

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # _____

2. If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number _____

		Company Name		Company NAIC Number
3.	A.	UNITED SERVICES AUTOMOBILE ASSOCIATION	B.	200-25941

		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.

(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
Residual Bodily Injury	22.7%	0.0%					
Uninsured Motorists	85.0%	17.0%					
Medical Payments	22.2%	0.0%					
Property Damage	3.1%	0.0%					
Comprehensive	-28.9%	-12.0%					
Collision	-14.5%	0.0%					
TOTAL OVERALL EFFECT	5.5%	0.0%					

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
2002	13,753	0.3	07/03/05	19,460	12,224	62.8	n/a
2003	13,855	0.0	07/04/05	21,505	11,489	53.4	n/a
2004	14,440	-2.6	02/01/06	22,140	11,671	52.7	n/a
2005	15,295	0.0	10/08/06	22,238	16,547	74.4	n/a
2006	16,013	-6.9	4/21/07	23,380	20,232	86.5	n/a

7.

Expense Constants	Selected Provisions (Liab/PhyDam)
A. Total Production Expense	7.9%/8.2%
B. General Expense	0.6%
C. Taxes, License & Fees	3.1%
D. Underwriting Profit & Contingencies	5.0%
E. Other (explain)	
F. TOTAL	16.6%/16.9%

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