

SERFF Tracking Number: USAA-127209737 State: Arkansas  
First Filing Company: Garrison Property and Casualty Insurance Company, ... State Tracking Number:  
Company Tracking Number: AR1114255  
TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners  
Product Name: Rate Revision  
Project Name/Number: /

## Filing at a Glance

Companies: Garrison Property and Casualty Insurance Company, United Services Automobile Association, USAA Casualty Insurance Company, USAA General Indemnity Company

Product Name: Rate Revision SERFF Tr Num: USAA-127209737 State: Arkansas  
TOI: 04.0 Homeowners SERFF Status: Closed-Filed State Tr Num:  
Sub-TOI: 04.0003 Owner Occupied Homeowners Co Tr Num: AR1114255 State Status:  
Filing Type: Rate Reviewer(s): Becky Harrington, Nancy Horton  
Author: Scott Hawthorne Disposition Date: 07/01/2011  
Date Submitted: 06/13/2011 Disposition Status: Filed  
Effective Date Requested (New): 10/01/2011 Effective Date (New): 10/01/2011  
Effective Date Requested (Renewal): 10/01/2011 Effective Date (Renewal): 10/01/2011

State Filing Description:

## General Information

Project Name: Status of Filing in Domicile:  
Project Number: Domicile Status Comments:  
Reference Organization: Reference Number:  
Reference Title: Advisory Org. Circular:  
Filing Status Changed: 07/01/2011 Deemer Date:  
State Status Changed: Submitted By: Scott Hawthorne  
Created By: Scott Hawthorne  
Corresponding Filing Tracking Number:  
Filing Description:  
USAA Group (USAA, USAA-CIC, USAA-GIC, and Garrison) wishes to revise Homeowners premiums with an overall effect of 19.8%. The proposed changes include revising the Base Rates for Owners forms.

## Company and Contact

### Filing Contact Information

Scott Hawthorne, Compliance Analyst scott.hawthorne@usaa.com

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A-03-W Insurance Regulatory Compliance 800-531-8722 [Phone] 85315 [Ext]  
 9800 Fredericksburg Road 866-358-3638 [FAX]  
 San Antonio, TX 78288-1033

**Filing Company Information**

Garrison Property and Casualty Insurance CoCode: 21253 State of Domicile: Texas  
 Company  
 9800 Fredericksburg Road Group Code: 200 Company Type: Stock  
 San Antonio, TX 78284-8496 Group Name: USAA State ID Number:  
 (800) 531-8722 ext. [Phone] FEIN Number: 43-1803614

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 United Services Automobile Association CoCode: 25941 State of Domicile: Texas  
 9800 Fredericksburg Road Group Code: 200 Company Type: Reciprocal  
 San Antonio, TX 78288 Group Name: USAA State ID Number:  
 (800) 531-8722 ext. [Phone] FEIN Number: 74-0959140

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 USAA Casualty Insurance Company CoCode: 25968 State of Domicile: Texas  
 9800 Fredericksburg Road Group Code: 200 Company Type: Stock  
 San Antonio, TX 78288 Group Name: USAA State ID Number:  
 (800) 531-8722 ext. [Phone] FEIN Number: 59-3019540

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 USAA General Indemnity Company CoCode: 18600 State of Domicile: Texas  
 9800 Fredericksburg Road Group Code: 200 Company Type: Stock  
 San Antonio, TX 78288 Group Name: USAA State ID Number:  
 (800) 531-8722 ext. [Phone] FEIN Number: 74-1718283

**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

*SERFF Tracking Number:*      *USAA-127209737*                      *State:*                      *Arkansas*  
*First Filing Company:*      *Garrison Property and Casualty Insurance*      *State Tracking Number:*  
    *Company, ...*  
*Company Tracking Number:*      *AR1114255*  
*TOI:*                      *04.0 Homeowners*                      *Sub-TOI:*                      *04.0003 Owner Occupied Homeowners*  
*Product Name:*                      *Rate Revision*  
*Project Name/Number:*      /

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Garrison Property and Casualty Insurance Company	\$0.00	06/13/2011	
United Services Automobile Association	\$100.00	06/13/2011	48633782
USAA Casualty Insurance Company	\$0.00	06/13/2011	
USAA General Indemnity Company	\$0.00	06/13/2011	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	07/01/2011	07/01/2011

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Becky Harrington	06/24/2011	06/24/2011	Scott Hawthorne	06/30/2011	06/30/2011
Pending Industry Response	Becky Harrington	06/15/2011	06/15/2011	Scott Hawthorne	06/22/2011	06/22/2011

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 Project Name/Number: /

## Disposition

Disposition Date: 07/01/2011

Effective Date (New): 10/01/2011

Effective Date (Renewal): 10/01/2011

Status: Filed

Comment:

NOTICE regarding, corrections to filings and scrivener's Errors:

Effective for all filings made on or after June 1, 2011, Arkansas no longer allows the re-opening of closed filings for corrections, changes in effective dates, scrivener's errors, amendments or substantive changes. Please see the General Instructions for how these events will be handled after the effective date of the change."

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Garrison Property and Casualty Insurance Company	89.300%	14.800%	\$87,878	648	\$593,771	17.100%	0.000%
United Services Automobile Association	89.300%	14.800%	\$1,460,672	12,496	\$9,869,402	17.700%	0.000%
USAA Casualty	89.300%	15.000%	\$723,100	5,176	\$4,820,667	17.200%	0.000%

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Insurance Company							
USAA General Indemnity Company	89.300%	14.700%	\$124,785	1,028	\$848,875	17.200%	0.000%

**Overall Rate Information for Multiple Company Filings**

<b>Overall Percentage Rate Indicated For This Filing</b>	89.300%
<b>Overall Percentage Rate Impact For This Filing</b>	14.900%
<b>Effect of Rate Filing-Written Premium Change For This Program</b>	\$2,396,435
<b>Effect of Rate Filing - Number of Policyholders Affected</b>	19,348

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Schedule	Schedule Item	Schedule Item Status	Public Access
<b>Supporting Document</b>	Form RF-2 Loss Costs Only (not for workers' compensation)		Yes
<b>Supporting Document</b>	H-1 Homeowners Abstract	Filed	Yes
<b>Supporting Document (revised)</b>	HPCS-Homeowners Premium Comparison Survey	Filed	Yes
<b>Supporting Document</b>	HPCS-Homeowners Premium Comparison Survey		Yes
<b>Supporting Document (revised)</b>	NAIC loss cost data entry document	Filed	Yes
<b>Supporting Document</b>	NAIC loss cost data entry document		Yes
<b>Supporting Document</b>	AR HO Filing Memorandum	Filed	Yes
<b>Supporting Document</b>	AR HO Actuarial Support	Filed	Yes
<b>Supporting Document</b>	AR HO 2011 1st Qtr Losses	Filed	Yes
<b>Rate (revised)</b>	AR HO Rate Pages	Filed	Yes
<b>Rate</b>	AR HO Rate Pages		Yes
<b>Rate</b>	AR HO Transmittal Document	Filed	Yes

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Product Name: Rate Revision  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 06/24/2011

Submitted Date 06/24/2011

Respond By Date

Dear Scott Hawthorne,

This will acknowledge receipt of the recent response.

Objection 1

Comment: Commissioner Bradford has reviewed the rate change request. Please amend the overall increase to 15%.

Objection 2

Comment: Provide revised HPCS forms due to the amended increase amount.

NOTICE regarding, corrections to filings and scrivener's Errors:

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

Sincerely,

Becky Harrington

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 Company, ...  
 Company Tracking Number: AR1114255  
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 Project Name/Number: /

## Response Letter

Response Letter Status Submitted to State  
 Response Letter Date 06/30/2011  
 Submitted Date 06/30/2011

Dear Becky Harrington,

### Comments:

#### Response 1

Comments: The revised rate pages have been attached. Because I am not able to revise the rate data directly in SERFF, I have attached the transmittal document showing the changes.

#### Related Objection 1

Comment:

Commissioner Bradford has reviewed the rate change request. Please amend the overall increase to 15%.

### Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

### Rate/Rule Schedule Item Changes

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
AR HO Rate Pages	AR-R-1.1	Replacement	AR1012507
<b>Previous Version</b>			
AR HO Rate Pages	AR-R-1.1	Replacement	AR1012507
AR HO Transmittal Document		Replacement	

#### Response 2

Comments: The HPCS forms have been revised to reflect the changes in rates.

#### Related Objection 1

Comment:

SERFF Tracking Number: USAA-127209737 State: Arkansas  
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Company, ...  
Company Tracking Number: AR1114255  
TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners  
Product Name: Rate Revision  
Project Name/Number: /

Provide revised HPCS forms due to the amended increase amount.

**Changed Items:**

**Supporting Document Schedule Item Changes**

Satisfied -Name: HPCS-Homeowners Premium Comparison Survey

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,  
Scott Hawthorne

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Company, ...  
Company Tracking Number: AR1114255  
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Product Name: Rate Revision  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 06/15/2011

Submitted Date 06/15/2011

Respond By Date

Dear Scott Hawthorne,

This will acknowledge receipt of the captioned filing.

### Objection 1

- NAIC loss cost data entry document (Supporting Document)

Comment: Information on this form for all but USAA is inconsistent with other filing information. Please verify and/or correct.

### Objection 2

Comment: Please file an additional exhibit showing the first quarter losses in AR. (This is information Commissioner Bradford is currently taking into consideration when reviewing rate increase requests.)

NOTICE regarding, corrections to filings and scrivener's Errors:

Effective for all filings made on or after June 1, 2011, Arkansas no longer allows the re-opening of closed filings for corrections, changes in effective dates, scrivener's errors, amendments or substantive changes. Please see the General Instructions for how these events will be handled after the effective date of the change."

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

Sincerely,

Becky Harrington

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Product Name: Rate Revision  
Project Name/Number: /

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 06/22/2011  
Submitted Date 06/22/2011

Dear Becky Harrington,

### Comments:

### Response 1

Comments: The NAIC loss cost data forms have been corrected.

### Related Objection 1

Applies To:

- NAIC loss cost data entry document (Supporting Document)

Comment:

Information on this form for all but USAA is inconsistent with other filing information. Please verify and/or correct.

### Changed Items:

#### Supporting Document Schedule Item Changes

Satisfied -Name: NAIC loss cost data entry document

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

### Response 2

Comments: Attached is an exhibit showing the 1st Quarter, 2011 losses as requested.

### Related Objection 1

Comment:

Please file an additional exhibit showing the first quarter losses in AR. (This is information Commissioner Bradford is currently taking into consideration when reviewing rate increase requests.)



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 TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners  
 Product Name: Rate Revision  
 Project Name/Number: /

## Rate Information

Rate data applies to filing.

**Filing Method:** File and Use  
**Rate Change Type:** Increase  
**Overall Percentage of Last Rate Revision:** 9.900%  
**Effective Date of Last Rate Revision:** 10/01/2010  
**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:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Garrison Property and Casualty Insurance Company	89.300%	19.700%	\$116,973	648	\$593,771	22.800%	0.000%

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
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SERFF Tracking Number: USAA-127209737 State: Arkansas  
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 Product Name: Rate Revision  
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United Services Automobile Association	89.300%	19.800%	\$1,954,142	12,496	\$9,869,402	23.500%	0.000%
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**Company Rate Information**

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
USAA Casualty Insurance Company	89.300%	19.900%	\$959,313	5,176	\$4,820,667	22.900%	0.000%

**Company Rate Information**

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
USAA General Indemnity Company	89.300%	19.600%	\$166,380	1,028	\$848,875	22.800%	0.000%

**Overall Rate Information for Multiple Company Filings**

Overall % Rate Indicated: 19.800%

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Product Name: Rate Revision  
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**Overall Percentage Rate Impact For This Filing:** 3,196,808.000%  
**Effect of Rate Filing - Written Premium Change For This Program:** \$3,196,808  
**Effect of Rate Filing - Number of Policyholders Affected:** 19348

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 Company, ...  
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 Project Name/Number: /

## Rate/Rule Schedule

Schedule Item Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Number:	Attachments
Filed 07/01/2011	AR HO Rate Pages	AR-R-1.1	Replacement	AR1012507	AR HO Rate Pages.pdf
Filed 07/01/2011	AR HO Transmittal Document		Replacement		AR HO Transmittal Document.pdf

State: **ARKANSAS**  
 Line of Business: **HOMEOWNERS**  
 Effective: **OCTOBER 1, 2011**

Companies: **UNITED SERVICES AUTOMOBILE ASSOCIATION**  
**USAA CASUALTY INSURANCE COMPANY**  
**USAA GENERAL INDEMNITY COMPANY**  
**GARRISON PROPERTY AND CASUALTY INSURANCE COMPANY**

**BASE RATES AND MINIMUM PREMIUMS**

**BASE RATES**

<u>Form Type</u>	<u>Peril</u>	<u>USAA</u>	<u>USAA-CIC</u>	<u>USAA-GIC</u>	<u>Garrison</u>
Owners	Other Perils	<b>1231.42</b>	<b>1467.95</b>	<b>1467.95</b>	<b>1467.95</b>
	Fire	<b>1331.89</b>	<b>1537.74</b>	<b>1537.74</b>	<b>1537.74</b>
Unit-Owners	Other Perils	331.68	281.75	281.75	281.75
	Fire	37.49	26.84	26.84	26.84

\* Base limits are \$300,000 Liability and \$5,000 Medical Payments to Others

**MINIMUM PREMIUMS**

<u>Form Type</u>	<u>USAA</u>	<u>USAA-CIC</u>	<u>USAA-GIC</u>	<u>Garrison</u>
Owners	\$250	\$250	\$250	\$250
Unit-Owners	\$125	\$125	\$125	\$125

## 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.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	<b>AR1114255</b>
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<b>2.</b>	<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	N/A
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Rate Increase     
  Rate Decrease     
  Rate Neutral (0%)

<b>3.</b>	<b>Filing Method (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
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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)
USAA	Owners: 89.3% Unit-Owners: n/a	14.8%	\$1,460,672	12,496	\$9,869,402	17.7%	0.0%
USAA-CIC		15.0%	\$723,100	5,176	\$4,820,667	17.2%	0.0%
USAA-GIC		14.7%	\$124,785	1,028	\$848,875	17.2%	0.0%
Garrison		14.8%	\$87,878	648	\$593,771	17.1%	0.0%

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)	89.3%	
5b	Overall percentage rate impact for this filing	14.9%	
5c	Effect of Rate Filing – Written premium change for this program	\$2,396,434	
5d	Effect of Rate Filing – Number of policyholders affected	19,348	

<b>6.</b>	Overall percentage of last rate revision	9.9%
<b>7.</b>	Effective Date of last rate revision	10/01/2010
<b>8.</b>	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File and Use

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	AR HO Rate Pages, AR-R-1.1	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	AR1012507
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

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## Supporting Document Schedules

		Item Status:	Status Date:
<b>Bypassed - Item:</b>	Form RF-2 Loss Costs Only (not for workers' compensation)		
<b>Bypass Reason:</b>	Not applicable. This is not a loss cost filing.		
<b>Comments:</b>			
<b>Satisfied - Item:</b>	H-1 Homeowners Abstract	Filed	07/01/2011
<b>Comments:</b>			
<b>Attachments:</b>			
	H-1 200-25941.pdf		
	H-1 200-25968.pdf		
	H-1 200-18600.pdf		
	H-1 200-21253.pdf		
<b>Satisfied - Item:</b>	HPCS-Homeowners Premium Comparison Survey	Filed	07/01/2011
<b>Comments:</b>			
<b>Attachments:</b>			
	HPCS-200-25941.xls		
	HPCS-200-25968.xls		
	HPCS-200-18600.xls		
	HPCS-200-21253.xls		
<b>Satisfied - Item:</b>	NAIC loss cost data entry document	Filed	07/01/2011
<b>Comments:</b>			

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**Attachments:**

RF-1 200-25941.pdf  
 RF-1 200-25968.pdf  
 RF-1 200-18600.pdf  
 RF-1 200-21253.pdf

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> AR HO Filing Memorandum <b>Comments:</b> <b>Attachment:</b> AR HO Filing Memorandum.pdf	Filed	07/01/2011

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> AR HO Actuarial Support <b>Comments:</b> <b>Attachment:</b> AR HO Actuarial Support.pdf	Filed	07/01/2011

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> AR HO 2011 1st Qtr Losses <b>Comments:</b> <b>Attachment:</b> Exhibit X - Losses by Quarter.pdf	Filed	07/01/2011

ARKANSAS INSURANCE DEPARTMENT  
FORM H-1 HOMEOWNERS 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 homeowners rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name United Services Automobile Association  
 NAIC No. 25941 Group No. 200

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact. We encourage homeowners to insure for 100% of replacement cost based on various valuation tools.
2. If you use a cost estimator (or some similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact. USAA uses the Marshall Swift/Boeckh replacement cost tool.
3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used. We require 100% insurance to value. Rare exceptions are allowed down to 80%.
4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact. We use an Adjusted Building Cost (ABC) method. Actual results vary by location. Application of ABC may result in an adjustment in policy limits of as much as 25% or more.
5. Specify the percentage given for credits or discounts for the following:
 

a. Fire Extinguisher	<u>N/A</u>	%
b. Burglar Alarm	<u>5% Discount</u>	%
	<u>(if monitored)</u>	
c. Smoke Alarm	<u>N/A</u>	%
d. Insured who has both homeowners and auto with your company	<u>10% Discount</u>	%
e. Deadbolt Locks	<u>N/A</u>	%
f. Window or Door Locks	<u>N/A</u>	%
g. Other (specify)		%
<u>Sprinklers</u>	<u>20% Discount</u>	%
<u>Monitored Fire Alarm</u>	<u>5% Discount</u>	%
6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? No If so, state areas and explain reason for not writing.



ARKANSAS INSURANCE DEPARTMENT  
FORM H-1 HOMEOWNERS 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 homeowners rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name USAA Casualty Insurance Company  
 NAIC No. 25968 Group No. 200

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact. We encourage homeowners to insure for 100% of replacement cost based on various valuation tools.
2. If you use a cost estimator (or some similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact. USAA uses the Marshall Swift/Boeckh replacement cost tool.
3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used. We require 100% insurance to value. Rare exceptions are allowed down to 80%.
4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact. We use an Adjusted Building Cost (ABC) method. Actual results vary by location. Application of ABC may result in an adjustment in policy limits of as much as 25% or more.
5. Specify the percentage given for credits or discounts for the following:
 

a. Fire Extinguisher	<u>N/A</u>	%
b. Burglar Alarm	<u>5% Discount</u>	%
	<u>(if monitored)</u>	
c. Smoke Alarm	<u>N/A</u>	%
d. Insured who has both homeowners and auto with your company	<u>10% Discount</u>	%
e. Deadbolt Locks	<u>N/A</u>	%
f. Window or Door Locks	<u>N/A</u>	%
g. Other (specify)		%
<u>Sprinklers</u>	<u>20% Discount</u>	%
<u>Monitored Fire Alarm</u>	<u>5% Discount</u>	%
6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? No If so, state areas and explain reason for not writing.



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FORM H-1 HOMEOWNERS ABSTRACT

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Company Name USAA General Indemnity Company  
 NAIC No. 18600 Group No. 200

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact. We encourage homeowners to insure for 100% of replacement cost based on various valuation tools.
2. If you use a cost estimator (or some similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact. USAA uses the Marshall Swift/Boeckh replacement cost tool.
3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used. We require 100% insurance to value. Rare exceptions are allowed down to 80%.
4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact. We use an Adjusted Building Cost (ABC) method. Actual results vary by location. Application of ABC may result in an adjustment in policy limits of as much as 25% or more.
5. Specify the percentage given for credits or discounts for the following:
 

a. Fire Extinguisher	<u>N/A</u>	%
b. Burglar Alarm	<u>5% Discount</u>	%
	<u>(if monitored)</u>	
c. Smoke Alarm	<u>N/A</u>	%
d. Insured who has both homeowners and auto with your company	<u>10% Discount</u>	%
e. Deadbolt Locks	<u>N/A</u>	%
f. Window or Door Locks	<u>N/A</u>	%
g. Other (specify)		%
<u>Sprinklers</u>	<u>20% Discount</u>	%
<u>Monitored Fire Alarm</u>	<u>5% Discount</u>	%
6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? No If so, state areas and explain reason for not writing.



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FORM H-1 HOMEOWNERS ABSTRACT

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Company Name Garrison Property And Casualty Insurance Company  
NAIC No. 21253 Group No. 200

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact. We encourage homeowners to insure for 100% of replacement cost based on various valuation tools.
2. If you use a cost estimator (or some similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact. USAA uses the Marshall Swift/Boeckh replacement cost tool.
3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used. We require 100% insurance to value. Rare exceptions are allowed down to 80%.
4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact. We use an Adjusted Building Cost (ABC) method. Actual results vary by location. Application of ABC may result in an adjustment in policy limits of as much as 25% or more.
5. Specify the percentage given for credits or discounts for the following:

a. Fire Extinguisher	<u>N/A</u>	%
b. Burglar Alarm	<u>5% Discount</u>	%
	<u>(if monitored)</u>	
c. Smoke Alarm	<u>N/A</u>	%
d. Insured who has both homeowners and auto with your company	<u>10% Discount</u>	%
e. Deadbolt Locks	<u>N/A</u>	%
f. Window or Door Locks	<u>N/A</u>	%
g. Other (specify)		%
<u>Sprinklers</u>	<u>20% Discount</u>	%
<u>Monitored Fire Alarm</u>	<u>5% Discount</u>	%
6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? No If so, state areas and explain reason for not writing.



NAIC Number: 25941  
 Company Name: United Services Automobile Association  
 Contact Person: Scott Hawthorne, MSIM, CPCU, CCP  
 Telephone No.: 800-531-8722, ext 85315  
 Email Address: [scott.hawthorne@usaa.com](mailto:scott.hawthorne@usaa.com)  
 Effective Date: 10/1/2011

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

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](mailto:insurance.pnc@arkansas.gov)  
 You may also attach to a SERFF filing or submit on a cdr disk

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE BLANK**

**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$941.02	\$1,017.36	\$910.62	\$986.86	\$1,031.93	\$1,121.89	\$965.73	\$1,053.11	\$961.99	\$1,063.68	\$889.39	\$958.50	\$953.52	\$1,057.53	\$971.65	\$1,059.30	\$850.60	\$941.01
	\$120,000	\$1,021.63	\$1,104.33	\$988.61	\$1,071.19	\$1,120.27	\$1,217.72	\$1,048.38	\$1,143.03	\$1,044.19	\$1,154.35	\$965.60	\$1,040.47	\$1,034.97	\$1,147.64	\$1,054.81	\$1,149.75	\$923.28	\$1,021.22
	\$160,000	\$1,099.63	\$1,189.07	\$1,064.14	\$1,153.45	\$1,205.92	\$1,311.32	\$1,128.60	\$1,230.97	\$1,124.38	\$1,243.51	\$1,039.26	\$1,120.23	\$1,114.51	\$1,236.37	\$1,135.52	\$1,238.20	\$994.19	\$1,100.11
6	\$80,000	\$992.55	\$1,093.87	\$962.73	\$1,063.93	\$1,094.36	\$1,213.83	\$1,027.18	\$1,143.26	\$1,037.10	\$1,172.37	\$935.21	\$1,026.89	\$1,031.02	\$1,169.42	\$1,033.23	\$1,149.66	\$917.48	\$1,037.76
	\$120,000	\$1,077.40	\$1,187.15	\$1,045.00	\$1,154.63	\$1,187.85	\$1,317.26	\$1,114.90	\$1,240.64	\$1,125.51	\$1,272.04	\$1,015.19	\$1,114.50	\$1,118.88	\$1,268.80	\$1,121.46	\$1,247.58	\$995.69	\$1,125.98
	\$160,000	\$1,160.06	\$1,278.76	\$1,125.24	\$1,243.80	\$1,279.13	\$1,419.10	\$1,200.66	\$1,336.65	\$1,212.43	\$1,370.91	\$1,093.00	\$1,200.41	\$1,205.37	\$1,367.51	\$1,207.72	\$1,344.12	\$1,072.60	\$1,213.51
9	\$80,000	\$1,070.02	\$1,207.52	\$1,040.92	\$1,178.31	\$1,187.86	\$1,350.10	\$1,119.04	\$1,276.73	\$1,148.65	\$1,332.61	\$1,004.27	\$1,128.65	\$1,146.00	\$1,334.26	\$1,125.28	\$1,283.44	\$1,016.80	\$1,180.38
	\$120,000	\$1,161.26	\$1,310.20	\$1,129.65	\$1,278.47	\$1,289.06	\$1,464.80	\$1,214.34	\$1,385.14	\$1,246.28	\$1,445.55	\$1,089.94	\$1,224.67	\$1,243.37	\$1,447.28	\$1,221.12	\$1,392.44	\$1,103.22	\$1,280.40
	\$160,000	\$1,250.90	\$1,411.99	\$1,216.92	\$1,377.88	\$1,388.75	\$1,578.83	\$1,308.35	\$1,493.09	\$1,343.19	\$1,558.72	\$1,173.99	\$1,319.70	\$1,340.14	\$1,560.70	\$1,315.64	\$1,500.94	\$1,189.02	\$1,380.66

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	0 %	Deadbolt Lock	0 %
Burglar Alarm	5 %	Window Locks	0 %
Smoke Alarm	0 %	\$1,000 Deductible	varies %
		Other (specify)	

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?  Yes (yes or no)

WHAT IS YOUR PERCENTAGE DEDUCTIBLE?  %

Zone Brick Frame

Sprinklers	20	%
Maximum Credit Allowed	varies	%

WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?

Highest Risk	\$	2.34	\$	0.95
Lowest Risk	\$	0.9	\$	0.41

|

NAIC Number: 25968  
 Company Name: USAA Casualty Insurance Company  
 Contact Person: Scott Hawthorne, MSIM, CPCU, CCP  
 Telephone No.: 800-531-8722, ext 85315  
 Email Address: [scott.hawthorne@usaa.com](mailto:scott.hawthorne@usaa.com)  
 Effective Date: 10/1/2011

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

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](mailto:insurance.pnc@arkansas.gov)  
 You may also attach to a SERFF filing or submit on a cdr disk

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE BLANK**

**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$1,204.96	\$1,309.06	\$1,166.72	\$1,270.68	\$1,323.17	\$1,445.87	\$1,239.22	\$1,358.40	\$1,238.66	\$1,377.43	\$1,137.96	\$1,232.19	\$1,228.69	\$1,370.64	\$1,246.74	\$1,366.29	\$1,095.38	\$1,218.76
	\$120,000	\$1,308.12	\$1,420.89	\$1,266.59	\$1,379.20	\$1,436.39	\$1,569.30	\$1,345.22	\$1,474.32	\$1,344.45	\$1,494.76	\$1,235.42	\$1,337.50	\$1,333.59	\$1,487.35	\$1,353.38	\$1,482.88	\$1,188.92	\$1,322.57
	\$160,000	\$1,408.12	\$1,530.08	\$1,363.47	\$1,485.27	\$1,546.35	\$1,690.10	\$1,448.28	\$1,587.91	\$1,447.84	\$1,610.41	\$1,329.79	\$1,440.18	\$1,436.23	\$1,602.53	\$1,457.07	\$1,597.13	\$1,280.36	\$1,424.91
6	\$80,000	\$1,276.96	\$1,415.20	\$1,239.44	\$1,377.54	\$1,410.20	\$1,573.23	\$1,324.77	\$1,483.20	\$1,342.81	\$1,527.48	\$1,202.09	\$1,327.17	\$1,336.08	\$1,525.03	\$1,332.47	\$1,491.38	\$1,188.11	\$1,352.31
	\$120,000	\$1,386.06	\$1,535.80	\$1,345.30	\$1,494.89	\$1,530.59	\$1,707.20	\$1,437.83	\$1,609.44	\$1,457.20	\$1,657.24	\$1,304.83	\$1,440.32	\$1,449.85	\$1,654.53	\$1,446.19	\$1,618.32	\$1,289.32	\$1,467.18
	\$160,000	\$1,492.56	\$1,654.50	\$1,448.74	\$1,610.53	\$1,648.39	\$1,839.40	\$1,548.59	\$1,734.20	\$1,569.92	\$1,786.28	\$1,404.99	\$1,551.53	\$1,562.11	\$1,783.48	\$1,557.59	\$1,743.76	\$1,389.07	\$1,581.44
9	\$80,000	\$1,384.84	\$1,572.55	\$1,348.23	\$1,535.80	\$1,540.13	\$1,761.65	\$1,452.31	\$1,667.62	\$1,497.15	\$1,748.40	\$1,298.39	\$1,468.18	\$1,495.07	\$1,752.19	\$1,460.30	\$1,676.25	\$1,325.51	\$1,548.91
	\$120,000	\$1,502.84	\$1,706.17	\$1,463.07	\$1,666.25	\$1,671.25	\$1,911.20	\$1,575.90	\$1,809.12	\$1,624.31	\$1,896.46	\$1,409.07	\$1,592.99	\$1,622.00	\$1,900.50	\$1,584.57	\$1,818.49	\$1,438.08	\$1,680.07
	\$160,000	\$1,619.04	\$1,838.95	\$1,576.29	\$1,796.04	\$1,800.72	\$2,060.25	\$1,698.11	\$1,950.36	\$1,750.84	\$2,045.19	\$1,517.90	\$1,716.82	\$1,748.46	\$2,049.70	\$1,707.44	\$1,960.44	\$1,550.12	\$1,811.86

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	0 %	Deadbolt Lock	0 %
Burglar Alarm	5 %	Window Locks	0 %
Smoke Alarm	0 %	\$1,000 Deductible	varies %
		Other (specify)	

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?  Yes (yes or no)

WHAT IS YOUR PERCENTAGE DEDUCTIBLE?  %

Zone Brick Frame

Sprinklers	20	%
Maximum Credit Allowed	varies	%

WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?

Highest Risk	\$	2.34	\$	0.95
Lowest Risk	\$	0.9	\$	0.41

|

NAIC Number: 18600  
 Company Name: USAA General Indemnity Company  
 Contact Person: Scott Hawthorne, MSIM, CPCU, CCP  
 Telephone No.: 800-531-8722, ext 85315  
 Email Address: [scott.hawthorne@usaa.com](mailto:scott.hawthorne@usaa.com)  
 Effective Date: 10/1/2011

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

Submit to: Arkansas Insurance Department  
 1200 West Third Street  
 Little Rock, AR 72201-1904  
 Telephone: 501-371-2800  
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 You may also attach to a SERFF filing or submit on a cdr disk

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE  
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**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$1,217.44	\$1,307.84	\$1,177.21	\$1,267.47	\$1,332.66	\$1,439.14	\$1,245.95	\$1,349.36	\$1,235.52	\$1,355.79	\$1,151.80	\$1,233.66	\$1,223.40	\$1,346.41	\$1,253.70	\$1,357.42	\$1,092.26	\$1,199.20
	\$120,000	\$1,321.80	\$1,419.72	\$1,278.10	\$1,375.87	\$1,446.83	\$1,562.18	\$1,352.67	\$1,464.69	\$1,341.19	\$1,471.47	\$1,250.57	\$1,339.24	\$1,328.00	\$1,461.25	\$1,361.08	\$1,473.44	\$1,185.67	\$1,301.51
	\$160,000	\$1,422.56	\$1,528.46	\$1,375.58	\$1,481.32	\$1,557.27	\$1,682.02	\$1,455.99	\$1,577.13	\$1,443.97	\$1,584.88	\$1,345.82	\$1,441.72	\$1,429.86	\$1,573.97	\$1,465.03	\$1,586.55	\$1,276.56	\$1,401.83
6	\$80,000	\$1,276.17	\$1,396.02	\$1,236.70	\$1,356.40	\$1,404.09	\$1,545.39	\$1,316.39	\$1,453.66	\$1,322.19	\$1,482.07	\$1,203.88	\$1,312.36	\$1,312.94	\$1,476.51	\$1,324.27	\$1,461.95	\$1,169.46	\$1,311.62
	\$120,000	\$1,385.35	\$1,515.18	\$1,342.48	\$1,472.15	\$1,524.14	\$1,677.20	\$1,428.90	\$1,577.59	\$1,435.01	\$1,608.20	\$1,306.92	\$1,424.42	\$1,424.93	\$1,602.11	\$1,437.45	\$1,586.60	\$1,269.24	\$1,423.23
	\$160,000	\$1,491.44	\$1,631.84	\$1,445.35	\$1,585.59	\$1,641.04	\$1,806.57	\$1,538.59	\$1,699.40	\$1,545.59	\$1,732.90	\$1,406.91	\$1,533.99	\$1,534.83	\$1,726.46	\$1,547.79	\$1,709.09	\$1,367.06	\$1,533.61
9	\$80,000	\$1,364.94	\$1,527.46	\$1,326.43	\$1,488.81	\$1,511.57	\$1,703.31	\$1,422.15	\$1,608.48	\$1,451.32	\$1,668.63	\$1,282.85	\$1,429.89	\$1,446.16	\$1,668.53	\$1,430.24	\$1,617.14	\$1,284.45	\$1,477.67
	\$120,000	\$1,481.43	\$1,657.47	\$1,439.60	\$1,615.49	\$1,640.48	\$1,848.17	\$1,543.38	\$1,745.22	\$1,574.80	\$1,810.19	\$1,392.38	\$1,551.65	\$1,569.16	\$1,810.03	\$1,552.16	\$1,754.61	\$1,393.73	\$1,603.03
	\$160,000	\$1,595.54	\$1,785.94	\$1,550.57	\$1,740.81	\$1,767.07	\$1,991.70	\$1,662.59	\$1,880.89	\$1,696.97	\$1,951.56	\$1,499.52	\$1,671.78	\$1,691.00	\$1,951.52	\$1,672.04	\$1,891.00	\$1,501.86	\$1,728.24

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	0 %	Deadbolt Lock	0 %
Burglar Alarm	5 %	Window Locks	0 %
Smoke Alarm	0 %	\$1,000 Deductible	varies %
		Other (specify)	

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?  Yes (yes or no)

WHAT IS YOUR PERCENTAGE DEDUCTIBLE?  %

Zone Brick Frame

Sprinklers	20	%
Maximum Credit Allowed	varies	%

WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?

Highest Risk	\$	2.34	\$	0.95
Lowest Risk	\$	0.9	\$	0.41

|

NAIC Number: 21253  
 Company Name: Garrison Property and Casualty Insurance Company  
 Contact Person: Scott Hawthorne, MSIM, CPCU, CCP  
 Telephone No.: 800-531-8722, ext 85315  
 Email Address: [scott.hawthorne@usaa.com](mailto:scott.hawthorne@usaa.com)  
 Effective Date: 10/1/2011

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

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](mailto:insurance.pnc@arkansas.gov)  
 You may also attach to a SERFF filing or submit on a cdr disk

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE  
 BLANK**

**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$1,282.56	\$1,393.14	\$1,241.84	\$1,352.27	\$1,408.32	\$1,538.66	\$1,318.94	\$1,445.54	\$1,318.20	\$1,465.60	\$1,211.28	\$1,311.38	\$1,307.55	\$1,458.34	\$1,326.94	\$1,453.94	\$1,165.71	\$1,296.77
	\$120,000	\$1,392.37	\$1,512.16	\$1,348.13	\$1,467.76	\$1,528.83	\$1,670.02	\$1,431.76	\$1,568.90	\$1,430.78	\$1,590.45	\$1,315.02	\$1,423.46	\$1,419.18	\$1,582.52	\$1,440.45	\$1,578.01	\$1,265.26	\$1,407.23
	\$160,000	\$1,498.81	\$1,628.36	\$1,451.25	\$1,580.63	\$1,645.87	\$1,798.56	\$1,541.45	\$1,689.77	\$1,540.80	\$1,713.49	\$1,415.46	\$1,532.73	\$1,528.40	\$1,705.06	\$1,550.80	\$1,699.58	\$1,362.57	\$1,516.11
6	\$80,000	\$1,358.99	\$1,505.83	\$1,319.03	\$1,465.73	\$1,500.71	\$1,673.89	\$1,409.76	\$1,578.05	\$1,428.77	\$1,624.94	\$1,279.35	\$1,412.22	\$1,421.57	\$1,622.28	\$1,417.96	\$1,586.75	\$1,264.16	\$1,438.58
	\$120,000	\$1,475.10	\$1,634.16	\$1,431.69	\$1,590.59	\$1,628.83	\$1,816.43	\$1,530.07	\$1,712.36	\$1,550.49	\$1,762.98	\$1,388.70	\$1,532.62	\$1,542.63	\$1,760.04	\$1,538.97	\$1,721.82	\$1,371.85	\$1,560.78
	\$160,000	\$1,588.43	\$1,760.46	\$1,541.77	\$1,713.63	\$1,754.18	\$1,957.08	\$1,647.94	\$1,845.09	\$1,670.42	\$1,900.24	\$1,495.29	\$1,650.95	\$1,662.06	\$1,897.21	\$1,657.52	\$1,855.27	\$1,477.98	\$1,682.33
9	\$80,000	\$1,473.52	\$1,672.91	\$1,434.53	\$1,633.77	\$1,638.65	\$1,873.96	\$1,545.17	\$1,773.87	\$1,592.65	\$1,859.53	\$1,381.58	\$1,561.93	\$1,590.39	\$1,863.50	\$1,553.67	\$1,783.06	\$1,410.05	\$1,647.36
	\$120,000	\$1,599.07	\$1,815.05	\$1,556.72	\$1,772.54	\$1,778.16	\$2,033.04	\$1,676.66	\$1,924.39	\$1,727.93	\$2,017.00	\$1,499.35	\$1,694.71	\$1,725.41	\$2,021.25	\$1,685.89	\$1,934.37	\$1,529.81	\$1,786.85
	\$160,000	\$1,722.70	\$1,956.31	\$1,677.18	\$1,910.60	\$1,915.91	\$2,191.58	\$1,806.68	\$2,074.62	\$1,862.52	\$2,175.19	\$1,615.15	\$1,826.44	\$1,859.94	\$2,179.91	\$1,816.61	\$2,085.36	\$1,648.99	\$1,927.01

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	0 %	Deadbolt Lock	0 %
Burglar Alarm	5 %	Window Locks	0 %
Smoke Alarm	0 %	\$1,000 Deductible	varies %
		Other (specify)	

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?  Yes (yes or no)

WHAT IS YOUR PERCENTAGE DEDUCTIBLE?  %

Zone Brick Frame

Sprinklers	20	%
Maximum Credit Allowed	varies	%

WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?

Highest Risk	\$	2.34	\$	0.95
Lowest Risk	\$	0.9	\$	0.41

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**NAIC LOSS COST DATA ENTRY DOCUMENT**

1.	This filing transmittal is part of Company Tracking #	<b>AR1114255</b>
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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	<b>N/A</b>
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Company Name		Company NAIC Number	
3.	<b>A.</b> <b>United Services Automobile Association</b>	<b>B.</b>	<b>200-25941</b>

Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)	
4.	<b>A.</b> <b>04.0 Homeowners</b>	<b>B.</b>	<b>04.0003 Owner Occupied Homeowners</b>

(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
<b>Owners</b>	<b>89.3%</b>	<b>20.0%</b>					
<b>Condos</b>	<b>N/A</b>	<b>N/A</b>					
<b>TOTAL OVERALL EFFECT</b>	<b>89.3%</b>	<b>19.5%</b>					

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
	<b>2006</b>	<b>9,720</b>	<b>-5.0%</b>	<b>11-1-06</b>	<b>10,115</b>	<b>4,627</b>	<b>46%</b>	<b>41%</b>
	<b>2007</b>	<b>10,838</b>	<b>-18.3%</b>	<b>4-15-07</b>	<b>10,337</b>	<b>6,070</b>	<b>59%</b>	<b>49%</b>
	<b>2007</b>	<b>10,838</b>	<b>-18.8%</b>	<b>12-31-07</b>	<b>10,337</b>	<b>6,070</b>	<b>59%</b>	<b>49%</b>
	<b>2008</b>	<b>11,496</b>	<b>9.2%</b>	<b>11-30-08</b>	<b>8,687</b>	<b>15,857</b>	<b>183%</b>	<b>71%</b>
	<b>2010</b>	<b>12,496</b>	<b>0.0%</b>	<b>5-30-10</b>	<b>9,313</b>	<b>10,094</b>	<b>108%</b>	<b>60%</b>
	<b>2010</b>	<b>12,496</b>	<b>0.0%</b>	<b>7-17-10</b>	<b>9,313</b>	<b>10,094</b>	<b>108%</b>	<b>60%</b>
	<b>2010</b>	<b>12,496</b>	<b>9.9%</b>	<b>10-1-10</b>	<b>9,313</b>	<b>10,094</b>	<b>108%</b>	<b>60%</b>

7.	Expense Constants	Selected Provisions
	A. Total Production Expense	<b>13.3%</b>
	B. General Expense	<b>1.6%</b>
	C. Taxes	<b>2.4%</b>
	D. Underwriting Profit & Contingencies	<b>15.0%</b>
	E. License & Fees	<b>0.4%</b>
	F. TOTAL	<b>32.7%</b>

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)  
 9. 23.5% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):  
 10. 0.0% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable):

### NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	AR1114255
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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	N/A
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Company Name		Company NAIC Number		
3.	A.	<b>USAA Casualty Insurance Company</b>	B.	<b>200-25968</b>

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.	<b>04.0 Homeowners</b>	B.	<b>04.0003 Owner Occupied Homeowners</b>

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
<b>Owners</b>	<b>89.3%</b>	<b>20.1%</b>					
<b>Condos</b>	<b>N/A</b>	<b>N/A</b>					
<b>TOTAL OVERALL EFFECT</b>	<b>89.3%</b>	<b>19.9%</b>					

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
<b>2006</b>	<b>3,782</b>	<b>-5.0%</b>	<b>11-1-06</b>	<b>3,654</b>	<b>2,780</b>	<b>46%</b>	<b>40%</b>
<b>2007</b>	<b>4,025</b>	<b>-20.1%</b>	<b>4-15-07</b>	<b>3,764</b>	<b>1,596</b>	<b>42%</b>	<b>49%</b>
<b>2007</b>	<b>4,025</b>	<b>0.0%</b>	<b>12-31-07</b>	<b>3,764</b>	<b>1,596</b>	<b>42%</b>	<b>49%</b>
<b>2008</b>	<b>4,525</b>	<b>12.6%</b>	<b>11-30-08</b>	<b>3,474</b>	<b>5,187</b>	<b>149%</b>	<b>60%</b>
<b>2010</b>	<b>5,176</b>	<b>0.0%</b>	<b>5-30-10</b>	<b>4,458</b>	<b>4,373</b>	<b>98%</b>	<b>59%</b>
<b>2010</b>	<b>5,176</b>	<b>0.0%</b>	<b>7-17-10</b>	<b>4,458</b>	<b>4,373</b>	<b>98%</b>	<b>59%</b>
<b>2010</b>	<b>5,176</b>	<b>11.6%</b>	<b>10-1-10</b>	<b>4,458</b>	<b>4,373</b>	<b>98%</b>	<b>59%</b>

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	<b>13.3%</b>
B. General Expense	<b>1.6%</b>
C. Taxes	<b>2.4%</b>
D. Underwriting Profit & Contingencies	<b>15.0%</b>
E. License & Fees	<b>0.4%</b>
<b>F. TOTAL</b>	<b>32.7%</b>

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)
9. 22.9% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):
10. 0.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):

**NAIC LOSS COST DATA ENTRY DOCUMENT**

1.	This filing transmittal is part of Company Tracking #	<b>AR1114255</b>
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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	<b>N/A</b>
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Company Name		Company NAIC Number	
3.	<b>A.</b>	<b>USAA General Indemnity Company</b>	<b>B.</b> <b>200-18600</b>

Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)	
4.	<b>A.</b>	<b>B.</b>	

<b>5.</b>			<b>FOR LOSS COSTS ONLY</b>				
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
COVERAGE (See Instructions)	Indicated % Rate Level Change	Requested % Rate Level Change	Expected Loss Ratio	Loss Cost Modification Factor	Selected Loss Cost Multiplier	Expense Constant (If Applicable)	Co. Current Loss Cost Multiplier
<b>Owners</b>	<b>89.3%</b>	<b>19.6%</b>					
<b>Condos</b>	<b>N/A</b>	<b>N/A</b>					
<b>TOTAL OVERALL EFFECT</b>	<b>89.3%</b>	<b>19.6%</b>					

<b>6.</b>		<b>5 Year History</b>		<b>Rate Change History</b>			
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
<b>2006</b>	<b>20</b>	<b>-5.0%</b>	<b>9-1-06</b>	<b>3</b>	<b>1</b>	<b>31%</b>	<b>77%</b>
<b>2008</b>	<b>225</b>	<b>11.6%</b>	<b>11-30-08</b>	<b>112</b>	<b>93</b>	<b>83%</b>	<b>137%</b>
<b>2010</b>	<b>1,028</b>	<b>0.0%</b>	<b>5-30-10</b>	<b>591</b>	<b>757</b>	<b>128%</b>	<b>89%</b>
<b>2010</b>	<b>1,028</b>	<b>-11.0%</b>	<b>7-17-10</b>	<b>591</b>	<b>757</b>	<b>128%</b>	<b>89%</b>
<b>2010</b>	<b>1,028</b>	<b>1.8%</b>	<b>10-1-10</b>	<b>591</b>	<b>757</b>	<b>128%</b>	<b>89%</b>

<b>7.</b>	
Expense Constants	Selected Provisions
A. Total Production Expense	<b>13.3%</b>
B. General Expense	<b>1.6%</b>
C. Taxes	<b>2.4%</b>
D. Underwriting Profit & Contingencies	<b>15.0%</b>
E. License & Fees	<b>0.4%</b>
F. TOTAL	<b>32.7%</b>

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)
9. 22.8% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):
10. 0.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):

### NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	AR1114255
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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	N/A
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Company Name		Company NAIC Number		
3.	A.	<b>Garrison Property And Casualty Insurance Company</b>	B.	<b>200-21253</b>

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.		B.	

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
Owners	89.3%	19.8%					
Condos	N/A	N/A					
TOTAL OVERALL EFFECT	89.3%	19.7%					

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
2006	63	-5.0%	11-1-06	15	1	5%	69%
2008	333	8.4%	11-30-08	224	678	303%	88%
2010	648	0.0%	05-30-10	502	990	197%	81%
2010	648	0.0%	7-17-10	502	990	197%	81%
2010	648	-0.5%	10-1-10	502	990	197%	81%

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	13.3%
B. General Expense	1.6%
C. Taxes	2.4%
D. Underwriting Profit & Contingencies	15.0%
E. License & Fees	0.4%
F. TOTAL	32.7%

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)
9. 22.8% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):
10. 0.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):

USAA Group  
*Arkansas*  
Homeowners Filing Memorandum

USAA Group (USAA, USAA-CIC, USAA-GIC, and Garrison) wishes to revise Homeowners premiums with an overall effect of 19.8%. The effects by form apply as follows:

USAA Owners Forms	20.0%
USAA Unit-Owners Forms	0.0%
USAA All Forms Combined	19.8%
USAA-CIC Owners Forms	20.1%
USAA-CIC Unit-Owners Forms	0.0%
USAA-CIC All Forms Combined	19.9%
USAA-GIC Owners Forms	19.6%
USAA-GIC Unit-Owners Forms	0.0%
USAA-GIC All Forms Combined	19.6%
Garrison Owners Forms	19.8%
Garrison Unit-Owners Forms	0.0%
Garrison All Forms Combined	19.7%
USAA Group All Forms Combined	19.8%

The proposed changes include revising the Base Rates for Owners forms.

The attached exhibits support these revisions.

An effective date of October 1, 2011, for these revisions will apply to all policies. Details of these revisions are attached.

USAA Group  
*Arkansas*  
Homeowners Filing Memorandum  
Table of Contents

*Attachments in support of this filing:*

Explanatory Memorandum

Exhibit I      Indicated Rate Change

Exhibit II     Premium Trend

Exhibit III    Large Loss Adjustment

Exhibit IV    Loss Development

Exhibit V     Loss Trend

Exhibit VI    Loss Adjustment Expense (LAE)

Exhibit VII   Historical Catastrophe Loss and LAE Ratio

Exhibit VIII   Expenses

Exhibit IX    Underwriting Profit Provision

USAA Group  
*Arkansas*  
Homeowners Explanatory Memorandum Page 1 of 2

Exhibit I - illustrates USAA Group Arkansas experience for the latest five accident years ending December 31, 2010, as of March 31, 2011. The data is for owners forms only. The indicated rate level change is developed in this exhibit. The proposed change is also provided. A large loss procedure was applied to the losses, which is detailed in Exhibit III.

Exhibit II - provides the calculation of USAA Group premium trend factors for Arkansas. These factors reflect increasing amounts of insurance and other distributional changes. The average earned premium at present rates, shown in column 2, has been fit to an exponential model using 20-, 16-, 12-, 8-, and 4-point values. The selected annual trend value is shown in this exhibit.

Exhibit III - shows the 10-year smoothing technique USAA uses to reflect the excess loss potential in Arkansas. The Large Loss Adjustment establishes an excess loss cut-off as a percentage of the average amount of insurance written for each year. The procedure then removes the portion of developed loss in excess of the cut-off, ratios the excess losses to the developed non-excess (normal) losses, and selects a weighted average of this ratio as the excess loss factor.

Exhibit IV - displays the calculation of USAA Group loss development factors for Arkansas. Loss data used for these calculations excludes catastrophes.

Exhibit V - shows the loss trend underlying the rate level indication. Various exponential fits including 20-, 16-, 12-, 8-, and 4-points are shown. The selected current cost factor and trended cost factor are based on the results of these exponential fits. Due to the volatility and lack of credibility in Arkansas, the selected Arkansas loss trend was credibility weighted with USAA Group countrywide loss trend data. The Arkansas credibility-weighted current cost factor and trended cost factor are displayed on Page 2.

Exhibit VI - develops the loss adjustment expense (LAE) factor used in calculating the indication in Exhibit I. The factor is based upon USAA countrywide data for calendar-accident years 2007, 2008, and 2009.

Exhibit VII - Page 1 illustrates the calculation of the Arkansas historical catastrophe loss and LAE ratio used to determine the indication in Exhibit I. We are utilizing a procedure based on the methodology presented in "Pricing the Catastrophe Exposure in Homeowners Ratemaking" by David H. Hays and W. Scott Farris. Owners catastrophe losses are considered fully developed. The historical catastrophe loss is divided by the amount of insurance (AOI) in force for each of the last twenty accident years. The mean and standard deviation of these ratios is calculated, along with a t-statistic. A 55% confidence was selected on a state basis to reflect the variability of losses within the twenty-year experience period and to ensure that our countrywide catastrophe provision is sufficient in the long-run. The final catastrophe provision is applied to prospective

USAA Group

*Arkansas*

Homeowners Explanatory Memorandum Page 2 of 2

amount of insurance in force. The selected AOI trend is displayed on Page 2. Exhibit VI derives the selected LAE factor.

Exhibit VIII - shows the development of the variable permissible loss and LAE ratio for Arkansas on Page 1. Provisions for other expense categories are based on countrywide data from the Insurance Expense Exhibit while taxes, licenses, and fees are based upon actual Arkansas experience for USAA Group. The calculation of the selected annual expense trend is shown on Page 2. The trend is derived by taking a weighted average of the Employment Cost Index and the Consumer Price Index. The expense trend is used to trend fixed expenses, which are used to develop the indication shown in Exhibit I.

Exhibit IX - details USAA Group's method for selecting its underwriting profit and contingency provision, which is included in the permissible loss ratio. A separate explanatory memorandum is included with the exhibit.

USAA Group  
Arkansas  
Indicated Rate Change  
Owners Forms  
As of 03/31/2011

Calendar/ Accident Year Ending (1)	Earned Premium at Present Rates (2)	Premium Trend Factor <sup>A</sup> (3)	Prospective Earned Premium at Present Rates (4) = (2) * (3)	Smoothed Developed Incurred Losses Excluding Catastrophes <sup>B</sup> (5)	Loss Trend Factor <sup>C</sup> (6)	LAE Factor <sup>D</sup> (7)	Prospective Incurred Losses and LAE Excluding Catastrophes (8) = (5) * (6) * (7)	Prospective Loss and LAE Ratio Excluding Catastrophes (9) = (8) / (4)	Weight (10)
12/31/2006	\$10,131,642	1.317	\$13,343,373	\$5,027,391	2.055	1.180	\$12,190,920	0.914	0.100
12/31/2007	\$11,857,012	1.226	14,536,697	6,584,773	1.816	1.180	14,110,378	0.971	0.150
12/31/2008	\$13,644,315	1.178	16,073,003	9,206,149	1.604	1.180	17,424,662	1.084	0.200
12/31/2009	\$15,337,982	1.124	17,239,892	18,096,338	1.417	1.180	30,258,163	1.755	0.250
12/31/2010	\$17,057,380	1.093	18,643,716	12,730,025	1.252	1.180	18,806,830	1.009	0.300
Five Year Weighted Loss and LAE Ratio Excluding Catastrophes =									1.195
Catastrophe Loss and LAE Ratio <sup>E</sup> =									0.215
Trended Fixed Expense Ratio <sup>F</sup> =									0.154
Variable Permissible Loss and LAE Ratio <sup>G</sup> =									0.826
Indicated Rate Level Change = $(1.195 + 0.215 + 0.154) / 0.826 - 1$									89.3%
Proposed Rate Level Change =									20.0%

<sup>A</sup> Developed in Exhibit II

<sup>B</sup> Developed in Exhibit III

<sup>C</sup> Developed in Exhibit V, Page 2 of 2

<sup>D</sup> Developed in Exhibit VI

<sup>E</sup> Developed in Exhibit VII, Page 1 of 2

<sup>F</sup> Developed in Exhibit VIII, Page 1 of 2

<sup>G</sup> Developed in Exhibit VIII, Page 1 of 2

USAA Group  
Arkansas  
Premium Trend  
Owners Forms

Exhibit II

Year Ending Quarter (1)	Average Earned Premium at Present Rates (2)	Annual Change (3)	Current Amount Factors 935.78 / (2)	<u>Trended Amount Factor:</u>					
				Least Squares Results					
				<u>Exponential Fits</u>					
				20 pt	16 pt	12 pt	8 pt	4 pt	
2006/1	755.73		1.238						
2006/2	762.55		1.227	Annualized Change:	4.9%	4.6%	3.9%	4.0%	2.1%
2006/3	768.91		1.217						
2006/4	776.40		1.205	R-squared Value:	0.984	0.975	0.985	0.958	0.982
2007/1	786.65	4.1%	1.190						
2007/2	800.61	5.0%	1.169						
2007/3	817.21	6.3%	1.145	Selected Annual Trend Factor:	1.040				
2007/4	833.78	7.4%	1.122						
2008/1	847.33	7.7%	1.104						
2008/2	856.77	7.0%	1.092						
2008/3	862.99	5.6%	1.084						
2008/4	868.36	4.1%	1.078						
2009/1	874.85	3.2%	1.070						
2009/2	885.14	3.3%	1.057						
2009/3	898.02	4.1%	1.042						
2009/4	910.28	4.8%	1.028						
2010/1	921.08	5.3%	1.016						
2010/2	927.57	4.8%	1.009						
2010/3	930.63	3.6%	1.006						
2010/4	935.78	2.8%	1.000						
				<u>Premium Trend Factor</u>					
				Current Amount Factors (1)	Trended Amount Selection (2)	Trended Amount Period <sup>A</sup> (3)	Trended Amount Factors (4) = (2) ^ (3)	Premium Trend Factors (5) = (1) * (4)	
<u>Calendar Year Ending</u>									
12/31/2006				1.205	1.040	2.258	1.093	1.317	
12/31/2007				1.122	1.040	2.258	1.093	1.226	
12/31/2008				1.078	1.040	2.258	1.093	1.178	
12/31/2009				1.028	1.040	2.258	1.093	1.124	
12/31/2010				1.000	1.040	2.258	1.093	1.093	

<sup>A</sup> From the average earned date in the most recent accident year, 06/30/2010, to the average earned date in the effective period, 10/01/2012

USAA Group  
Arkansas  
Calculation of Large Loss Adjustment  
Owners Forms  
As of 03/31/2011

Calendar/ Accident Year Ending (1)	Average Amount of Insurance (2)	Cutoff 25% of (2) (3)	Incurred Losses Excluding Catastrophes (4)	Loss Development Factors <sup>A</sup> (5)	Developed Incurred Losses Excluding Catastrophes (6) = (4) * (5)	Number of Excess Losses (7)	Large Losses (8)	Excess Losses (9) = (8) - (7) * (3)	Normal Losses (10) = (6) - (9)	Excess Ratio (11) = (9) / (10)	Smoothed Developed Incurred Losses Ex Cats <sup>C</sup> (12)
12/31/2001	\$142,604	\$35,651	\$3,972,489	1.0000	\$3,972,489	9	\$1,786,408	\$1,465,549	\$2,506,940	0.585	\$3,426,987
12/31/2002	149,261	37,315	3,137,698	1.0000	3,137,698	7	1,056,916	795,711	2,341,987	0.340	3,201,496
12/31/2003	169,672	42,418	4,240,494	1.0000	4,240,494	10	1,600,561	1,176,381	3,064,113	0.384	4,188,642
12/31/2004	186,036	46,509	3,242,787	1.0000	3,242,787	6	1,098,875	819,821	2,422,966	0.338	3,312,195
12/31/2005	198,767	49,692	5,642,782	1.0000	5,642,782	14	2,452,492	1,756,804	3,885,978	0.452	5,312,132
12/31/2006	210,880	52,720	4,776,074	1.0000	4,776,074	8	1,520,152	1,098,392	3,677,682	0.299	5,027,391
12/31/2007	223,093	55,773	6,812,243	1.0000	6,812,243	11	2,608,794	1,995,291	4,816,952	0.414	6,584,773
12/31/2008	227,469	56,867	8,785,473	0.9914	8,709,918	16	2,885,226	1,975,354	6,734,564	0.293	9,206,149
12/31/2009	242,043	60,511	16,284,542	0.9981	16,253,601	16	3,983,783	3,015,607	13,237,994	0.228	18,096,338
12/31/2010	245,336	61,334	14,290,340	0.9993	14,280,337	25	6,501,306	4,967,956	9,312,381	0.533	12,730,025
								\$19,066,866	\$52,001,557		

Weighted Average Excess Ratio <sup>B</sup> = 0.367

Weighted Average Excess Factor = 1.367

<sup>A</sup> Developed in Exhibit IV

<sup>B</sup> Weighted Average Excess Ratio = Sum of Column (9) / Sum of Column (10)

<sup>C</sup> (12) = (10) \* Weighted Average Excess Factor

USAA Group  
Arkansas  
Loss Development  
Incurred Losses Excluding Catastrophes  
*Owners Forms*

Accident Year Ending	15 months	27 months	39 months	51 months
12/31/2003			4,284,875	4,255,057
12/31/2004		3,442,599	3,417,859	3,394,878
12/31/2005	5,379,644	5,457,552	5,626,824	5,617,513
12/31/2006	4,774,984	4,896,583	4,856,341	4,774,570
12/31/2007	7,029,350	6,803,078	6,887,627	6,812,243
12/31/2008	8,659,336	8,733,197	8,785,473	
12/31/2009	16,454,462	16,284,542		
12/31/2010	14,290,340			

Age-to-Age Factors

Accident Year Ending	15 to 27 Months	27 to 39 Months	39 to 51 Months
12/31/2003			0.9930
12/31/2004		0.9928	0.9933
12/31/2005	1.0145	1.0310	0.9983
12/31/2006	1.0255	0.9918	0.9832
12/31/2007	0.9678	1.0124	0.9891
12/31/2008	1.0085	1.0060	
12/31/2009	0.9897		
Latest 3-year Average	0.9887	1.0034	0.9902
Latest 4-year Average	0.9979	1.0103	0.9910
Latest 5-year Average	1.0012	1.0068	0.9914
Latest 3-out-of-5-year Average	1.0042	1.0037	0.9918
Selected Age-to-Age Factors	1.0012	1.0068	0.9914

Cumulative Factors

	15 to 51 Months	27 to 51 Months	39 to 51 Months
Selected Cumulative Factors	0.9993	0.9981	0.9914

USAA Group  
Arkansas  
Paid Losses Excluding Catastrophes  
Owners Forms

Year Ending Quarter	Calendar Year Paid Frequency				Calendar Year Paid Severity				Calendar Year Paid Pure Premium			
	Series 1 <sup>A</sup>	Annual Change	Series 2 <sup>B</sup>	Annual Change	Series 1 <sup>A</sup>	Annual Change	Series 2 <sup>B</sup>	Annual Change	Series 1 <sup>A</sup>	Annual Change	Series 2 <sup>B</sup>	Annual Change
2006/2	0.0726		0.0506		5,844		5,949		424.27		301.02	
2006/3	0.0733		0.0521		6,334		5,980		464.28		311.56	
2006/4	0.0777		0.0542		5,877		6,041		456.64		327.42	
2007/1	0.0768		0.0557		5,666		6,059		435.15		337.49	
2007/2	0.0785	8.1%	0.0569	12.5%	6,256	7.0%	6,180	3.9%	491.10	15.8%	351.64	16.8%
2007/3	0.0795	8.5%	0.0585	12.3%	6,752	6.6%	6,428	7.5%	536.78	15.6%	376.04	20.7%
2007/4	0.0745	-4.1%	0.0591	9.0%	6,951	18.3%	6,519	7.9%	517.85	13.4%	385.27	17.7%
2008/1	0.0762	-0.8%	0.0589	5.7%	6,692	18.1%	6,737	11.2%	509.93	17.2%	396.81	17.6%
2008/2	0.0810	3.2%	0.0598	5.1%	6,088	-2.7%	6,781	9.7%	493.13	0.4%	405.50	15.3%
2008/3	0.0789	-0.8%	0.0600	2.6%	5,864	-13.2%	6,927	7.8%	462.67	-13.8%	415.62	10.5%
2008/4	0.0791	6.2%	0.0595	0.7%	6,365	-8.4%	7,066	8.4%	503.47	-2.8%	420.43	9.1%
2009/1	0.0841	10.4%	0.0610	3.6%	6,305	-5.8%	7,209	7.0%	530.25	4.0%	439.75	10.8%
2009/2	0.0775	-4.3%	0.0618	3.3%	7,546	23.9%	7,267	7.2%	584.82	18.6%	449.10	10.8%
2009/3	0.0981	24.3%	0.0621	3.5%	8,744	49.1%	7,265	4.9%	857.79	85.4%	451.16	8.6%
2009/4	0.1145	44.8%	0.0634	6.6%	8,155	28.1%	7,285	3.1%	933.75	85.5%	461.87	9.9%
2010/1	0.1188	41.3%	0.0635	4.1%	8,180	29.7%	7,095	-1.6%	971.78	83.3%	450.53	2.5%
2010/2	0.1288	66.2%	0.0630	1.9%	8,519	12.9%	7,194	-1.0%	1097.25	87.6%	453.22	0.9%
2010/3	0.1180	20.3%	0.0653	5.2%	6,950	-20.5%	7,220	-0.6%	820.10	-4.4%	471.47	4.5%
2010/4	0.1067	-6.8%	0.0678	6.9%	6,895	-15.5%	7,147	-1.9%	735.70	-21.2%	484.57	4.9%
2011/1	0.0950	-20.0%	0.0687	8.2%	8,092	-1.1%	7,439	4.8%	768.74	-20.9%	511.06	13.4%
Exponential Fits	R-squared Value	Annualized Change	R-squared Value	Annualized Change	R-squared Value	Annualized Change	R-squared Value	Annualized Change	R-squared Value	Annualized Change	R-squared Value	Annualized Change
20-point fit	0.628	10.9%	0.938	5.3%	0.518	7.0%	0.872	5.0%	0.632	18.7%	0.962	10.6%
16-point fit	0.601	13.5%	0.912	4.4%	0.366	6.8%	0.761	3.9%	0.564	21.2%	0.947	8.5%
12-point fit	0.503	16.4%	0.895	5.1%	0.349	10.1%	0.495	1.9%	0.484	28.1%	0.893	7.1%
8-point fit	0.109	10.1%	0.858	6.2%	0.136	-5.3%	0.021	0.3%	0.007	4.3%	0.715	6.5%
4-point fit	1.000	-33.3%	0.967	12.6%	0.045	-6.3%	0.435	3.7%	0.702	-37.5%	0.981	16.8%

<sup>A</sup> Series 1 is based on USAA Group Arkansas data

<sup>B</sup> Series 2 is based on USAA Group CW EXC CA, FL, & TX data

USAA Group  
Arkansas  
Credibility Weighted Loss Trend  
Owners Forms

	Series 1 Frequency <sup>A</sup>	Series 2 Frequency <sup>B</sup>	Cred-Weighted Frequency <sup>C</sup>	Series 1 Severity <sup>A</sup>	Series 2 Severity <sup>B</sup>	Cred-Weighted Severity <sup>C</sup>	Cred-Weighted Pure Premium
Current Cost Selection	1.100	1.050	1.070	1.070	1.050	1.058	1.132
Trended Cost Selection	1.100	1.070	1.082	1.030	1.010	1.018	1.101

  

	Loss Trend Factor						
	Current Cost Selection (1)	Current Cost Period <sup>D</sup> (2)	Current Cost Factor (3) = (1) ^ (2)	Trended Cost Selection (4)	Trended Cost Period <sup>E</sup> (5)	Trended Cost Factor (6) = (4) ^ (5)	Loss Trend Factor (7) = (3) * (6)
Accident Year Ending							
12/31/2006	1.132	4.252	1.694	1.101	2.005	1.213	2.055
12/31/2007	1.132	3.252	1.497	1.101	2.005	1.213	1.816
12/31/2008	1.132	2.252	1.322	1.101	2.005	1.213	1.604
12/31/2009	1.132	1.252	1.168	1.101	2.005	1.213	1.417
12/31/2010	1.132	0.252	1.032	1.101	2.005	1.213	1.252

<sup>A</sup> Series 1 is based on USAA Group Arkansas data

<sup>B</sup> Series 2 is based on USAA Group CW EXC CA, FL, & TX data

<sup>C</sup> USAA Group Arkansas is 40.8% credible based on 1,767 claims; used the Square Root method with a full credibility standard of 10,623 claims.

<sup>D</sup> From the average date of loss in the respective accident year to 09/30/2010

<sup>E</sup> From 09/30/2010 to the average date of loss in the effective period, 10/01/2012

USAA Group  
*Countrywide*  
 Loss Adjustment Expense (LAE) Factor  
*All Forms Combined*  
 As of 06/30/2010

Non-Catastrophe Loss Adjustment Expense Factor

Calendar/Accident Year Ending	Incurred Losses	Loss Adjustment Expense	LAE Ratio
12/31/2007	910,420,179	156,032,165	0.171
12/31/2008	1,031,018,462	184,331,523	0.179
12/31/2009	1,179,139,158	208,092,554	0.176
Average LAE Ratio			0.175
Selected Non-Catastrophe LAE Factor			1.180

Catastrophe Loss Adjustment Expense Factor

Calendar/Accident Year Ending	Incurred Losses	Loss Adjustment Expense	LAE Ratio
12/31/2007	223,294,554	11,272,790	0.050
12/31/2008	393,866,495	21,969,343	0.056
12/31/2009	400,615,105	30,023,026	0.075
Average LAE Ratio			0.060
Selected Catastrophe LAE Factor			1.060

USAA Group  
Arkansas  
Catastrophe Ratio  
Owners Forms  
As of 03/31/2011

Calendar / Accident Year Ending	Total Amount of Insurance in Force/1000	Catastrophe Losses	Cat/AOI Ratio
12/31/1991	609,574	\$346,354	0.5682
12/31/1992	671,241	\$276,102	0.4113
12/31/1993	735,242	\$67,920	0.0924
12/31/1994	807,998	\$92,798	0.1148
12/31/1995	881,062	\$429,986	0.4880
12/31/1996	933,155	\$1,464,110	1.5690
12/31/1997	1,009,075	\$520,764	0.5161
12/31/1998	1,110,129	\$13,802	0.0124
12/31/1999	1,227,850	\$1,830,279	1.4906
12/31/2000	1,350,885	\$509,198	0.3769
12/31/2001	1,469,535	\$78,926	0.0537
12/31/2002	1,591,122	\$119,819	0.0753
12/31/2003	1,879,117	\$149,754	0.0797
12/31/2004	2,214,199	\$240,655	0.1087
12/31/2005	2,538,458	\$142,629	0.0562
12/31/2006	2,864,806	\$2,935,080	1.0245
12/31/2007	3,362,909	\$312,466	0.0929
12/31/2008	3,725,032	\$13,224,424	3.5502
12/31/2009	4,254,880	\$6,080,150	1.4290
12/31/2010	4,672,910	\$2,790,340	0.5971
(1) Mean			0.6354
(2) Standard Deviation			0.8541
(3) t-statistic for 55% confidence and 19 degrees of freedom			0.127
(4) Final Catastrophe Provision (1) + (2) * (3)			0.7439
(5) Selected AOI trend <sup>A</sup>			3.7%
(6) Prospective Amount of Insurance in Force/1000			5,072,857
(7) Prospective Catastrophe Losses (4) * (6)			\$3,773,698
(8) Selected Catastrophe LAE Factor <sup>B</sup>			1.060
(9) Prospective Catastrophe Loss and LAE (7) * (8)			\$4,000,120
(10) Prospective Earned Premium at Present Rates <sup>C</sup>			\$18,643,716
Catastrophe Loss and LAE Ratio (9) / (10)			0.215

<sup>A</sup> Developed in Exhibit VII, Page 2 of 2

<sup>B</sup> Developed in Exhibit VI

<sup>C</sup> Developed in Exhibit I

USAA Group  
*Arkansas*  
Average Amount of Insurance Trend  
*Owners Forms*

In Force Data as of	Average AOI	Annual Change	12 point fit	6 point fit
2007/1	214,631			
2007/2	218,482			
2007/3	221,510			
2007/4	223,093			
2008/1	224,091	4.4%		
2008/2	224,838	2.9%	225,672	
2008/3	225,959	2.0%	227,733	
2008/4	227,469	2.0%	229,814	
2009/1	230,880	3.0%	231,913	
2009/2	235,763	4.9%	234,032	
2009/3	240,054	6.2%	236,170	
2009/4	242,043	6.4%	238,328	241,552
2010/1	242,394	5.0%	240,505	242,494
2010/2	242,810	3.0%	242,702	243,439
2010/3	244,297	1.8%	244,919	244,387
2010/4	245,336	1.4%	247,157	245,340
2011/1	246,628	1.7%	249,415	246,296
Exponential Trend			3.7%	1.6%
R-squared			0.925	0.953
Selected AOI Trend				3.7%

USAA Group  
Arkansas  
Fixed and Variable Expense Provisions  
All Forms Combined

Exhibit VIII,  
Page 1 of 2

	2009	2010	2-Year Straight Average	Selected
(1) Average General Expenses Per Earned Exposure <sup>A</sup>	\$19.50	\$12.71		
(2) Selected Annual Expense Trend <sup>B</sup>	1.5%	1.5%		
(3) Trend Period <sup>C</sup>	3.26	2.26		
(4) Projected Average General Expenses Per Earned Exposure (1) * [ 1.015 ] ^ (3)	\$20.47	\$13.14	\$16.81	\$16.81
(5) Average Other Acquisition Expense Per Written Exposure <sup>A</sup>	\$137.29	\$125.98		
(6) Selected Annual Expense Trend <sup>B</sup>	1.5%	1.5%		
(7) Trend Period <sup>D</sup>	2.76	1.76		
(8) Projected Average Other Acquisition Expense Per Written Exposure (5) * [ 1.015 ] ^ (7)	\$143.04	\$129.32	\$136.18	\$136.18
(9) Average Licenses and Fees Expense Per Written Exposure <sup>E</sup>	\$5.52	\$2.56		
(10) Selected Annual Expense Trend <sup>B</sup>	1.5%	1.5%		
(11) Trend Period <sup>D</sup>	2.76	1.76		
(12) Projected Average Licenses and Fees Expense Per Written Exposure (9) * [ 1.015 ] ^ (11)	\$5.75	\$2.63	\$4.19	\$4.19
(13) Total Fixed Expense (4) + (8) + (12)				\$157.18
(14) Average Projected Premium at Present Rates <sup>F</sup>				\$1,023.14
(15) Projected Fixed Expense Provision (13) / (14)				0.154
(16) Commission and Brokerage	0.0%	0.0%	0.0%	0.0%
(17) Taxes <sup>G</sup>	2.4%	2.4%	2.4%	2.4%
(18) Profit and Contingencies Provision <sup>H</sup>				15.0%
(19) Total Variable Expenses (16) + (17) + (18)				17.4%
(20) Variable Permissible Loss and LAE Ratio 1 - (19)				82.6%

<sup>A</sup> USAA Group Countrywide data

<sup>B</sup> Developed in Exhibit VIII, Page 2 of 2

<sup>C</sup> From the midpoint of the respective year to the average earned date in effective period, 10/01/2012

<sup>D</sup> From the midpoint of the respective year to the average written date in effective period, 04/01/2012

<sup>E</sup> Arkansas USAA Group data

<sup>F</sup> Arkansas USAA Group data for Owners Forms only

<sup>G</sup> Arkansas USAA Group data as a percent of direct written premium

<sup>H</sup> Developed in Exhibit IX

USAA Group  
*Countrywide*  
Calculation of Annual Expense Trend

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(1) Employment Cost Index - Financial activities, excluding incentive paid occupations - (annual change over latest 2 years ending 12/31/2010) U.S. Department of Labor	1.6%
(2) % of Total Acquisition and General Expenses used for Salaries and Employee Relations & Welfare - USAA Group Insurance Expense Exhibit, 2010	54.4%
(3) Consumer Price Index, All Items - (annual change over latest 2 year ending 12/31/2010)	2.1%
(4) Annual Expense Trend - { (1) * (2) } + { (3) * [1 - (2)] }	1.8%
<hr/> Selected Annual Expense Trend	<hr/> 1.5%

USAA GROUP  
ARKANSAS HOMEOWNERS  
UNDERWRITING PROFIT PROVISION

A.	Target Rate of Return (% of GAAP Surplus)	
1.	Capital Asset Pricing Model	8.0%
2.	Selected Target Rate of Return	10.0%
B.	Target Underwriting Rate of Return (% of GAAP Surplus)	
1.	Investment Rate of Return After Tax	2.0%
2.	Target Underwriting Return After Tax (A2) - (B1)	8.0%
3.	Target Underwriting Return Before Tax (B2) / ( 1.00 - 0.35 )	12.3%
C.	Target Underwriting Profit Provision (% of Direct Earned Premium)	
1.	Direct Written Premium / GAAP Surplus Ratio	0.661
2.	Indicated Underwriting Profit Provision (B3) / (C1)	18.6%
3.	Selected Underwriting Profit Provision	15.0%

USAA All Companies  
Owners and Unit-Owners Forms  
*Arkansas*  
2011 First Quarter Losses

Quarter	Losses Incurred
2011Q1	\$3,532,220

SERFF Tracking Number: USAA-127209737 State: Arkansas  
 First Filing Company: Garrison Property and Casualty Insurance State Tracking Number:  
 Company, ...  
 Company Tracking Number: AR1114255  
 TOI: 04.0 Homeowners Sub-TOI: 04.0003 Owner Occupied Homeowners  
 Product Name: Rate Revision  
 Project Name/Number: /

## Superseded Schedule Items

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.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/13/2011	Rate and Rule	AR HO Rate Pages	06/30/2011	AR HO Rate Pages.pdf (Superseded)
06/10/2011	Supporting Document	HPCS-Homeowners Premium Comparison Survey	06/29/2011	HPCS-200-25941.xls (Superseded) HPCS-200-25968.xls (Superseded) HPCS-200-18600.xls (Superseded) HPCS-200-21253.xls (Superseded)
06/10/2011	Supporting Document	NAIC loss cost data entry document	06/15/2011	RF-1 200-25941.pdf (Superseded) RF-1 200-25968.pdf (Superseded) RF-1 200-18600.pdf (Superseded) RF-1 200-21253.pdf (Superseded)

State: **ARKANSAS**  
 Line of Business: **HOMEOWNERS**  
 Effective: **OCTOBER 1, 2011**

Companies: **UNITED SERVICES AUTOMOBILE ASSOCIATION**  
**USAA CASUALTY INSURANCE COMPANY**  
**USAA GENERAL INDEMNITY COMPANY**  
**GARRISON PROPERTY AND CASUALTY INSURANCE COMPANY**

**BASE RATES AND MINIMUM PREMIUMS**

**BASE RATES**

<u>Form Type</u>	<u>Peril</u>	<u>USAA</u>	<u>USAA-CIC</u>	<u>USAA-GIC</u>	<u>Garrison</u>
Owners	Other Perils	<b>1292.88</b>	<b>1539.06</b>	<b>1539.06</b>	<b>1539.06</b>
	Fire	<b>1398.36</b>	<b>1612.24</b>	<b>1612.24</b>	<b>1612.24</b>
Unit-Owners	Other Perils	331.68	281.75	281.75	281.75
	Fire	37.49	26.84	26.84	26.84

\* Base limits are \$300,000 Liability and \$5,000 Medical Payments to Others

**MINIMUM PREMIUMS**

<u>Form Type</u>	<u>USAA</u>	<u>USAA-CIC</u>	<u>USAA-GIC</u>	<u>Garrison</u>
Owners	\$250	\$250	\$250	\$250
Unit-Owners	\$125	\$125	\$125	\$125









### NAIC LOSS COST DATA ENTRY DOCUMENT

<b>1.</b>	This filing transmittal is part of Company Tracking #	<b>AR1114255</b>
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<b>2.</b>	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	<b>N/A</b>
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	Company Name		Company NAIC Number
<b>3.</b>	<b>A.</b>	<b>USAA Casualty Insurance Company</b>	<b>B.</b> <b>200-25968</b>

	Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
<b>4.</b>	<b>A.</b>	<b>04.0 Homeowners</b>	<b>B.</b> <b>04.0003 Owner Occupied Homeowners</b>

<b>5.</b>			FOR LOSS COSTS ONLY				
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
COVERAGE (See Instructions)	Indicated % Rate Level Change	Requested % Rate Level Change	Expected Loss Ratio	Loss Cost Modification Factor	Selected Loss Cost Multiplier	Expense Constant (If Applicable)	Co. Current Loss Cost Multiplier
<b>Owners</b>	<b>106.2%</b>	<b>13.7%</b>					
<b>Condos</b>	<b>N/A</b>	<b>N/A</b>					
TOTAL OVERALL EFFECT	<b>106.2%</b>	<b>13.6%</b>					

<b>6.</b>	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
<b>2005</b>	<b>3,563</b>	<b>0.0%</b>	<b>10-1-05</b>	<b>3,263</b>	<b>1,504</b>	<b>46%</b>	<b>67%</b>
<b>2006</b>	<b>3,782</b>	<b>-5.0%</b>	<b>11-1-06</b>	<b>3,654</b>	<b>2,780</b>	<b>46%</b>	<b>40%</b>
<b>2007</b>	<b>4,025</b>	<b>-20.1%</b>	<b>4-15-07</b>	<b>3,764</b>	<b>1,596</b>	<b>42%</b>	<b>49%</b>
<b>2007</b>	<b>4,025</b>	<b>0.0%</b>	<b>12-31-07</b>	<b>3,764</b>	<b>1,596</b>	<b>42%</b>	<b>49%</b>
<b>2008</b>	<b>4,525</b>	<b>12.6%</b>	<b>11-30-08</b>	<b>3,474</b>	<b>5,187</b>	<b>149%</b>	<b>60%</b>
<b>2010</b>	<b>4,849</b>	<b>0.0%</b>	<b>05-30-10</b>	<b>3,839</b>	<b>6,352</b>	<b>165%</b>	<b>52%</b>

<b>7.</b>		
	Expense Constants	Selected Provisions
	A. Total Production Expense	<b>15.1%</b>
	B. General Expense	<b>1.2%</b>
	C. Taxes	<b>2.9%</b>
	D. Underwriting Profit & Contingencies	<b>14.4%</b>
	E. License & Fees	<b>0.4%</b>
	F. TOTAL	<b>34.0%</b>

- 8.** N/A Apply Lost Cost Factors to Future filings? (Y or N)
- 9.** 21.1% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):
- 10.** 0.0% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable):

### NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	AR1114255
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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	N/A
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Company Name		Company NAIC Number		
3.	A.	<b>USAA General Indemnity Company</b>	B.	<b>200-18600</b>

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.	<b>04.0 Homeowners</b>	B.	<b>04.0003 Owner Occupied Homeowners</b>

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
<b>Owners</b>	<b>106.2%</b>	<b>3.6%</b>					
<b>Condos</b>	<b>N/A</b>	<b>N/A</b>					
TOTAL OVERALL EFFECT	<b>106.2%</b>	<b>3.6%</b>					

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
<b>2006</b>	<b>20</b>	<b>-5.0%</b>	<b>9-01-06</b>	<b>3</b>	<b>1</b>	<b>31%</b>	<b>77%</b>
<b>2008</b>	<b>225</b>	<b>11.6%</b>	<b>11-30-08</b>	<b>112</b>	<b>93</b>	<b>83%</b>	<b>137%</b>
<b>2010</b>	<b>458</b>	<b>0.0%</b>	<b>05-30-10</b>	<b>266</b>	<b>222</b>	<b>83%</b>	<b>72%</b>
<b>2010</b>	<b>458</b>	<b>-11.0%</b>	<b>06-12-10</b>	<b>266</b>	<b>222</b>	<b>83%</b>	<b>72%</b>

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	<b>15.1%</b>
B. General Expense	<b>1.2%</b>
C. Taxes	<b>2.9%</b>
D. Underwriting Profit & Contingencies	<b>14.4%</b>
E. License & Fees	<b>0.4%</b>
F. TOTAL	<b>34.0%</b>

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)
9. 14.7% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):
10. -2.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):

### NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	AR1114255
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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	N/A
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Company Name		Company NAIC Number		
3.	A.	<b>Garrison Property And Casualty Insurance Company</b>	B.	<b>200-21253</b>

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.	<b>04.0 Homeowners</b>	B.	<b>04.0003 Owner Occupied Homeowners</b>

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
<b>Owners</b>	<b>106.2%</b>	<b>1.3%</b>					
<b>Condos</b>	<b>N/A</b>	<b>N/A</b>					
<b>TOTAL OVERALL EFFECT</b>	<b>106.2%</b>	<b>1.2%</b>					

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
<b>2006</b>	<b>63</b>	<b>-5.0%</b>	<b>11-01-06</b>	<b>15</b>	<b>1</b>	<b>5%</b>	<b>69%</b>
<b>2008</b>	<b>333</b>	<b>8.4%</b>	<b>11-30-08</b>	<b>224</b>	<b>678</b>	<b>303%</b>	<b>88%</b>
<b>2010</b>	<b>472</b>	<b>0.0%</b>	<b>05-30-10</b>	<b>341</b>	<b>888</b>	<b>260%</b>	<b>68%</b>

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	<b>15.1%</b>
B. General Expense	<b>1.2%</b>
C. Taxes	<b>2.9%</b>
D. Underwriting Profit & Contingencies	<b>14.4%</b>
E. License & Fees	<b>0.4%</b>
<b>F. TOTAL</b>	<b>34.0%</b>

8. N/A Apply Lost Cost Factors to Future filings? (Y or N)
9. **8.2%** Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):
10. **-3.6%** Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):