

SERFF Tracking Number: HMSS-125739488 State: Arkansas
 Filing Company: Homesite Insurance Company of the Midwest State Tracking Number: EFT \$25
 Company Tracking Number: AR-HO-08-103
 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
 Product Name: Homeowners
 Project Name/Number: /

Filing at a Glance

Company: Homesite Insurance Company of the Midwest

Product Name: Homeowners	SERFF Tr Num: HMSS-125739488	State: Arkansas
TOI: 04.0 Homeowners	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations	Co Tr Num: AR-HO-08-103	State Status: Fees verified and received
Filing Type: Rule	Co Status:	Reviewer(s): Becky Harrington, Betty Montesi
	Author: Jake McDonnell	Disposition Date: 09/12/2008
	Date Submitted: 09/11/2008	Disposition Status: Filed
Effective Date Requested (New): 10/01/2008		Effective Date (New): 10/01/2008
Effective Date Requested (Renewal): 10/01/2008		Effective Date (Renewal): 10/01/2008

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile: Pending
Project Number:	Domicile Status Comments: North Dakota is the Company's state of domicile. An identical filing is pending in that state.
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 09/12/2008	
State Status Changed: 09/12/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Homesite Indemnity Company of the Midwest ("Homesite") hereby makes this filing in Arkansas with an effective date of 10/1/2008 for both new and renewal business. We have classified this as a "rule" filing for SERFF transmission purposes. However, the change to the applicable manual page proposed in our filing is a change in display only; there is no substantive modification to the application of any rule. No current policyholders are impacted in any way as the result of our filing.

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Our only change proposed in this filing involves the modification of the display in our Rate manual for rates associated with Rule #481: "Affinity Marketing". In Homesite's current rate manual, factors attributable to each affinity partner are listed in line-item fashion under Rule 481; each Homesite affinity partner is specifically listed. However, all partners receive an identical factor. Given Homesite's intent to retain the same factor for all partners, we propose that the line-item description of each individual partner be removed from our pages resulting in a single rate for any and all affinity partners.

Approval of our proposed change will eliminate the necessity for a filing, and for a subsequent Departmental review, each and every time a new affinity partner is added in the future. Eliminating the necessity for such filings will generate increased operational efficiency.

Homesite does not envision making any distinctions in the Rule 481 rate factor as between its multiple affinity partners. However, should we for some reason choose to propose such rates in the future, we recognize that any distinctions will require a filing with the Department displaying the applicable factor for each partner.

Enclosed please find replacement rate and rule manual pages. For both manuals (rate and rule) a "redlined" version of the replacement page, showing the proposed changes from our current page, has been provided along side a "clean" version of our proposed page. These documents have been provided in the SERFF rate/rule schedule.

Should you have any questions with respect to our filing, please do not hesitate to contact me via SERFF, at 617-832-1439, or at jmcdonnell@homesite.com.

Sincerely,

Jake McDonnell
Government Affairs
Homesite Insurance

Company and Contact

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Filing Contact Information

Jake McDonnell, Governement Affairs Advisor jmcdonnell@homesite.com
 99 Bedford Street (617) 832-1439 [Phone]
 Boston, MA 02111 (617) 832-1485[FAX]

Filing Company Information

Homesite Insurance Company of the Midwest	CoCode: 13927	State of Domicile: North Dakota
99 Bedford Street	Group Code: 1293	Company Type: Homeowners
Boston, MA 02111	Group Name:	State ID Number:
(617) 832-1342 ext. [Phone]	FEIN Number: 45-0282873	

Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 Retaliatory? No
 Fee Explanation: \$25.00 for independent rule filing
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Homesite Insurance Company of the Midwest	\$25.00	09/11/2008	22435111

SERFF Tracking Number: HMSS-125739488 State: Arkansas
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Product Name: Homeowners
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	09/12/2008	09/12/2008

SERFF Tracking Number: *HMSS-125739488* *State:* *Arkansas*
Filing Company: *Homesite Insurance Company of the Midwest* *State Tracking Number:* *EFT \$25*
Company Tracking Number: *AR-HO-08-103*
TOI: *04.0 Homeowners* *Sub-TOI:* *04.0000 Homeowners Sub-TOI Combinations*
Product Name: *Homeowners*
Project Name/Number: */*

Disposition

Disposition Date: 09/12/2008

Effective Date (New): 10/01/2008

Effective Date (Renewal): 10/01/2008

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: HMSS-125739488 State: Arkansas
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Item Type	Item Name	Item Status	Public Access
Supporting Document	HPCS-Homeowners Premium Comparison Survey		Yes
Supporting Document	NAIC loss cost data entry document		Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp		Yes
Supporting Document	Uniform Transmittal Document-Property &Filed Casualty		Yes
Rate	Rules Manual version 1.3	Filed	Yes
Rate	Rates Manual version 1.3	Filed	Yes

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Rules Manual version 1.3	replacement page # 17 (Rule 481)	Replacement	AR Rules 1.3 p17 - redlined.pdf AR Rules 1.3 p17 - clean.pdf
Filed	Rates Manual version 1.3	replacement page #9 (Rule 481)	Replacement	AR Rates 1.3 p9 - redlined.pdf AR Rates 1.3 p9 - clean.pdf

HOMESITE INSURANCE COMPANY OF THE MIDWEST HOMEOWNERS POLICY PROGRAM MANUAL

472. SAFE HEAT

When the primary heating system in the residence is a solid-fuel burning system, multiply the BASE PREMIUM by the applicable factor shown on the state rate pages.

480. MATURE OWNER/RESIDENT [N/A to Renters Express Program]

When either or both the named insured(s) are 50 years of age or older, multiply the BASE PREMIUM by the applicable factor shown on the state rate pages.

481. AFFINITY MARKETING

~~A discount applies to the BASE PREMIUM~~ The rating factor shown on the state rate pages applies according to the Premium Computation Rule 301.A.2 when the coverage is placed through a Homesite affinity partner and the named insured also maintains an account with a Homesite affinity partner or membership in an approved group. ~~Refer to the state rate pages for a list of available programs and discount factors.~~

482. POLICY CONVERSION – FORMS HO 00 04 AND HO 00 06

If the named insured replaces a current Homesite tenants or unit-owners policy with a Homesite owners form policy, multiply the BASE PREMIUM by the appropriate factor shown on the state rate pages.

483. INTERNET QUOTE/PURCHASE [N/A in Arkansas]

When the initial quote is made and coverage is bound for a new business policy through the company's web site *www.homesite.com*, multiply the BASE PREMIUM by the appropriate factor shown on the state rate pages.

484. SMOKER SURCHARGE [N/A to Renters Express Program]

Determine the number of smokers living in the household, and multiply the base premium by the applicable factor shown on the state rate pages.

485. RENTERS EXPRESS PROGRAM – FORM HO 00 04

The Renters Express program is a tenant based homeowners program whereby an apartment complex is underwritten as a whole, and all tenants are eligible for a renters policy. In these cases, Homesite does not apply individual risk underwriting guidelines.

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HOMESITE INSURANCE COMPANY OF THE MIDWEST HOMEOWNERS POLICY PROGRAM MANUAL

Rule 301.A.6. Expense/Loss Experience Modifiers

<u>Program Identifier</u>	<u>Modifier</u>
GMAC and affiliates "Affinity" marketing and referral programs	1.07
GMAC Insurance Agency independent agency programs	1.18
AIG and affiliates "Affinity" marketing and referral programs	1.053
Insurance Intermediaries, Inc. independent agency programs	1.07
Wells Fargo	1.063
All Other	1.00

Rule 481. Affinity Marketing [\(HO 00 03 Only\)](#)

Factor
0.80

<u>Program Identifier</u>	<u>Factor</u>
GMAC insurance subsidiaries automobile policyholders written through Homesite's GMAC Insurance Homeowners Program (HO 00-03 only)	0.80
AIG insurance subsidiaries automobile policyholders written through Homesite's AIG Insurance Homeowners Program (HO 00-03 only)	0.80
Progressive Drive insurance subsidiaries automobile policyholders written through Homesite's Progressive Drive Insurance Homeowners Program (HO 00-03 only)	0.80
Progressive Direct insurance subsidiaries automobile policyholders written through Homesite's Progressive Direct Insurance Homeowner Program (HO 00-03 only)	0.80
Esurance insurance subsidiaries automobile policyholders written through Homesite's Esurance Insurance Homeowners Program (HO 00-03 only)	0.80
Unitrin insurance subsidiaries automobile policyholders written through Homesite's Unitrin Insurance Homeowners Program (HO 00-03 only)	0.80
USAA automobile policyholders written through Homesite's USAA Insurance Homeowners Program (HO 00-03 only)	0.80

**HOMESITE INSURANCE COMPANY OF THE MIDWEST
HOMEOWNERS POLICY PROGRAM MANUAL**

Rule 301.A.6. Expense/Loss Experience Modifiers

<u>Program Identifier</u>	<u>Modifier</u>
GMAC and affiliates "Affinity" marketing and referral programs	1.07
GMAC Insurance Agency independent agency programs	1.18
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All Other	1.00

Rule 481. Affinity Marketing (HO 00 03 Only)

<u>Factor</u>
0.80

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Supporting Document Schedules

Review Status:

Bypassed -Name: HPCS-Homeowners Premium Comparison Survey 07/18/2008
Bypass Reason: Per confirmation from the Department, this form will not be required for this filing.
Comments:

Review Status:

Bypassed -Name: NAIC loss cost data entry document 07/18/2008
Bypass Reason: Per confirmation from the Department, this form will not be required for this filing.
Comments:

Review Status:

Bypassed -Name: NAIC Loss Cost Filing Document for OTHER than Workers' Comp 07/18/2008
Bypass Reason: This is a rule filing only and, moreover, it is a rule filing with no impact to rate with respect to any of our Arkansas policyholders. The change we propose is in the nature of a formatting modification to our pages. This section does not apply to this filing.
Comments:

Review Status:

Satisfied -Name: Uniform Transmittal Document-Property & Casualty Filed 09/12/2008
Comments:
Attachment:
 PC Transmittal Form.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <table style="width: 100%; border: none;"> <tr> <td style="width: 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	
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

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

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.)

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