

SERFF Tracking Number: PHAR-126013554 State: Arkansas
Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$125
Company Tracking Number: AR-APV-05-09-RR
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: AR-APV-05-09-RR/AR-APV-05-09-RR

Filing at a Glance

Company: Pharmacists Mutual Insurance Company

Product Name: Personal Auto SERFF Tr Num: PHAR-126013554 State: Arkansas
TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: EFT \$125
Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: AR-APV-05-09-RR State Status: Fees verified and received (PPA)
Filing Type: Rate/Rule Co Status: Reviewer(s): Alexa Grissom, Betty Montesi
Authors: Janine MacVey, Heidi Allen Disposition Date: 03/19/2009
Date Submitted: 03/09/2009 Disposition Status: Filed
Effective Date Requested (New): 05/01/2009 Effective Date (New): 05/01/2009
Effective Date Requested (Renewal): 05/01/2009 Effective Date (Renewal):
State Filing Description:

General Information

Project Name: AR-APV-05-09-RR Status of Filing in Domicile:
Project Number: AR-APV-05-09-RR Domicile Status Comments:
Reference Organization: ISO Reference Number: PP-2008-BRLA1
Reference Title: Advisory Org. Circular: LI-PA-2008-300
Filing Status Changed: 03/19/2009
State Status Changed: 03/12/2009 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:

Pharmacists Mutual Insurance Company (PMIC) is a member of ISO for our personal automobile program. With this filing we are adopting ISO's loss cost revision PP-2008-BRLA1. Although ISO's revision would provide a rate decrease of 8.9% our company rate indication suggests otherwise. Thus, we have chosen to revise our loss cost multipliers keep our rates flat, with a rate decrease of 0.1% overall.

We are also submitting, for your review, our revised Personal Automobile Manual Exception Pages. With this revision

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we have revised Rule 23 Multivariate Rating Factors, D. Insurance Score, to state that we use the highest insurance score to determine the surcharge/discount. Since implementing the previously approved program we have discovered that there is often a discrepancy between the credit scores of spouses. To the benefit of our insured, we have chosen to use the better of the two credit scores in our insurance scoring. We have made no other changes to our exception pages as previously approved in filing PHAR-125593733.

We would like for these revisions to become effective for all policies written on or after May 1, 2009.

Company and Contact

Filing Contact Information

Janine MacVey, Rate Analyst janine.macvey@phmic.com
 PO Box 370 (515) 395-7207 [Phone]
 Algona, IA 50511 (515) 295-9306[FAX]

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: \$125.00
 Retaliatory? No
 Fee Explanation: Rate filing (adoption of ISO revision with LCM change) & independent rule filing.
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Pharmacists Mutual Insurance Company	\$125.00	03/09/2009	26244759

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	03/19/2009	03/19/2009

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	03/12/2009	03/12/2009	Janine MacVey	03/16/2009	03/16/2009
Industry Response						

SERFF Tracking Number: PHAR-126013554 State: Arkansas
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Disposition

Disposition Date: 03/19/2009
 Effective Date (New): 05/01/2009
 Effective Date (Renewal):
 Status: Filed
 Comment:

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	0.200%	-0.100%	\$-1,076	409	\$732,605	-8.500%	-0.200%

SERFF Tracking Number: PHAR-126013554 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$125
 Company Tracking Number: AR-APV-05-09-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Auto
 Project Name/Number: AR-APV-05-09-RR/AR-APV-05-09-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 and supporting documentation	Filed	Yes
Rate	AR Personal Auto Exception Pages, edition 05-09	Filed	Yes
Rate	AR Personal Auto Manual Rate Pages, edition 05-09	Filed	Yes

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Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 03/12/2009

Submitted Date 03/12/2009

Respond By Date

Dear Janine MacVey,

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 03/16/2009

Submitted Date 03/16/2009

Dear Alexa Grissom,

Comments:

I have attached the Excel version of the premium survey as you requested.

Response 1

Comments: Excel version of APCS has been attached as requested.

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.

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Please advise if you need any additional information in order to complete this filing request.

Sincerely,
Heidi Allen, Janine MacVey

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State: Arkansas
 State Tracking Number: EFT \$125
 Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Rate Information

Rate data applies to filing.

Filing Method: File & Use
Rate Change Type: Decrease
Overall Percentage of Last Rate Revision: -3.700%
Effective Date of Last Rate Revision: 07/01/2008
Filing Method of Last Filing: File & 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	0.200%	-0.100%	\$-1,076	409	\$732,605	-8.500%	-0.200%

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	AR Personal Auto Exception Pages, edition 05-09	All	Replacement	PHAR-125593733 AR APV Exception Page 05-09.pdf
Filed	AR Personal Auto Manual Rate Pages, edition 05-09	All	Replacement	PHAR-125593733 AR APV Rate Pages 05-09.pdf

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
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 highest 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%

Filed Base Rates by Territory

Terr	\$75,000	25/50	\$25,000	1,000
	CSL	B.I.	P.D	MP
21	495	215	211	35
22	476	183	235	21
23	391	140	204	17
24	402	162	190	18
25	415	187	169	23
26	346	142	160	18
27	288	116	135	17
28	334	145	145	17
29	266	103	130	14
30	370	139	187	16
31	349	125	183	17
32	313	128	146	17
33	356	143	167	17

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>
21	136	129	123	116	111	105	100	96	90
22	102	97	92	88	84	79	75	72	68
23	83	79	75	71	68	64	61	58	55
24	106	101	96	91	87	82	78	75	70
25	160	153	145	137	131	124	118	113	107
26	143	136	129	122	117	110	105	101	95
27	182	173	164	156	149	140	133	128	121
28	148	141	134	127	121	114	109	104	99
29	129	123	116	110	105	99	94	91	86
30	72	69	65	62	59	56	53	51	48
31	92	87	83	79	75	71	67	65	61
32	160	153	145	137	131	124	118	113	107
33	111	106	100	95	91	86	81	78	74

COMPREHENSIVE \$500 Deductible

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>	<u>19</u>
1.20	1.31	1.43	1.56	1.72	1.87	2.02	2.16	2.34
<u>20</u>	<u>21</u>	<u>22</u>	<u>23</u>	<u>24</u>	<u>25</u>	<u>26</u>		
2.54	2.77	3.06	3.37	3.83	4.49	5.17		
Comprehensive 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

<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>
21	562	535	503	471	444	407	375	353	332
22	476	453	426	399	376	344	317	299	281
23	386	368	346	323	305	279	257	243	228
24	439	418	393	368	347	318	293	276	259
25	462	440	413	387	365	334	308	290	273
26	407	388	364	341	322	295	271	256	240
27	418	398	374	350	330	302	278	263	247
28	441	420	394	369	348	319	294	277	260
29	393	374	352	329	311	284	262	247	232
30	365	347	327	306	288	264	243	229	215
31	397	378	355	332	313	287	264	249	234
32	462	440	413	387	365	334	308	290	273
33	388	369	347	325	306	281	258	244	229

COLLISION \$500 Deductible

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>	<u>19</u>
1.10	1.15	1.21	1.28	1.37	1.44	1.52	1.60	1.68
<u>20</u>	<u>21</u>	<u>22</u>	<u>23</u>	<u>24</u>	<u>25</u>	<u>26</u>		
1.76	1.84	1.94	2.05	2.21	2.46	2.71		
Collision 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	\$33	\$26
	22, 23, 24 & 25	\$18	\$15
	All Remaining	\$13	\$10

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	\$41	\$33
	22, 23, 24 & 25	\$23	\$18
	All Remaining	\$16	\$13

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	\$10	\$8
100/200	\$23	\$18
100/300	\$23	\$18
250/500	\$38	\$31
300/300	\$41	\$32
500/500	\$48	\$39
500/1,000	\$48	\$39
1,000/1,000	\$56	\$45
Terr: 22, 23, 24 & 25		
50/100	\$6	\$5
100/200	\$13	\$10
100/300	\$13	\$10
250/500	\$21	\$17
300/300	\$23	\$18
500/500	\$27	\$21
500/1,000	\$27	\$22
1,000/1,000	\$31	\$25
Terr: All Remaining		
50/100	\$4	\$3
100/200	\$9	\$7
100/300	\$9	\$7
250/500	\$15	\$12
300/300	\$16	\$13
500/500	\$19	\$15
500/1,000	\$19	\$15
1,000/1,000	\$22	\$18

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	\$25	\$20
300,000	\$32	\$26
500,000	\$40	\$32
1,000,000	\$47	\$38
Terr: 22, 23, 24 & 25		
75,000	\$4	\$3
100,000	\$7	\$6
200,000	\$14	\$11
300,000	\$18	\$14
500,000	\$22	\$18
1,000,000	\$26	\$21
Terr: All Remaining		
75,000	\$3	\$2
100,000	\$5	\$4
200,000	\$10	\$8
300,000	\$13	\$10
500,000	\$16	\$12
1,000,000	\$19	\$15

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	\$71	\$57
	22, 23, 24 & 25	\$47	\$37
	All Remaining	\$32	\$26

*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	\$85	\$68
	22, 23, 24 & 25	\$55	\$44
	All Remaining	\$39	\$31

*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.

	<u>Single Car</u>	<u>Multi-Car per Car</u>
Territory 21		
50/100	\$10	\$8
100/200	\$23	\$18
100/300	\$23	\$18
250/500	\$38	\$31
300/300	\$41	\$32
500/500	\$48	\$39
500/1,000	\$48	\$39
1,000/1,000	\$56	\$45
Terr: 22, 23, 24 & 25		
50/100	\$6	\$5
100/200	\$13	\$10
100/300	\$13	\$10
250/500	\$21	\$17
300/300	\$23	\$18
500/500	\$27	\$21
500/1,000	\$27	\$22
1,000/1,000	\$31	\$25
Terr: All Remaining		
50/100	\$4	\$3
100/200	\$9	\$7
100/300	\$9	\$7
250/500	\$15	\$12
300/300	\$16	\$13
500/500	\$19	\$15
500/1,000	\$19	\$15
1,000/1,000	\$22	\$18

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

	<u>Single Car</u>	<u>Multi-Car per Car</u>
Territory 21		
100,000	\$6	\$5
200,000	\$18	\$15
300,000	\$25	\$20
500,000	\$33	\$26
1,000,000	\$40	\$32
Terr: 22, 23, 24 & 25		
100,000	\$3	\$2
200,000	\$10	\$8
300,000	\$14	\$11
500,000	\$18	\$14
1,000,000	\$22	\$18
Terr: All Remaining		
100,000	\$2	\$2
200,000	\$7	\$6
300,000	\$10	\$8
500,000	\$13	\$10
1,000,000	\$16	\$13

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	\$3
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	\$29	\$23	\$50,000	\$48	\$38
50/100	\$49	\$39	75,000	\$63	\$50
100/200	\$76	\$61	100,000	\$75	\$60
100/300	\$77	\$62	200,000	\$107	\$86
250/500	\$120	\$96	300,000	\$127	\$102
300/300	\$127	\$102	500,000	\$151	\$121
500/500	\$151	\$121	1,000,000	\$177	\$142
500/1,000	\$152	\$121			
1,000/1,000	\$177	\$142			
	Terr: 22, 23, 24 & 25			Terr: 22, 23, 24 & 25	
\$ 25/50	\$30	\$24	\$50,000	\$50	\$40
50/100	\$51	\$41	75,000	\$66	\$53
100/200	\$81	\$65	100,000	\$80	\$64
100/300	\$82	\$65	200,000	\$113	\$91
250/500	\$127	\$101	300,000	\$134	\$108
300/300	\$134	\$108	500,000	\$159	\$128
500/500	\$159	\$128	1,000,000	\$187	\$150
500/1,000	\$160	\$128			
1,000/1,000	\$187	\$150			
	Terr: All Remaining			Terr: All Remaining	
\$ 25/50	\$24	\$19	\$50,000	\$39	\$32
50/100	\$40	\$32	75,000	\$52	\$41
100/200	\$63	\$50	100,000	\$62	\$50
100/300	\$64	\$51	200,000	\$89	\$71
250/500	\$99	\$79	300,000	\$105	\$84
300/300	\$105	\$84	500,000	\$125	\$100
500/500	\$125	\$100	1,000,000	\$146	\$117
500/1,000	\$125	\$100			
1,000/1,000	\$146	\$117			

14. MISCELLANEOUS COVERAGES

D. Optional Limits Transportation Expenses Coverage

Coverage	Annual Rate Per Auto
\$30/\$900 Optional Limits Transportation Expenses Coverage	\$10
\$40/1200 Optional Limits Transportation Expenses Coverage	\$18
\$50/\$1500 Optional Limits Transportation Expenses Coverage	\$27

E. Towing and Labor Costs

Limit Per Disablement	Rate Per Vehicle, Per Year
\$25	\$4
\$50	\$7
\$75	\$9
\$100	\$11

Limit Per Disablement	Rate Per Motor Home Per Year
\$150	\$11
\$200	\$14
\$250	\$18

F. Increased Limits for Excess Electronic Equipment

Maximum Limit of Liability for Excess Electronic Equipment	Rate
\$1,500	\$49
\$2,000	\$98
\$2,500	\$147
\$3,000	\$195
\$3,500	\$244
\$4,000	\$293
\$4,500	\$342
\$5,000	\$391
\$5,001 & over	\$32 per \$500

G. Tapes, Records, Disks and Other Media Coverage

Limit of Coverage	Rate per Year
\$200	\$16

H. Excess Custom Equipment Coverage

Maximum Limit of Liability for Excess Custom Equipment	Rate per Auto
\$2,000	\$8
\$3,000	\$25
\$4,000	\$42
\$5,000	\$59
\$6,000	\$76
\$7,000	\$92
\$8,000	\$109
\$9,000	\$126
\$10,000	\$143
an additional \$10 per \$1,000 of coverage.	

I. Limited Mexico Coverage

Rate per Year	\$7
---------------	-----

K. Trip Interruption Coverage

Limit of Coverage	Rate per Year
\$600	\$16

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	\$0.77
Collision	\$500	\$0.79

D. Snowmobiles and All-Terrain Vehicles

Coverage	Deductible	Rate Per \$100
Comprehensive	\$500	\$1.51
Collision	\$500	\$1.73

E. Dune Buggies

Coverage	Deductible	Rate Per \$100
Comprehensive	\$500	\$1.59
Collision	\$500	\$6.23

F. Golf Carts

Coverage	Deductible	Rate Per \$100
Comprehensive	\$500	\$0.54
Collision	\$500	\$0.84

G. Antique Autos

Coverage	Deductible	Rate Per \$100
Comprehensive	\$500	\$0.81
Collision	\$500	\$1.19

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 ve	Rate
Per car, per year	\$5
3. Accidental Death Benefit
 - b. Rates

(2) All other motor ve	Rate
Per car, per year	\$3

SERFF Tracking Number: PHAR-126013554 State: Arkansas
 Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$125
 Company Tracking Number: AR-APV-05-09-RR
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Auto
 Project Name/Number: AR-APV-05-09-RR/AR-APV-05-09-RR

Supporting Document Schedules

Satisfied -Name: A-1 Private Passenger Auto
 Abstract
Review Status: Filed 03/19/2009

Comments:

Attachment:

A-1 ed 1-06.pdf

Satisfied -Name: APCS-Auto Premium Comparison
 Survey
Review Status: Filed 03/19/2009

Comments:

Attachments:

AR PPA Survey FORM APCS 05-09.pdf

AR PPA Survey FORM APCS 05-09.xls

Satisfied -Name: NAIC loss cost data entry document
Review Status: Filed 03/19/2009

Comments:

Attachment:

AR APV loss_cost_data_entry 05-09.pdf

Satisfied -Name: NAIC Loss Cost Filing Document
 for OTHER than Workers' Comp
Review Status: Filed 03/19/2009

Comments:

Attachments:

AR APV loss_cost_other_coverLC.pdf

AR APV Loss Filing Doc LI.pdf

AR APV Loss Filing Doc PD.pdf

Bypassed -Name: Uniform Transmittal Document-
 Property & Casualty
Review Status: Filed 03/19/2009

SERFF Tracking Number: PHAR-126013554 *State:* Arkansas
Filing Company: Pharmacists Mutual Insurance Company *State Tracking Number:* EFT \$125
Company Tracking Number: AR-APV-05-09-RR
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: AR-APV-05-09-RR/AR-APV-05-09-RR

Bypass Reason: According to the General Instructions, this document is not required, as the items contained in the NAIC Transmittal Document have already been properly documented in this filing.

Comments:

SERFF Tracking Number: PHAR-126013554 State: Arkansas
Filing Company: Pharmacists Mutual Insurance Company State Tracking Number: EFT \$125
Company Tracking Number: AR-APV-05-09-RR
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: AR-APV-05-09-RR/AR-APV-05-09-RR

Review Status:

Satisfied -Name: Rate Filing Memo and supporting documentation

Filed

03/19/2009

Comments:

Attachments:

AR APV Actuarial Memo 05-09.pdf

AR APV Rate Indication Analysis 05-09.pdf

AR APV Change Analysis SUMMARY 05-09.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 Number 13714; NAIC Group Number 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:
Refer to Exceptions Page #PMIC-2 in this filing for criteria

- e. Anti-Theft Discount 15 %
- f. Other (specify) %
- Airbag/Seatbelt 30 %
- Anti-lock Brake 5 %
- Personal Package (if have Homeowners & Personal Auto) 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?
 Electronic Funds Transfer = \$1 per month
 Quarterly: \$5 per installment, not counting the first
 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
Please refer to our Countrywide Exception Pages Rule 23		

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

 Signature
 Janine M MacVey
 Printed Name
 Product Development Rate Analyst

AID PC A-1 (1/06)

Title

(515) 395 7207

Telephone Number

Janine.macvey@phmic.com

Email address

Private Passenger Auto Premium Comparison Survey Form

FORM APCS - last modified August 2005

NAIC Number: 13714
Company Name: Pharmacists Mutual Insurance Company
Contact Person: Janine M MacVey
Telephone No.: (800) 247-5930 Ext. 7207
Email Address: janine_macvey@pnhmic.com
Effective Date: 5/1/2009

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.	0 / 10	%

Vehicle	Coverages	Gender	Fayetteville				Trumann				Little Rock				Lake Village				Pine Bluff			
			Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female
			18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66
1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392
	Minimum Liability with Comprehensive and Collision		\$1,355	\$1,713	\$558	\$528	\$1,384	\$1,750	\$568	\$538	\$1,714	\$2,168	\$707	\$671	\$1,431	\$1,813	\$586	\$557	\$1,694	\$2,139	\$697	\$665
	100/300/50 Liability with Comprehensive and Collision		\$1,681	\$2,115	\$710	\$675	\$1,725	\$2,174	\$726	\$691	\$2,159	\$2,717	\$913	\$872	\$1,733	\$2,184	\$729	\$696	\$2,120	\$2,666	\$899	\$858
2003 Ford Explorer XLT 2WD, 4 door	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392
	Minimum Liability with Comprehensive and Collision		\$1,449	\$1,835	\$592	\$563	\$1,481	\$1,874	\$603	\$574	\$1,825	\$2,309	\$748	\$710	\$1,552	\$1,966	\$632	\$600	\$1,812	\$2,290	\$742	\$706
	100/300/50 Liability with Comprehensive and Collision		\$1,783	\$2,246	\$750	\$712	\$1,829	\$2,306	\$766	\$730	\$2,277	\$2,870	\$959	\$915	\$1,863	\$2,348	\$780	\$743	\$2,247	\$2,827	\$947	\$903
2003 Honda Odyssey "EX"	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392
	Minimum Liability with Comprehensive and Collision		\$1,416	\$1,793	\$580	\$550	\$1,444	\$1,826	\$592	\$560	\$1,788	\$2,260	\$734	\$696	\$1,500	\$1,901	\$613	\$581	\$1,766	\$2,231	\$726	\$689
	100/300/50 Liability with Comprehensive and Collision		\$1,747	\$2,202	\$735	\$699	\$1,791	\$2,258	\$751	\$715	\$2,240	\$2,818	\$945	\$900	\$1,809	\$2,280	\$759	\$723	\$2,198	\$2,767	\$929	\$886
2005 Toyota Camry LE 3.0L 4 door Sedan	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392
	Minimum Liability with Comprehensive and Collision		\$1,682	\$2,132	\$681	\$647	\$1,729	\$2,191	\$698	\$664	\$2,096	\$2,655	\$852	\$807	\$1,872	\$2,376	\$755	\$717	\$2,133	\$2,699	\$865	\$822
	100/300/50 Liability with Comprehensive and Collision		\$2,032	\$2,564	\$845	\$802	\$2,094	\$2,890	\$867	\$826	\$2,568	\$3,241	\$1,071	\$1,019	\$2,200	\$2,778	\$910	\$865	\$2,587	\$3,260	\$1,077	\$1,027
2003 Cadillac Seville "STS" 4 door Sedan	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392
	Minimum Liability with Comprehensive and Collision		\$1,733	\$2,196	\$700	\$664	\$1,781	\$2,258	\$721	\$683	\$2,156	\$2,731	\$877	\$831	\$1,945	\$2,469	\$784	\$743	\$2,204	\$2,791	\$893	\$847
	100/300/50 Liability with Comprehensive and Collision		\$2,087	\$2,633	\$865	\$822	\$2,150	\$2,715	\$888	\$854	\$2,634	\$3,322	\$1,097	\$1,044	\$2,277	\$2,877	\$938	\$892	\$2,661	\$3,358	\$1,107	\$1,053
1998 Chevrolet Cavalier LS 4D Sedan	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392
	Minimum Liability with Comprehensive and Collision		\$1,477	\$1,869	\$603	\$572	\$1,514	\$1,916	\$617	\$586	\$1,856	\$2,348	\$761	\$722	\$1,607	\$2,036	\$653	\$619	\$1,865	\$2,358	\$762	\$726
	100/300/50 Liability with Comprehensive and Collision		\$1,809	\$2,280	\$759	\$722	\$1,863	\$2,349	\$778	\$742	\$2,310	\$2,909	\$971	\$926	\$918	\$2,417	\$800	\$761	\$2,299	\$2,896	\$968	\$924

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

1.	This filing transmittal is part of Company Tracking #	AR-APV-05-09-RR
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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-2008-BRLA1
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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 (PPA)

5.			FOR LOSS COSTS ONLY				
(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(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 Auto 19.1 & 19.2 Liability Coverage	-2.4	-3.7	63.1	1.05	1.417	Not applicable	1.300
Personal Auto 21.1 Physical Damage Coverage	8.4	4.3	58.1	1.18	1.679	Not applicable	1.556
TOTAL OVERALL EFFECT	0.2	-0.1					

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	
2004	469	9.7	9/1/04	733	538	73.4	88.7	
2005	456	7.1	8/1/05	788	642	79.2	69.9	
2006	437	-0.3	8/1/06	801	621	65.0	74.2	
2007	419	0.0	8/1/07	805	349	43.4	57.5	
2008	409	-3.7	7/1/08	770	728	96.4	61.3	

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	
B. General Expense	
C. Taxes, License & Fees	
D. Underwriting Profit & Contingencies	
E. Other (explain)	
F. TOTAL	

8. Y Apply Lost Cost Factors to Future filings? (Y or N)

9. 5.3 Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____

10. -8.5 Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____

PC RLC

U:LossCostDraft/DataEntry.doc

Date: 02/02/2009

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 808 Hwy 18 W _____
 Algona, IA 50511 _____
2. PERSON RESPONSIBLE FOR FILING Janine M MacVey _____
TITLE Product Development Rate Analyst _____ TELEPHONE # (515) 395-7207 _____
3. INSURER NAIC # 13714 _____
4. LINE OF INSURANCE 19.0 Personal Auto _____
5. ADVISORY ORGANIZATION ISO _____
6. PROPOSED RATE LEVEL CHANGE -0.1 _____ % EFFECTIVE DATE 05/01/2009 _____
7. PRIOR RATE LEVEL CHANGE -3.7 _____ % EFFECTIVE DATE 07/01/2008 _____
8. ATTACH "NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION" (Use the above document separately for each insurer elected loss cost multiplier.)

FORM RF2-Reference filing abstract NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION

CALCULATION OF COMPANY LOSS COST MULTIPLIER

This filing transmittal is part of Company Tracking #	AR-APV-05-09-RR
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 #) ISO PP-2008-BRLA1

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:

- 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.

- 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: 19.0 Personal Auto; Sub-TOI: 19.0001 Private Passenger Auto 19.1 & 19.2 Liability Coverage

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.) 5% Although the ISO revision would produce a liability coverage rate decrease of 11.6%, the selected modification will provide a 3.7% rate decrease, which is more in line with our rate indication which suggests a rate decrease of 2.4%.

B. Loss Cost Modification Expressed as a Factor: (See Examples Below) 1.05

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	16.0	%
B.	General Expense	6.5	%
C.	Taxes, Licenses & Fee	2.5	%
D.	Underwriting profit & Contingencies (explain how investment income is taken into account)	5.0	%
E.	Other (explain)	-4.1	%
F.	Total	25.9	%

5.	A.	Expected Loss Ratio: $ELR = 100\% - 4F = A$	74.1	%
	B.	ELR in Decimal Form =		
6.		Company Formula Loss Cost Multiplier (3B/5B)	1.417	
7.		Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7)	1.417	
8.		Rate Level Change for the coverage(s) to which this page applies	-3.7	

FORM RF2-Reference filing abstract NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION

CALCULATION OF COMPANY LOSS COST MULTIPLIER

This filing transmittal is part of Company Tracking #	AR-APV-05-09-RR
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 #) ISO PP-2008-BRLA1

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:

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.

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: 19.0 Personal Auto; Sub-TOI: 19.0001 Private Passenger Auto 21.1 Physical Damage Coverage

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.) 18% Although the ISO revision would produce a physical damage coverage rate decrease of 3.3%, the selected modification will provide a 4.3% rate increase, which is more in line with our rate indication which suggests a rate increase of 8.4%.

B. Loss Cost Modification Expressed as a Factor: (See Examples Below) 1.18

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	16.0	%
B.	General Expense	6.5	%
C.	Taxes, Licenses & Fee	2.5	%
D.	Underwriting profit & Contingencies (explain how investment income is taken into account)	5.0	%
E.	Other (explain)	-0.3	%
F.	Total	29.7	%

5.	A.	Expected Loss Ratio: $ELR = 100\% - 4F = A$	70.3	%
	B.	ELR in Decimal Form =		
6.		Company Formula Loss Cost Multiplier (3B/5B)	1.679	
7.		Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7)	1.679	
8.		Rate Level Change for the coverage(s) to which this page applies	4.3	

PHARMACISTS MUTUAL INSURANCE COMPANY

Personal Automobile ARKANSAS Actuarial Memorandum

Pharmacists Mutual Insurance Company (PMIC) is a member of ISO for our personal automobile program. With this filing we are adopting ISO's loss cost revision PP-2008-BRLA1. Although ISO's revision would provide a rate decrease of 8.9% our company rate indication suggests otherwise. Thus, we have chosen to revise our loss cost multipliers keep our rates flat, with a rate decrease of 0.1% overall.

We are increasing our loss cost multiplier for liability coverage from 1.300 to 1.417 which will produce a rate decrease of 3.7%. We are increasing our loss cost multiplier for physical damage from 1.556 to 1.679 which will result in a slight rate increase of 4.3%.

We are also submitting, for your review, our revised Personal Automobile Manual Exception Pages. With this revision we have revised Rule 23 Multivariate Rating Factors, D. Insurance Score, to state that we use the highest insurance score to determine the surcharge/discount. Since implementing the previously approved program we have discovered that there is often a discrepancy between the credit scores of spouses. To the benefit of our insured, we have chosen to use the better of the two credit scores in our insurance scoring. We have made no other changes to our exception pages as previously approved in filing PHAR-125593733.

We would like for these revisions to become effective for all policies written on or after May 1, 2009.

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 -2.4% for liability and 8.4% 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-2008-BRLA1, 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 0.2% for liability and 1.4% 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					3 Year
	2004	2005	2006	2007	2008	Total
(1) Adjusted Earned Premium	490,096	477,199	451,572	450,140	423,229	1,324,941
(2) Developed - Trended Losses	588,018	300,441	157,746	293,699	259,934	711,378
(3) Actual Loss Ratio	120.0%	63.0%	34.9%	65.2%	61.4%	53.7%

Physical Damage						
(1) Adjusted Earned Premium	354,708	345,502	326,959	324,586	321,444	972,989
(2) Developed - Trended Losses	253,317	271,088	198,528	179,085	291,362	668,975
(3) Actual Loss Ratio	71.4%	78.5%	60.7%	55.2%	90.6%	68.8%

Total						
Adjusted Earned Premium	844,804	822,701	778,531	774,726	744,673	2,297,930
Developed - Trended Losses	841,335	571,529	356,273	472,784	551,296	1,380,353
Actual Loss Ratio	99.6%	69.5%	45.8%	61.0%	74.0%	60.1%

	LI	PD	Total
(3) Actual Loss Ratio - 3 Year	53.7%	68.8%	60.1%
(4) Expected Loss Ratio	63.1%	58.1%	60.7%
(5) Indicated Change	-14.9%	18.3%	-1.1%
(6) Credibility	16.9%	41.2%	29.3%
(7) Complement	83.1%	58.8%	70.7%
(8) Annual Trend	0.2%	1.4%	0.7%
(9) Weighted Indicated Chg	-2.4%	8.4%	0.2%
(10) Selected Change	-3.7%	4.3%	-0.1%

(1) Exhibit 3

(2) Exhibit 6

(3) (2) / (1)

(4) Exhibit 7

(5) ((3) / (4)) - 1.00

(6) Exhibit 9

(7) 1.0 - (6)

(8) Exhibit 5

(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
7/1/2008	-3.80%	1.482	-3.70%	1.008

Year	Average Rate Level	Current Rate Level	Average Rate Level	Current Rate Level
2004	1.129	1.313	1.024	0.985
2005	1.311	1.131	1.070	0.943
2006	1.457	1.017	1.102	0.915
2007	1.530	0.969	1.058	0.953
2008	1.534	0.967	1.042	0.968

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
2004	373,264	1.313	490,096	360,110	0.985	354,708
2005	421,927	1.131	477,199	366,386	0.943	345,502
2006	444,024	1.017	451,572	357,332	0.915	326,959
2007	464,541	0.969	450,140	340,594	0.953	324,586
2008	437,672	0.967	423,229	332,070	0.968	321,444

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

PHARMACISTS MUTUAL INSURANCE COMPANY
PROJECTED DIRECT & ASSUMED ULTIMATE LOSSES BASED ON REPORTED LOSS DEVELOPMENT

Exhibit 4a

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)						
	2004	2005	2006	2007	2008	5 Yr Total
Total	582,678	296,695	151,478	265,232	180,851	1,476,934

Physical Damage (as of 12/31/07)						
	2004	2005	2006	2007	2008	5 Yr Total
Total	233,010	252,955	187,921	171,963	283,811	1,129,660

Developed Incurred Losses						
Liability/Med						
	Loss Development Factors (Exhibit 4a)					
	1.000	1.005	1.035	1.102	1.433	
	2004	2005	2006	2007	2008	5 Yr Total
Total	582,678	298,178	156,803	292,400	259,189	1,589,249

Physical Damage						
	Loss Development Factors (Exhibit 4b)					
	1.000	1.000	1.000	1.000	1.000	
	2004	2005	2006	2007	2008	5 Yr Total
Total	233,010	252,955	187,921	171,963	283,811	1,129,660

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 5

**Personal Automobile
Loss Trend
ARKANSAS**

LIABILITY

Selected Annual Loss Trend 0.2%
Assumed Effective Date 5/1/2009

AY	(1)	(2)	(3)	(4)	(5)
2004	7/1/2004	5/1/2010	5.833	1.002	1.009
2005	7/1/2005	5/1/2010	4.833	1.002	1.008
2006	7/1/2006	5/1/2010	3.833	1.002	1.006
2007	7/1/2007	5/1/2010	2.833	1.002	1.004
2008	7/1/2008	5/1/2010	1.833	1.002	1.003

Physical Damage

Selected Annual Loss Trend 1.4%
Assumed Effective Date 5/1/2009

AY	(1)	(2)	(3)	(4)	(5)
2004	7/1/2004	5/1/2010	5.833	1.014	1.087
2005	7/1/2005	5/1/2010	4.833	1.014	1.072
2006	7/1/2006	5/1/2010	3.833	1.014	1.056
2007	7/1/2007	5/1/2010	2.833	1.014	1.041
2008	7/1/2008	5/1/2010	1.833	1.014	1.027

- (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-2008-BRLA1, 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	-1.1%	157,536
PD	1.8%	117,572
Med Pay	2.1%	30,026
UM BI	-1.1%	77,318
UM PD	1.8%	26,480
wtd avg	0.2%	408,931
<u>Physical Damage Coverage</u>		
Comp	1.4%	97,959
Coll	1.5%	219,903
PD All Other	0.0%	5,812
wtd avg	1.4%	323,674
Total All Coverages	0.7%	732,605

PHARMACISTS MUTUAL INSURANCE COMPANY

Exhibit 6

**Personal Automobile
Trended Ultimate Losses
ARKANSAS**

Liability

(1)	(2)	(3)	(4)	(5)
Accident Year	Actual Reported Losses	Loss Development Factor	Loss Trend Factor	Trended Ultimate Losses
2004	582,678	1.000	1.009	588,018
2005	296,695	1.005	1.008	300,441
2006	151,478	1.035	1.006	157,746
2007	265,232	1.102	1.004	293,699
2008	180,851	1.433	1.003	259,934

Physical Damage

(1)	(2)	(3)	(4)	(5)
Accident Year	Actual Reported Losses	Loss Development Factor	Loss Trend Factor	Trended Ultimate Losses
2004	233,010	1.000	1.087	253,317
2005	252,955	1.000	1.072	271,088
2006	187,921	1.000	1.056	198,528
2007	171,963	1.000	1.041	179,085
2008	283,811	1.000	1.027	291,362

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								
Written Premium	\$676,701		\$772,386		\$803,954		\$806,648		\$798,819		\$3,858,508	
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	3.1%	26,090	3.2%	25,044	3.1%	25,065	3.1%	\$120,882	3.1%
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	<u>70.3%</u>	\$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
2004	125	201	326
2005	102	181	283
2006	71	168	239
2007	67	164	231
2008	75	174	249
5 Yr Total	440	888	1,328
3 Yr Total	213	506	719

# Claims for Full Credibility	7,445	2,982	8,396
5 Yr Credibility	24.3%	54.6%	39.8%
3 Yr Credibility	16.9%	41.2%	29.3%
Mean	88	178	
Std Dev	24.8	14.6	

PHARMACISTS MUTUAL INSURANCE COMPANY

Summary of Automobile Changes ARKANSAS

Coverage	Annualized Premium	Base Rates	Deductible Relativity	Increased Limits	LCM	Total Change
Combined Single Limit	\$52,322	-11.9%	0.0%	0.0%	9.0%	-4.0%
Bodily Injury	\$131,375	-20.0%	0.0%	0.0%	9.0%	-12.8%
Property Damage	\$91,411	-1.2%	0.0%	0.0%	9.0%	7.7%
MP	\$24,109	-4.4%	0.0%	0.0%	9.0%	4.2%
Added PIP	\$5,917	0.0%	0.0%	0.0%	9.0%	9.0%
Uninsured Motorists	\$17,939	-8.2%	0.0%	0.0%	9.0%	0.1%
Uninsured - CSL	\$140	-8.2%	0.0%	0.0%	9.0%	0.1%
Uninsured - PD	\$10,578	8.1%	0.0%	0.0%	9.0%	17.8%
Uninsured - SLPD	\$7,440	8.1%	0.0%	0.0%	9.0%	17.8%
Underinsured Motorists	\$50,917	-18.9%	0.0%	0.0%	9.0%	-11.6%
Underinsured Motorists - CSL	\$16,783	-18.9%	0.0%	0.0%	9.0%	-11.6%
Other	\$0	0.0%	0.0%	0.0%	9.0%	9.0%
Liability Subtotal	\$408,931	-11.6%	0.0%	0.0%	9.0%	-3.7%
Comprehensive	\$97,959	-9.1%	0.0%	0.0%	7.9%	-1.9%
Collison	219,903	-0.8%	0.0%	0.0%	7.9%	7.0%
Full Glass Coverage	0	0.0%	0.0%	0.0%	7.9%	7.9%
Towing	2,626	0.0%	0.0%	0.0%	7.9%	7.9%
Rental Reimbursement	0	0.0%	0.0%	0.0%	7.9%	7.9%
Increased Extended Transportation	1,819	0.0%	0.0%	0.0%	7.9%	7.9%
Auto Loan/Lease	1,367	0.0%	0.0%	0.0%	7.9%	7.9%
Other	0	0.0%	0.0%	0.0%	7.9%	7.9%
Physical Damage Subtotal	\$323,674	-3.3%	0.0%	0.0%	7.9%	4.3%
Total All Coverages	\$732,605	-8.0%	0.0%	0.0%	8.5%	-0.1%

Current LCM Liability	1.300	Proposed LCM Liability	1.417
Phys Dam	1.556	Phys Dam	1.679

NOTE: this table includes LCM, loss costs, liability increased limits, deductible relativity revisions.

Current LCM 1.300 Liability Proposed LCM 1.417 Liability
1.556 Physical Damage 1.679 Physical Damage

Territory	(1) CSL	(1) Insureds Affected	(2) BI/PD+Med	(2) Insureds Affected	(3) (1)+Comp	(4) (2)+Comp	(5) (3)+Coll	(5) Insureds Affected	(6) (4)+Coll	(6) Insureds Affected
21	-5.4%	0	-3.4%	0	-5.7%	-4.2%	-1.0%	0	0.2%	4
22	-1.4%	0	-0.3%	3	-1.6%	-0.7%	2.3%	6	3.0%	15
23	-5.2%	4	-4.5%	8	-3.2%	-2.5%	-0.2%	22	0.5%	77
24	-4.2%	0	-2.6%	34	-3.5%	-2.1%	0.9%	24	2.0%	202
25	-8.5%	0	-7.0%	2	-5.6%	-4.2%	-2.1%	0	-1.0%	2
26	-2.4%	6	-0.3%	10	-1.6%	-0.1%	1.8%	24	2.9%	65
27	-4.0%	0	-2.8%	1	-4.3%	-3.7%	0.7%	14	1.3%	23
28	-2.1%	1	-0.2%	1	-3.1%	-2.0%	2.1%	6	3.0%	18
29	-5.8%	2	-4.6%	16	-4.8%	-3.9%	0.3%	20	1.0%	81
30	0.5%	0	2.2%	8	-1.5%	-0.3%	1.3%	0	2.1%	16
31	-5.9%	0	-5.1%	13	-6.7%	-6.1%	-1.8%	18	-1.2%	52
32	-2.3%	2	-0.7%	8	-0.9%	0.4%	4.4%	3	5.3%	16
33	0.9%	3	2.4%	17	-0.5%	0.3%	4.5%	15	5.3%	67
Total		18		121				152		638

- (1) Liability only policy with CSL
- (2) Liability only policy with BI/PD
- (3) Liability policy with CSL and Comp
- (4) Liability policy with BI/PD and Comp
- (5) Liability (CSL) and Physical Damage
- (6) Liability (BI/PD) and Physical Damage

SERFF Tracking Number: PHAR-126013554 *State:* Arkansas
Filing Company: Pharmacists Mutual Insurance Company *State Tracking Number:* EFT \$125
Company Tracking Number: AR-APV-05-09-RR
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: AR-APV-05-09-RR/AR-APV-05-09-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	01/29/2009	AR PPA Survey FORM APCS 05-09.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: Janine M MacVey
Telephone No.: (800) 247-5930 Ext. 7207
Email Address: janine_macvey@pnhmic.com
Effective Date: 5/1/2009

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.	0 / 10	%

Vehicle	Coverages	Gender	Fayetteville				Trumann				Little Rock				Lake Village				Pine Bluff				
			Age	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female
				18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66
1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392	
	Minimum Liability with Comprehensive and Collision		\$1,355	\$1,713	\$558	\$528	\$1,384	\$1,750	\$568	\$538	\$1,714	\$2,168	\$707	\$671	\$1,431	\$1,813	\$586	\$557	\$1,694	\$2,139	\$697	\$665	
	100/300/50 Liability with Comprehensive and Collision		\$1,681	\$2,115	\$710	\$675	\$1,725	\$2,174	\$726	\$691	\$2,159	\$2,717	\$913	\$872	\$1,733	\$2,184	\$729	\$696	\$2,120	\$2,666	\$899	\$858	
2003 Ford Explorer "XLT" 2WD, 4 door	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392	
	Minimum Liability with Comprehensive and Collision		\$1,449	\$1,835	\$592	\$563	\$1,481	\$1,874	\$603	\$574	\$1,825	\$2,309	\$748	\$710	\$1,552	\$1,966	\$632	\$600	\$1,812	\$2,290	\$742	\$706	
	100/300/50 Liability with Comprehensive and Collision		\$1,783	\$2,246	\$750	\$712	\$1,829	\$2,306	\$766	\$730	\$2,277	\$2,870	\$959	\$915	\$1,863	\$2,348	\$780	\$743	\$2,247	\$2,827	\$947	\$903	
2003 Honda Odyssey "EX"	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392	
	Minimum Liability with Comprehensive and Collision		\$1,416	\$1,793	\$580	\$550	\$1,444	\$1,826	\$592	\$560	\$1,788	\$2,260	\$734	\$696	\$1,500	\$1,901	\$613	\$581	\$1,766	\$2,231	\$726	\$689	
	100/300/50 Liability with Comprehensive and Collision		\$1,747	\$2,202	\$735	\$699	\$1,791	\$2,258	\$751	\$715	\$2,240	\$2,818	\$945	\$900	\$1,809	\$2,280	\$759	\$723	\$2,198	\$2,767	\$929	\$886	
2005 Toyota Camry LE 3.0L 4 door Sedan	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392	
	Minimum Liability with Comprehensive and Collision		\$1,682	\$2,132	\$681	\$647	\$1,729	\$2,191	\$698	\$664	\$2,096	\$2,655	\$852	\$807	\$1,872	\$2,376	\$755	\$717	\$2,133	\$2,699	\$865	\$822	
	100/300/50 Liability with Comprehensive and Collision		\$2,032	\$2,564	\$845	\$802	\$2,094	\$2,890	\$867	\$826	\$2,568	\$3,241	\$1,071	\$1,019	\$2,200	\$2,778	\$910	\$865	\$2,587	\$3,260	\$1,077	\$1,027	
2003 Cadillac Seville "STS" 4 door Sedan	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392	
	Minimum Liability with Comprehensive and Collision		\$1,733	\$2,196	\$700	\$664	\$1,781	\$2,258	\$721	\$683	\$2,156	\$2,731	\$877	\$831	\$1,945	\$2,469	\$784	\$743	\$2,204	\$2,791	\$893	\$847	
	100/300/50 Liability with Comprehensive and Collision		\$2,087	\$2,633	\$865	\$822	\$2,150	\$2,715	\$888	\$854	\$2,634	\$3,322	\$1,097	\$1,044	\$2,277	\$2,877	\$938	\$892	\$2,661	\$3,358	\$1,107	\$1,053	
1998 Chevrolet Cavalier LS 4D Sedan	Minimum Liability		\$796	\$998	\$341	\$326	\$799	\$1,004	\$343	\$326	\$1,070	\$1,342	\$458	\$439	\$674	\$844	\$294	\$282	\$945	\$1,186	\$412	\$392	
	Minimum Liability with Comprehensive and Collision		\$1,477	\$1,869	\$603	\$572	\$1,514	\$1,916	\$617	\$586	\$1,856	\$2,348	\$761	\$722	\$1,607	\$2,036	\$653	\$619	\$1,865	\$2,358	\$762	\$726	
	100/300/50 Liability with Comprehensive and Collision		\$1,809	\$2,280	\$759	\$722	\$1,863	\$2,349	\$778	\$742	\$2,310	\$2,909	\$971	\$926	\$918	\$2,417	\$800	\$761	\$2,299	\$2,896	\$968	\$924	