0.00000000 0.00822224 0.00883561 0.02432363 |
| # OF RETAIL ACCOUNTS EVER 60 DAYS LATE | 0 1 or more | 0.00000000 0.03896582 |
| AGE OF YOUNGEST ACCOUNT (IN MONTHS) | 0 - 12 13 or more | 0.00000000 -0.01990612 |
| FILE CONTAINS CREDIT UNION, S&L, MORTGAGE ACCOUNTS PAID SATISFACTORY, 30 DAYS, 60 DAYS, 90-120 DAYS LATE AND BAD DEBT | NO YES | 0.00000000 0.49406772 |
| FILE CONTAINS BANK INSTALLMENT ACCOUNTS PAID SATISFACTORY, 30 DAYS AND 60 DAYS LATE | NO YES | 0.00000000 0.06031028 |

SERFF Tracking Number: PHAR-125593733 *State:* Arkansas
Filing Company: Pharmacists Mutual Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: AR-APV-07-08-RR
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Automobile
Project Name/Number: AR-APV-07-08-RR/AR-APV-07-08-RR

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 | Supporting Document | APCS-Auto Premium Comparison Survey | 04/03/2008 | PPA Survey FORM APCS - AR APV 07-08.pdf |

Private Passenger Auto Premium Comparison Survey Form

FORM APCS - last modified August 2005

NAIC Number: 13714
Company Name: Pharmacists Mutual Insurance Company
Contact Person: Kris Laubenthal
Telephone No.: 800-247-5930, extension 7322
Email Address: Kris.Laubenthal@pmic.com
Effective Date: 7/1/2008

Assumptions to Use:

- 1 **Liability** -Minimum \$25,000 per person
- 2 **Bodily Injury** \$50,000 per accident
\$25,000 per accident
- 3 **Property Damage** \$100 deductible per accident
- 4 **Comprehensive & Collision** \$250 deductible per accident
- 5 **The insured has elected to accept:**
 Uninsured motorist property and bodily injury equal to liability coverage
 Underinsured bodily injury equal to liability coverage
- 6 **Personal Injury Protection** of \$5,000 for medical, loss wages according to statute and \$5,000 accidental death
- 7 **If male and female rates are different, use the highest of the two**

Submit to: Arkansas Insurance Department
 1200 West Third Street
 Little Rock, AR 72201-1904
Telephone: 501-371-2800
 Email as an attachment to insurance.pnc@arkansas.gov
 You may also attach to a SERFF filing or submit on a compact disk

DISCOUNTS OFFERED:
 PASSIVE RESTRAINT/AIRBAG 30%
 AUTO/HOMEOWNERS 5%
 GOOD STUDENT 15%
 ANTI-THEFT DEVICE 15%
 Over 55 Defensive Driver Discount 10%
 \$250/\$500 Deductible Comp./Coll. 10 (Coll) %

| | | Fayetteville | | | | Trumann | | | | Little Rock | | | | Lake Village | | | | Pine Bluff | | | | | |
|--|---|--------------|---------|-------------------|-------------------|-----------|---------|-------------------|-------------------|-------------|---------|-------------------|-------------------|--------------|---------|-------------------|-------------------|------------|---------|-------------------|-------------------|---------|---------|
| | | Female 18 | Male 18 | Male or Female 40 | Male or Female 66 | Female 18 | Male 18 | Male or Female 40 | Male or Female 66 | Female 18 | Male 18 | Male or Female 40 | Male or Female 66 | Female 18 | Male 18 | Male or Female 40 | Male or Female 66 | Female 18 | Male 18 | Male or Female 40 | Male or Female 66 | | |
| Vehicle | Coverages | Gender | Age | | | | | | | | | | | | | | | | | | | | |
| 1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB | Minimum Liability | | | \$715 | \$842 | \$334 | \$319 | \$670 | \$788 | \$316 | \$300 | \$918 | \$1,080 | \$429 | \$408 | \$589 | \$692 | \$282 | \$268 | \$852 | \$1,001 | \$401 | \$382 |
| | Minimum Liability with Comprehensive and Collision | | | \$1,325 | \$1,542 | \$596 | \$565 | \$1,268 | \$1,468 | \$570 | \$541 | \$1,612 | \$1,879 | \$725 | \$689 | \$1,340 | \$1,534 | \$601 | \$571 | \$1,625 | \$1,881 | \$731 | \$693 |
| | 100/300/50 Liability with Comprehensive and Collision | | | \$1,472 | \$1,709 | \$681 | \$649 | \$1,420 | \$1,642 | \$658 | \$626 | \$1,812 | \$2,106 | \$841 | \$802 | \$1,476 | \$1,689 | \$683 | \$650 | \$1,840 | \$2,126 | \$853 | \$813 |
| 2003 Ford Explorer "XLT" 2WD, 4 door | Minimum Liability | | | \$715 | \$842 | \$334 | \$319 | \$670 | \$788 | \$316 | \$300 | \$918 | \$1,080 | \$429 | \$408 | \$589 | \$692 | \$282 | \$268 | \$852 | \$1,001 | \$401 | \$382 |
| | Minimum Liability with Comprehensive and Collision | | | \$1,461 | \$1,693 | \$654 | \$621 | \$1,402 | \$1,710 | \$630 | \$595 | \$1,758 | \$2,042 | \$788 | \$747 | \$1,522 | \$1,735 | \$681 | \$645 | \$1,798 | \$2,074 | \$806 | \$765 |
| | 100/300/50 Liability with Comprehensive and Collision | | | \$1,603 | \$1,853 | \$738 | \$702 | \$1,549 | \$1,785 | \$715 | \$679 | \$1,951 | \$2,261 | \$901 | \$857 | \$1,653 | \$1,884 | \$760 | \$722 | \$2,005 | \$2,311 | \$925 | \$880 |
| 2003 Honda Odyssey "EX" | Minimum Liability | | | \$715 | \$842 | \$334 | \$319 | \$670 | \$788 | \$316 | \$300 | \$918 | \$1,080 | \$429 | \$408 | \$589 | \$692 | \$282 | \$268 | \$852 | \$1,001 | \$401 | \$382 |
| | Minimum Liability with Comprehensive and Collision | | | \$1,417 | \$1,645 | \$635 | \$786 | \$1,358 | \$1,568 | \$610 | \$578 | \$1,709 | \$1,989 | \$768 | \$728 | \$1,462 | \$1,671 | \$656 | \$622 | \$1,742 | \$2,011 | \$782 | \$742 |
| | 100/300/50 Liability with Comprehensive and Collision | | | \$1,559 | \$1,805 | \$719 | \$684 | \$1,505 | \$1,735 | \$695 | \$662 | \$1,902 | \$2,208 | \$881 | \$838 | \$1,593 | \$1,820 | \$735 | \$699 | \$1,949 | \$2,248 | \$901 | \$857 |
| 2005 Toyota Camry LE 3.0L 4 door Sedan | Minimum Liability | | | \$715 | \$842 | \$334 | \$319 | \$670 | \$788 | \$316 | \$300 | \$918 | \$1,080 | \$429 | \$408 | \$589 | \$692 | \$282 | \$268 | \$852 | \$1,001 | \$401 | \$382 |
| | Minimum Liability with Comprehensive and Collision | | | \$1,690 | \$1,955 | \$751 | \$714 | \$1,629 | \$1,874 | \$726 | \$687 | \$2,020 | \$2,342 | \$901 | \$853 | \$1,818 | \$2,065 | \$809 | \$764 | \$2,093 | \$2,406 | \$933 | \$884 |
| | 100/300/50 Liability with Comprehensive and Collision | | | \$1,832 | \$1,957 | \$835 | \$795 | \$1,776 | \$2,041 | \$811 | \$771 | \$2,213 | \$2,561 | \$1,014 | \$963 | \$1,949 | \$2,561 | \$888 | \$841 | \$2,300 | \$2,643 | \$1,052 | \$999 |
| 2003 Cadillac Seville "STS" 4 door Sedan | Minimum Liability | | | \$715 | \$842 | \$334 | \$319 | \$670 | \$788 | \$316 | \$300 | \$918 | \$1,080 | \$429 | \$408 | \$589 | \$692 | \$282 | \$268 | \$852 | \$1,001 | \$401 | \$382 |
| | Minimum Liability with Comprehensive and Collision | | | \$1,740 | \$2,007 | \$773 | \$734 | \$1,686 | \$1,932 | \$751 | \$578 | \$2,067 | \$2,392 | \$922 | \$873 | \$1,902 | \$2,152 | \$844 | \$800 | \$2,167 | \$2,481 | \$964 | \$914 |
| | 100/300/50 Liability with Comprehensive and Collision | | | \$1,882 | \$2,167 | \$857 | \$815 | \$1,833 | \$2,099 | \$836 | \$795 | \$2,260 | \$2,611 | \$1,035 | \$983 | \$2,033 | \$2,301 | \$923 | \$877 | \$2,374 | \$2,718 | \$1,083 | \$1,029 |
| 1998 Chevrolet Cavalier LS 4D Sedan | Minimum Liability | | | \$715 | \$842 | \$334 | \$319 | \$670 | \$788 | \$316 | \$300 | \$918 | \$1,080 | \$429 | \$408 | \$589 | \$692 | \$282 | \$268 | \$852 | \$1,001 | \$401 | \$382 |
| | Minimum Liability with Comprehensive and Collision | | | \$1,504 | \$1,741 | \$671 | \$638 | \$1,446 | \$1,665 | \$648 | \$614 | \$1,804 | \$2,095 | \$809 | \$767 | \$1,582 | \$1,800 | \$708 | \$670 | \$1,856 | \$2,136 | \$831 | \$789 |
| | 100/300/50 Liability with Comprehensive and Collision | | | \$1,646 | \$1,901 | \$755 | \$719 | \$1,593 | \$1,832 | \$733 | \$698 | \$1,997 | \$2,314 | \$922 | \$877 | \$1,713 | \$1,949 | \$787 | \$747 | \$2,063 | \$2,373 | \$950 | \$904 |