



February 3, 2015

DCRB CIRCULAR NO. 903

To All Members of the DCRB:

Re: **WORKERS COMPENSATION RESIDUAL MARKET RATES
AND VOLUNTARY MARKET LOSS COSTS
EFFECTIVE DECEMBER 1, 2014
AMENDED DCRB FILING NO. 1404**

NOTE APPLICABLE PROVISIONS FOR CARRIER RATE FILINGS

DCRB Filing No. 1404, as originally submitted, proposed average decreases of 1.56 percent in residual market rates and 3.52 percent in voluntary market loss costs to be effective on a new and renewal basis as of December 1, 2014.

The Insurance Department performed an extensive review of DCRB Filing No. 1404, including obtaining independent reviews of the filing from two consulting actuarial firms. The Ratepayer Advocate, appointed by the Insurance Commissioner, in accordance with Delaware legislation, also reviewed the filing and retained a third independent actuary. The Insurance Department held three public information sessions discussing the processes used by the DCRB and the three consulting firms in arriving at their conclusions. The informational sessions and a public hearing held on January 12, 2015 all invited comments from interested parties. In discussions between the Insurance Department, the Ratepayer Advocate and the DCRB, it was agreed that the DCRB would make, and the Insurance Department would approve, an amended filing requesting average decreases of 9.70 percent in residual market rates and 11.50 percent in voluntary market loss costs.

The DCRB's amended filing No. 1404 was approved by the Delaware Insurance Commissioner on January 28, 2015.

**PLEASE READ THE FOLLOWING BOLD TEXT IN ITS ENTIRETY, AS
IT DESCRIBES CHANGES SPECIFICALLY APPLICABLE TO
DCRB FILING NO. 1404**

For purposes of carrier adoptions of DCRB Filing No. 1404 without changing loss cost multipliers or any other pricing feature(s), the Insurance Department has advised the DCRB that it will accept abbreviated filings submitted with the applicable filing fee (\$100) through the SERFF system.

Such filings must include the following language in the General Information section of the SERFF forms:

"The company is adopting the DCRB's revised loss costs as approved under DCRB Filing No. 1404 with no change to the company's current Loss Cost Multiplier of _____ or other rating values. The effective date of this adoption is _____, consistent with the calendar date of our adoption of DCRB Filing No. 1305."

The loss cost multiplier required to be inserted in the first blank of the above language is the loss cost multiplier shown on the first page of the most recent FORMS AND RATES BULLETIN 14 INCORPORATED that the carrier has filed with the Insurance Department. The date to be entered in the second blank is one year after the effective date upon which the carrier adopted the DCRB's December 1, 2013 filing.

Filings made in conformance with all of the above provisions will be given expedited handling at the Insurance Department and will not be subject to review by the Insurance Department's outside actuarial firm.

If a carrier wishes to change any loss cost multiplier(s) and/or any other pricing features effective with its adoption of DCRB Filing No. 1404, or if the carrier elects not to follow the abbreviated filing procedures set forth above, then the carrier must file an amended (or re-file their existing) Insurer Adoption of DCRB Workers' Compensation Loss Costs form with the Delaware Insurance Department to adopt the revised loss costs on a new and renewal basis on or after December 1, 2014.

Carrier rate filings, regardless of whether or not they are made using the abbreviated filing procedure, must be made within 60 days of the date of the Insurance Department's approval of amended DCRB Filing No. 1404, or by March 29, 2015. Carriers are encouraged to make every effort to expedite the preparation and submission of their adoption filings in order to establish revised rates in the market as soon as reasonably possible.

A copy of the Insurance Department's "FORMS AND RATES BULLETIN 14 INCORPORATED" with forms applicable to these filings is attached for member reference and use.

Consistent with the provisions of Title 18, Chapter 26 of the Delaware Code, if insurer filings do not propose any rate(s) lower than the loss costs (by classification) included in the amended DCRB Filing No. 1404, then proposed insurer rates may be implemented immediately after filing.

The following chart indicates the final approved overall average changes in rating values:

Rating Value(s)	Approved Overall Average Change
Residual Market Rates – Collectible	-9.70%
Residual Market Rates – Manual	-6.93%
Voluntary Market Loss Costs – Collectible	-11.50%
Voluntary Market Loss Costs – Manual (after Surcharge Offset)	-9.42%

The approved residual market rates and voluntary market loss costs share common loss provisions based on the same loss development and trend analysis applied to statewide Delaware experience. The differences between residual market rate changes and voluntary market loss cost changes result from revisions in expense provisions based on recent indications, as compared to currently-approved values, as well as effects of the compromise adjudication of the filing.

The implied loss cost multiplier reflecting expense considerations for current residual market rates is approximately **1.3814**. On a comparable basis, the implied loss cost multiplier for approved residual market rates effective December 1, 2014 is **1.4094** (Note: Because voluntary market loss costs in the approved filing are nominally reduced to offset effects of the ongoing Delaware Insurance Plan surcharge program and due to the effects of the compromise adjudication, calculation of residual market rates from approved December 1, 2014 voluntary market loss costs requires an effective multiplier of approximately 1.4333).

A comparison of current and approved effective December 1, 2014 residual market expense provisions is shown below:

RESIDUAL MARKET RATES		
Expense Loading		
	<u>Current</u> <u>Percentage</u>	<u>Approved</u> <u>December 1, 2014</u> <u>Percentage</u>
LOSS AND LOSS ADJUSTMENT EXPENSE		
Losses	58.54	57.08
Loss Adjustment Expense	11.55	11.63 a
Loss & Loss Adjustment	70.09	68.71
UNDERWRITING EXPENSES		
Commission	5.51	5.97
Other Acquisition	2.74	2.85
General Expenses	3.11	3.44
Premium Discount	8.86	9.15
State Premium Tax	2.00	2.00
Other State Tax	0.36	0.35
Uncollectible Premium	1.00	1.00
Administrative Assessment	2.30	2.24 b
Workers Compensation Fund	4.50	3.50
Deviations	0.00	0.00
Policyholder Dividends	0.00	0.00
Underwriting Profit	-0.47	0.79
Underwriting Expense Total	29.91	31.29

- a As ratio to loss, loss adjustment expense = 0.2037
- b As ratio to loss, administrative assessment = 0.0393

Several components of the filing were approved as filed effective December 1, 2014. In particular, each of the following components of the filing was approved as originally presented:

- Updates to corporate officer payroll minimums and maximums for premium computation purposes
- Continuation of the existing DIP surcharge program
- DCCPAP qualifying wage table **effective June 1, 2015**
- Residual market expense constant
- Residual market minimum premium formula
- Retrospective rating
- Workplace Safety Program
- Merit Rating Plan

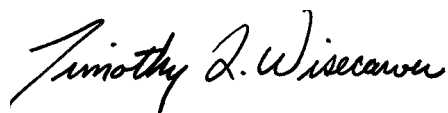
Attached for member reference is a table of rates, loss costs and expected loss factors by classification consistent with the Insurance Commissioner's approval of DCRB Filing No. 1404.

ADDITIONAL REVISIONS TO RATING VALUES

DCRB Filing No. 1404 proposed revision to various rating values in addition to residual market rates and voluntary market loss costs. For ease of reference and to confirm the approved values for those items, they are included in the attachments to this circular. ***Please note that the approved Excess Loss (Pure Premium) Factors, Excess Loss Premium Factors and Small Deductible Program Values approved under amended Filing No. 1404 have been revised from the factors originally proposed.***

Complete Manual pages consistent with the Insurance Commissioner's approval of amended DCRB Filing No. 1404 will be available on the DCRB website (www.dcrb.com) as soon as possible.

Any questions concerning this circular may be addressed to Kenneth Creighton, Chief Actuary, at Extension 4924 or kcreighton@dcrb.com, or to me at Extension 4413 or twisecarver@dcrb.com.



Timothy L. Wisecarver
President

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Attachments
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**STATE OF DELAWARE
DEPARTMENT OF INSURANCE**

FORMS AND RATES BULLETIN 14 INCORPORATED

Submission Date: _____

DCRB Reference Filing No.: _____

Applicable to policies effective on and after: _____

INSURER NAME: _____

INSURER NAIC NO.: _____ **INDICATED MULTIPLIER:** _____

The above insurer hereby declares that it is a member or subscriber of the Delaware Compensation Rating Bureau (“DCRB”). 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 DCRB loss costs approved by the Delaware Insurance Department and the company’s indicated multiplier, as shown above, along with any expense contract, premium discount table, size-of-premium expense table for retrospective rating plans, and minimum premium formula specified in the company’s attached manual exception pages.

The indicated multiplier, along with any expense constant, premium discount table and the minimum premium formula filed, represent a rate level increase _____ or decrease _____ of _____ % and a premium level increase _____ or decrease _____ of _____ %.

The indicated multiplier and the attached exception pages apply only to the DCRB reference filing indicated above. The insurer understands that this will necessitate the submission of a new adoption form and exception pages prior to the effective date of any future loss costs reference filing.

CHECK ALL THAT APPLY:

Manual exception pages attached for:

_____ **Minimum Premium Formula**

_____ **Expense Constant**

_____ **Discount Table**

_____ **Retro Expense Table**

**SUMMARY OF SUPPORTING INFORMATION
WORKERS' COMPENSATION LOSS COST MULTIPLIER**

Insurer: _____ NAIC No.: _____
 DCRB Reference Filing No.: _____
 Effective Date of Multiplier: _____

Development of Expected Loss Ratio (Expressed as a percent of standard premium at company rate):

		AVERAGE
A.	Commission	_____ %
B.	Other Acquisition	_____ %
C.	General Expense	_____ %
D.	Taxes, Licenses and Fees	_____ %
E.	Underwriting Profit & Contingencies	_____ %
F.	Residual Market Costs	_____ %
G.	Premium Discount	_____ %
H.	Insurance Fund Assessment (Second Injury Fund)	_____ %
I.	Dividend Provision (Participating Plan)	_____ %
J.	Other (Explain)	_____ %
K.	Total	_____ %
Expected Loss Ratio (100%-K)		_____ %

Actual Incurred Expense Ratios for three (3) most recent available years. (Commission and General Expense expressed as a percent of written premium at company rates. Other components expressed as percents of standard earned premium at company rates).

	CY _____	CY _____	CY _____	AVERAGE
A.	Commission	_____	_____	_____
B.	Other Acquisition	_____	_____	_____
C.	General Expense	_____	_____	_____
D.	Taxes, Licenses & Fees	_____	_____	_____
E.	Underwriting Profit & Contingencies	_____	_____	_____
F.	Residual Market Costs	_____	_____	_____
G.	Premium Discount	_____	_____	_____
H.	Insurance Fund Assessment	_____	_____	_____
I.	(Second Injury Fund)	_____	_____	_____
J.	Dividend Plan (Participating Plan)	_____	_____	_____
K.	Other (Explain)	_____	_____	_____
L.	Total	_____	_____	_____

Indicated Company Loss Cost Multiplier: _____

Example: Assume Loss and Loss Adjustment Ratio is 0.650.
 Loss Cost Multiplier with no deviation is $1.0/0.650 = 1.5385$.
 Loss Cost Multiplier with 15% downward deviation is $0.85/0.650 = 1.3077$.
 Loss Cost Multiplier with 15% upward deviation is $1.15/0.650 = 1.7692$.

COMPLETED BY: _____ TELEPHONE NO.: _____

NOTE: If an insurer wishes to make any modifications to the loss costs led by DCRB (other than the application of a multiplier to represent the insurer's expenses, profit and contingencies), the resulting rates will be considered to be independent rates, and shall be subject to the 30 day review provision of Title 18 Del. C., Section 2610.

**REVISED LOSS COST MULTIPLIER CALCULATION
SPREADSHEET TO BE INCORPORATED WITH
BULLETIN 14**

Workers' Compensation Insurance
Loss Cost Multiplier
General Instructions

Commissions, premium tax and other state tax provisions are to reflect the ratio of commissions paid, premium tax paid and other state tax paid to company manual premium.

Other acquisition and general expense are to reflect the ratio of other acquisition expense paid and general expense paid to company standard earned premium. Standard earned premium is to reflect adjustment for expense constant premium schedule rating premium.

Dividend Provision (Participating Plan)

Loss cost multipliers for use with participating policies shall contain a provision for policyholder dividends. Policyholder dividends shall reflect the ratio of policyholder dividends paid to company standard earned premium adjusted to reflect expense constant premium and schedule rating premium.

Standard earned premium shall be adjusted reflecting an assumed underlying expense constant equal to the most recently filed expense constant by Delaware Compensation Rating Bureau.

Deviations

Deviation from indicated manual rates shall reflect adjusted company losses compared to Delaware Compensation Rating Bureau to the extent credible. Losses shall be provided separately for indemnity and medical coverages. Losses may be either calendar year losses with all IBNR or policy year incurred losses developed to ultimate settlement. If the company elects to submit policy year loss data, it is required to provide underlying loss development triangles for indemnity and medical coverages separately.

Insurance Fund Assessment (Second Injury Fund)

Insurance Fund Assessment to be used with revised rates will be provided by Delaware Compensation Rating Bureau in its circular letter detailing changes to loss costs and other rating elements.

Administrative Assessment

Administration Assessment will continue to be built into voluntary market loss costs.

Expense Exhibits identified as (I) or (II) shall be completed and underlying supporting data shall accompany the company loss cost multiplier filing. Multipliers shall be filed reflecting most recent expense data, with each Delaware Compensation Rating Bureau loss cost revision. Failure to provide complete expense exhibits and provide underlying support shall result in disapproval of the proposed company filing and company(s) will be filed by reference for residual market rates and rating elements. All reference filings of this type shall remain in effect until the next subsequent Delaware Compensation Rating Bureau revision of loss costs.

NOTES: (1) Commissions, premium tax, license and fees are to be calculated as a percentage of company manual premium. Other acquisition and general administrative expense are to be calculated as a percentage of standard earned premium and standard earned premium is required to be adjusted to reflect schedule rating and expense constant.

(2) Insurers having previously filed and are currently using rating tiers within the same company or have company rate differentials in effect may continue to use them until further notice.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN			HAZ GRP A-G
				EXPECTED LOSS FACTORS TABLE**			
				A-1	A-2	A-3	
005	18.81	26.95	2,000	6.87	8.75	9.68	F
0006	4.30	6.17	1,075	1.57	2.00	2.21	D
007	5.58	7.99	2,000	2.04	2.59	2.87	C
0008	3.24	4.65	1,475	1.18	1.51	1.67	D
009	27.73	39.74	2,000	10.13	12.90	14.28	G
0011	3.82	5.47	1,685	1.39	1.78	1.97	B
0012	4.54	6.51	1,950	1.66	2.11	2.34	D
0013	4.84	6.94	2,000	1.77	2.25	2.49	C
015	17.33	24.84	2,000	6.33	8.06	8.92	E
0016	3.28	4.71	890	1.20	1.53	1.69	C
0034	4.07	5.83	1,035	1.49	1.89	2.10	C
0036	4.41	6.32	1,095	1.61	2.05	2.27	C
055	4.75	6.82	2,000	1.35	1.81	1.87	F
059	5.24	7.51	2,000	1.49	1.99	2.06	E
0083	5.33	7.64	1,265	1.95	2.48	2.75	C
101	4.19	6.01	1,825	1.25	1.54	1.96	E
104	4.59	6.58	1,970	1.37	1.68	2.14	B
105	4.27	6.11	1,850	1.27	1.57	1.99	D
106	7.16	10.25	2,000	2.13	2.63	3.34	C
107	3.27	4.70	1,490	0.98	1.20	1.53	B
108	5.00	7.17	2,000	1.49	1.84	2.34	C
109	5.64	8.09	2,000	1.68	2.07	2.64	C
110	4.09	5.87	1,785	1.22	1.50	1.91	B
111	4.66	6.67	1,990	1.39	1.71	2.18	C
112	12.80	18.34	2,000	3.81	4.70	5.98	C
113	3.01	4.31	1,390	0.90	1.10	1.40	C
114	9.22	13.22	2,000	2.75	3.39	4.31	E
115	2.45	3.51	1,185	0.73	0.90	1.14	D
119	5.48	7.86	2,000	1.63	2.01	2.56	C
130	6.89	9.87	2,000	2.05	2.53	3.22	E
132	1.99	2.86	1,020	0.59	0.73	0.93	C
134	4.48	6.42	1,925	1.34	1.65	2.09	C
135	3.54	5.08	1,585	1.06	1.30	1.66	C
136	3.33	4.76	1,505	0.99	1.22	1.55	C
139	5.42	7.77	2,000	1.62	1.99	2.53	C
141	6.11	8.77	2,000	1.82	2.25	2.86	B
142	2.67	3.83	1,265	0.80	0.98	1.25	C
161	2.73	3.90	1,285	0.81	1.00	1.27	C
163	5.15	7.38	2,000	1.54	1.89	2.41	C
165	6.14	8.81	2,000	1.83	2.26	2.87	B
166	3.75	5.37	1,660	1.12	1.38	1.75	C
185	4.59	6.58	1,970	1.37	1.68	2.14	B
187	3.27	4.70	1,490	0.98	1.20	1.53	B
191	2.73	3.90	1,285	0.81	1.00	1.27	C

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

** Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN			HAZ GRP A-G
				EXPECTED LOSS FACTORS TABLE**			
				A-1	A-2	A-3	
201	5.25	7.52	2,000	1.56	1.93	2.45	D
204	3.20	4.60	1,465	0.96	1.18	1.50	B
205	3.74	5.36	1,655	1.11	1.37	1.75	B
221	3.16	4.52	1,445	0.94	1.16	1.47	C
222	4.77	6.84	2,000	1.42	1.75	2.23	C
225	3.80	5.45	1,680	1.13	1.40	1.78	C
227	3.21	4.61	1,465	0.96	1.18	1.50	C
255	3.18	4.55	1,450	0.95	1.17	1.48	E
257	3.38	4.84	1,525	1.01	1.24	1.58	C
259	2.87	4.11	1,340	0.85	1.05	1.34	C
261	3.94	5.65	1,730	1.17	1.45	1.84	C
263	3.21	4.61	1,465	0.96	1.18	1.50	C
265	3.65	5.23	1,625	1.09	1.34	1.70	C
275	3.16	4.52	1,445	0.94	1.16	1.47	C
276	4.77	6.84	2,000	1.42	1.75	2.23	C
281	2.89	4.15	1,350	0.86	1.06	1.35	B
282	7.46	10.69	2,000	2.22	2.74	3.48	D
285	3.41	4.88	1,535	1.02	1.25	1.59	B
287	3.23	4.64	1,475	0.96	1.19	1.51	B
297	2.89	4.15	1,350	0.86	1.06	1.35	B
301	7.14	10.23	2,000	2.13	2.62	3.34	F
305	7.62	10.93	2,000	2.27	2.80	3.56	D
306	5.18	7.43	2,000	1.54	1.90	2.42	B
309	3.85	5.52	1,700	1.15	1.42	1.80	B
311	4.66	6.67	1,990	1.39	1.71	2.18	C
319	5.37	7.69	2,000	1.60	1.97	2.51	A
323	4.16	5.96	1,810	1.24	1.53	1.94	C
327	4.44	6.37	1,915	1.33	1.63	2.08	C
402	6.27	8.98	2,000	1.87	2.30	2.93	E
403	3.47	4.98	1,560	1.04	1.27	1.62	C
404	4.75	6.82	2,000	1.42	1.75	2.22	E
406	6.64	9.52	2,000	1.98	2.44	3.10	E
407	4.73	6.78	2,000	1.41	1.74	2.21	C
411	9.81	14.06	2,000	2.92	3.60	4.58	E
413	8.43	12.08	2,000	2.51	3.09	3.94	E
415	4.14	5.94	1,805	1.24	1.52	1.94	E
416	4.40	6.31	1,900	1.31	1.62	2.06	C
421	7.34	10.52	2,000	2.19	2.70	3.43	E
425	9.84	14.11	2,000	2.93	3.61	4.60	E
427	4.98	7.14	2,000	1.48	1.83	2.33	E
429	5.97	8.55	2,000	1.78	2.19	2.79	D
431	7.41	10.63	2,000	2.21	2.72	3.46	C
433	4.04	5.79	1,765	1.21	1.48	1.89	C
435	5.79	8.30	2,000	1.73	2.13	2.71	C
441	1.81	2.59	950	0.54	0.66	0.85	C

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

** Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY RISK MANUAL		ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP A-G
	LOSS COSTS	RATE		A-1	A-2	A-3	
442	4.63	6.63	1,980	1.38	1.70	2.16	C
443	4.63	6.63	1,980	1.38	1.70	2.16	C
445	4.63	6.63	1,980	1.38	1.70	2.16	C
446	2.23	3.20	1,105	0.67	0.82	1.04	B
447	6.28	9.01	2,000	1.87	2.31	2.94	E
449	3.25	4.66	1,480	0.97	1.19	1.52	D
451	4.62	6.62	1,980	1.38	1.70	2.16	D
454	7.48	10.72	2,000	2.23	2.75	3.49	C
456	5.04	7.22	2,000	1.50	1.85	2.35	D
457	5.05	7.24	2,000	1.51	1.85	2.36	C
458	2.79	4.00	1,310	0.83	1.02	1.30	B
459	1.58	2.26	865	0.47	0.58	0.74	C
461	4.53	6.50	1,950	1.35	1.66	2.12	D
463	3.28	4.71	1,490	0.98	1.21	1.54	D
464	3.88	5.57	1,710	1.16	1.43	1.81	C
465	4.33	6.20	1,870	1.29	1.59	2.02	D
467	5.03	7.21	2,000	1.50	1.85	2.35	B
471	1.38	1.98	795	0.41	0.51	0.65	B
472	1.72	2.48	920	0.52	0.63	0.81	B
473	2.58	3.71	1,235	0.77	0.95	1.21	B
474	1.57	2.25	865	0.47	0.58	0.73	C
475	3.68	5.28	1,635	1.10	1.35	1.72	D
476	1.71	2.46	915	0.51	0.63	0.80	C
477	2.89	4.14	1,345	0.86	1.06	1.35	C
483	1.75	2.50	930	0.52	0.64	0.81	B
485	1.75	2.50	930	0.52	0.64	0.81	B
486	2.38	3.40	1,155	0.71	0.87	1.11	C
487	1.37	1.97	790	0.41	0.51	0.64	C
488	0.98	1.40	645	0.29	0.36	0.46	B
489	2.21	3.17	1,100	0.66	0.81	1.03	B
491	3.47	4.98	1,560	1.04	1.27	1.62	C
495	4.62	6.62	1,980	1.38	1.70	2.16	D
497	1.72	2.48	920	0.52	0.63	0.81	B
499	3.68	5.28	1,635	1.10	1.35	1.72	D
501	3.75	5.38	1,660	1.12	1.38	1.75	E
502	4.47	6.40	1,920	1.33	1.64	2.09	A
506	3.16	4.53	1,445	0.94	1.16	1.48	C
507	3.25	4.67	1,480	0.97	1.20	1.52	F
509	7.59	10.87	2,000	2.26	2.79	3.55	G
511	7.32	10.49	2,000	2.18	2.69	3.42	E
512	6.52	a 9.35	b 2,000	1.94	2.39	3.05	E
513	4.30	c 6.15	d 1,860	1.28	1.58	2.01	B
535	3.73	5.35	1,655	1.11	1.37	1.74	C

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

** Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

a OD: \$1.30 Supplementary is not subject to experience or retrospective rating. Code as 0175.

b OD: \$1.87 Supplementary is not subject to experience or retrospective rating. Code as 0175.

c OD: \$0.43 Supplementary is not subject to experience or retrospective rating. Code as 0176.

d OD: \$0.62 Supplementary is not subject to experience or retrospective rating. Code as 0176.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN			HAZ GRP A-G
				EXPECTED LOSS FACTORS TABLE**			
				A-1	A-2	A-3	
536	6.54	9.37	2,000	1.95	2.40	3.05	C
544	8.08	11.58	2,000	2.41	2.97	3.77	E
551	1.83	2.62	960	0.55	0.67	0.86	F
553	4.85	6.96	2,000	1.45	1.78	2.27	G
555	1.18	1.69	720	0.35	0.43	0.55	B
563	1.87	2.67	970	0.56	0.69	0.87	C
571	3.37	4.82	1,520	1.00	1.24	1.57	C
573	4.80	6.89	2,000	1.43	1.76	2.25	F
581	2.03	2.92	1,035	0.61	0.75	0.95	E
587	1.87	2.67	970	0.56	0.69	0.87	C
601	11.12	15.93	2,000	2.92	3.90	4.04	G
602	6.68	9.58	2,000	1.77	2.36	2.45	F
603	10.11	14.50	2,000	2.67	3.56	3.69	F
605	8.56	12.27	2,000	2.28	3.05	3.16	E
607	8.49	12.16	2,000	2.28	3.04	3.15	F
608	6.57	9.42	2,000	1.70	2.27	2.35	F
609	5.76	8.25	2,000	1.54	2.06	2.14	F
611	10.85	15.55	2,000	2.89	3.86	4.00	E
615	12.61	18.07	2,000	3.36	4.49	4.65	G
617	6.54	9.37	2,000	1.71	2.29	2.37	F
625	6.93	9.93	2,000	1.85	2.47	2.56	F
643	13.14	18.84	2,000	2.32	3.09	3.21	G
645	7.66	10.99	2,000	1.95	2.60	2.70	F
646	6.23	8.93	2,000	1.69	2.25	2.33	E
647	8.61	12.33	2,000	2.32	3.09	3.21	D
648	5.91	8.47	2,000	1.60	2.14	2.22	E
649	3.71	5.31	1,530	0.97	1.29	1.34	E
651	7.14	10.23	2,000	1.87	2.50	2.59	F
652	9.10	13.04	2,000	2.54	3.39	3.52	F
653	8.71	12.49	2,000	2.28	3.04	3.15	F
654	7.42	10.63	2,000	1.96	2.61	2.71	F
655	16.90	24.23	2,000	4.50	6.00	6.23	G
656	8.61	12.35	2,000	2.30	3.07	3.18	G
657	9.75	13.98	2,000	2.60	3.47	3.60	F
658	10.09	14.46	2,000	2.70	3.61	3.74	F
659	20.36	29.19	2,000	5.50	7.34	7.61	G
660	2.71	3.87	1,275	0.77	1.03	1.07	E
661	3.17	4.55	1,375	0.85	1.13	1.17	E
662	5.05	7.24	2,000	1.44	1.92	1.99	E
663	4.63	6.64	1,900	1.25	1.67	1.74	E
664	5.36	7.68	2,000	1.37	1.83	1.90	E
665	9.81	14.06	2,000	2.65	3.53	3.66	F
666	7.38	10.59	2,000	1.99	2.65	2.75	E
667	2.20	3.16	1,035	0.58	0.78	0.81	F
668	6.23	8.93	2,000	1.68	2.24	2.32	E

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

** Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN			HAZ GRP A-G
				EXPECTED LOSS FACTORS TABLE**			
				A-1	A-2	A-3	
669	7.97	11.43	2,000	2.11	2.82	2.92	F
670	5.78	8.29	2,000	1.65	2.20	2.28	E
673	5.95	8.52	2,000	1.69	2.26	2.34	F
674	5.57	7.99	2,000	1.49	1.98	2.06	E
675	4.66	6.69	1,970	1.31	1.74	1.81	F
676	5.31	7.62	2,000	1.42	1.90	1.97	E
677	4.32	6.20	1,770	1.15	1.54	1.60	G
679	8.95	12.84	2,000	2.55	3.40	3.53	F
681	5.78	8.29	2,000	1.65	2.20	2.28	F
682	19.36	27.75	2,000	5.52	7.36	7.63	E
691	5.76	8.25	2,000	1.54	2.06	2.14	F
693	7.14	10.23	2,000	1.87	2.50	2.59	F
695	3.17	4.55	1,375	0.85	1.13	1.17	E
709	2.16	3.09	1,080	0.61	0.82	0.85	G
716	2.99	4.29	1,385	0.85	1.14	1.18	E
718	3.21	4.61	1,465	0.92	1.22	1.27	E
721	12.60	18.06	2,000	3.76	4.63	5.89	F
744	1.19	1.70	725	0.35	0.44	0.56	D
751	3.21	4.61	1,465	0.96	1.18	1.50	E
752	1.34	1.92	780	0.40	0.49	0.63	G
753	4.82	6.91	2,000	1.44	1.77	2.25	C
755	2.61	3.74	1,245	0.78	0.96	1.22	F
757	2.29	3.28	1,125	0.68	0.84	1.07	E
759	4.91	7.03	2,000	1.46	1.80	2.29	E
801	7.64	10.95	2,000	2.79	3.55	3.93	E
802	7.88	11.30	2,000	2.88	3.67	4.06	E
803	19.71	28.25	2,000	7.20	9.17	10.15	E
804	3.33	4.77	1,505	1.22	1.55	1.71	E
805	6.08	8.72	2,000	2.22	2.83	3.13	E
806	10.17	14.58	2,000	3.72	4.73	5.24	E
807	6.54	9.37	2,000	2.39	3.04	3.36	E
808	8.24	11.81	2,000	3.01	3.83	4.24	E
809	4.43	6.35	1,910	1.62	2.06	2.28	F
811	8.04	11.52	2,000	2.94	3.74	4.14	E
812	7.24	10.38	2,000	2.65	3.37	3.73	F
813	5.22	7.48	2,000	1.91	2.43	2.69	D
814	4.30	6.15	1,860	1.57	2.00	2.21	C
815	2.94	4.21	1,365	1.07	1.37	1.51	D
816	2.49	3.56	1,200	0.91	1.16	1.28	D
817	7.30	10.47	2,000	2.67	3.40	3.76	E
818	1.82	2.60	955	0.66	0.84	0.93	D
819	1.01	1.45	660	0.37	0.47	0.52	D
820	3.08	4.41	1,415	1.12	1.43	1.58	D
821	6.77	9.71	2,000	2.47	3.15	3.49	C
825	3.51	5.04	1,575	1.28	1.64	1.81	C
828	9.02	12.92	2,000	3.29	4.19	4.64	E
855	5.92	8.48	2,000	2.16	2.75	3.05	E
857	6.89	9.87	2,000	2.52	3.20	3.55	E

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

** Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN			HAZ GRP A-G
				EXPECTED LOSS FACTORS TABLE**			
				A-1	A-2	A-3	
858	8.28	11.87	2,000	3.02	3.85	4.26	F
859	8.84	12.67	2,000	3.23	4.11	4.55	E
860	9.44	13.53	2,000	3.45	4.39	4.86	E
862	8.45	12.10	2,000	3.08	3.93	4.35	E
865	2.70	3.86	1,275	0.98	1.25	1.39	C
867	5.22	7.48	2,000	1.91	2.43	2.69	D
871	6.15	8.82	2,000	2.25	2.86	3.17	D
877	3.04	4.35	1,400	1.11	1.41	1.56	B
879	2.93	4.20	1,360	1.07	1.36	1.51	B
880	5.82	8.34	2,000	2.13	2.71	3.00	C
881	3.23	4.64	1,475	1.18	1.51	1.67	B
882	7.30	10.46	2,000	2.67	3.40	3.76	B
883	2.75	3.93	1,290	1.00	1.28	1.41	B
884	0.90	1.28	615	0.33	0.42	0.46	B
885	3.35	4.79	1,510	1.22	1.56	1.72	C
886	2.57	3.69	1,230	0.94	1.20	1.32	B
887	1.31	1.88	770	0.48	0.61	0.68	C
889	0.23	0.33	375	0.08	0.11	0.12	B
890	0.63	0.90	520	0.23	0.29	0.32	C
891	1.28	1.84	760	0.47	0.60	0.66	B
895	0.51	0.72	475	0.18	0.23	0.26	B
896	2.16	3.09	1,080	0.79	1.00	1.11	A
897	2.25	3.22	1,110	0.82	1.05	1.16	A
898	4.23	6.06	1,835	1.54	1.97	2.18	C
899	1.58	2.26	865	0.58	0.73	0.81	C
903	0.45	0.65	455	0.17	0.21	0.23	E
904	1.51	2.16	840	0.55	0.70	0.78	E
905	0.37	0.53	425	0.13	0.17	0.19	D
907	5.10	7.31	2,000	1.86	2.37	2.63	B
910	6.70	9.60	2,000	2.45	3.12	3.45	C
911	4.80	6.88	2,000	1.75	2.23	2.47	B
914	3.04	4.35	1,400	1.11	1.41	1.56	B
915	3.18	4.55	1,450	1.16	1.48	1.64	C
916	2.08	2.97	1,045	0.76	0.97	1.07	B
917	3.70	5.30	1,640	1.35	1.72	1.90	C
918	3.06	4.38	1,405	1.12	1.42	1.57	C
919	2.58	3.70	1,235	0.94	1.20	1.33	B
920	0.72	1.03	555	0.26	0.34	0.37	C
921	6.15	8.82	2,000	2.25	2.86	3.17	D
922	3.48	4.99	1,560	1.27	1.62	1.79	D
923	2.93	4.20	1,360	1.07	1.36	1.51	B
924	3.23	4.64	1,475	1.18	1.51	1.67	B
925	2.40	3.44	1,165	0.88	1.12	1.24	B
926	3.23	4.64	1,475	1.18	1.51	1.67	B
927	1.10	1.58	695	0.40	0.51	0.57	B
928	2.75	3.93	1,290	1.00	1.28	1.41	B

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

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**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB*	ASSIGNED	ASSIGNED	EXPERIENCE RATING PLAN			HAZ
	ADVISORY LOSS COSTS	RISK MANUAL RATE	RISK MIN PREM.	EXPECTED LOSS FACTORS TABLE**			GRP
				A-1	A-2	A-3	A-G
929	4.59	6.57	1,965	1.67	2.13	2.36	C
932	0.84	1.20	595	0.31	0.39	0.43	C
933	5.16	7.40	2,000	1.89	2.40	2.66	C
934	2.91	4.17	1,355	1.06	1.35	1.50	C
935	1.65	2.36	890	0.60	0.77	0.85	C
936	0.48	0.68	465	0.17	0.22	0.24	D
937	10.14	14.53	2,000	3.70	4.72	5.22	D
939	6.21	8.89	2,000	2.27	2.89	3.19	F
940	4.75	6.81	2,000	1.73	2.21	2.44	C
941	2.82	4.04	1,320	1.03	1.31	1.45	C
942	2.61	3.75	1,245	0.96	1.22	1.35	C
943	5.38	7.71	2,000	1.97	2.50	2.77	C
944	3.09	4.42	1,415	1.13	1.43	1.59	B
945	3.06	4.38	1,405	1.12	1.42	1.57	A
946	3.39	4.85	1,525	1.24	1.58	1.74	C
947	6.61	9.47	2,000	2.41	3.07	3.40	B
948	1.72	2.48	920	0.63	0.80	0.89	A
949	0.82	1.17	590	0.30	0.38	0.42	C
951	0.49	0.70	470	0.18	0.23	0.25	E
952	0.64	0.92	525	0.23	0.30	0.33	C
953	0.23	0.33	375	0.08	0.11	0.12	C
954	3.31	4.75	1,500	1.21	1.54	1.71	E
955	0.29	0.41	395	0.11	0.13	0.15	D
956	0.13	0.20	340	0.05	0.06	0.07	D
957	0.59	0.84	505	0.21	0.27	0.30	C
958	1.25	1.80	750	0.46	0.58	0.65	C
959	1.65	2.38	895	0.61	0.77	0.85	C
960	3.65	5.23	1,625	1.33	1.70	1.88	C
961	0.96	1.37	640	0.35	0.45	0.49	C
962	0.13	0.19	340	0.05	0.06	0.07	F
963	0.50	0.71	470	0.18	0.23	0.26	B
964	2.93	4.20	1,360	1.07	1.36	1.51	B
965	0.51	0.72	475	0.18	0.23	0.26	B
966	2.40	3.43	1,165	0.68	0.91	0.94	E
967	0.92	1.32	625	0.34	0.43	0.47	D
968	1.55	2.22	855	0.57	0.72	0.80	B
969	4.78	6.86	2,000	1.75	2.23	2.46	C
970	7.88	11.29	2,000	2.88	3.66	4.06	B
971	3.89	5.58	1,715	1.42	1.81	2.00	C
973	3.14	4.50	1,440	1.15	1.46	1.62	B
974	3.31	4.75	1,500	1.21	1.54	1.71	C
975	1.80	2.57	945	0.66	0.83	0.92	A
976	1.56	2.24	860	0.57	0.73	0.81	B
977	0.55	0.78	490	0.20	0.25	0.28	A
978	2.67	3.83	1,265	0.98	1.24	1.38	C

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**MANUAL RATES, LOSS COSTS AND EXPECTED LOSS FACTORS
FOR DELAWARE COMPENSATION INSURANCE**

Amended Effective December 1, 2014 on New and Renewal Business

CODE NO	DCRB* ADVISORY LOSS COSTS	ASSIGNED RISK MANUAL RATE	ASSIGNED RISK MIN PREM.	EXPERIENCE RATING PLAN EXPECTED LOSS FACTORS TABLE**			HAZ GRP A-G
				A-1	A-2	A-3	
979	4.24	6.08	1,840	1.55	1.97	2.19	C
980	3.99	5.72	1,750	1.46	1.86	2.06	E
981	2.95	4.23	1,370	1.08	1.37	1.52	A
983	8.01	11.49	2,000	2.93	3.73	4.13	C
984	0.29	0.41	395	0.11	0.13	0.15	C
985	4.46	6.39	1,920	1.63	2.07	2.30	E
986	1.79	2.56	945	0.65	0.83	0.92	C
988	0.25	0.35	380	0.09	0.11	0.13	C
991	7.88	11.29	2,000	2.88	3.66	4.06	A
992	4.43	6.35	1,910	1.62	2.06	2.28	E
995	8.30	11.91	2,000	3.03	3.86	4.28	F
997	1.06	1.53	680	0.39	0.50	0.55	D
999	5.11	7.32	2,000	1.87	2.38	2.63	D
4771	3.27	4.69	1,785	0.98	1.20	1.53	G
0771	0.82	1.17					G
4777	8.04	11.52	2,000	2.94	3.74	4.14	E
7405	1.90	2.73	1,220	0.69	0.88	0.98	E
7445	0.63	0.91					G
7413	1.06	1.52	760	0.39	0.49	0.55	G
7453	0.23	0.32					G
7421	1.28	1.84	760	0.47	0.60	0.66	F
7424	3.04	4.35	1,400	1.11	1.41	1.56	G
7428	1.91	2.74	990	0.70	0.89	0.98	E
9108	72.05	103.27					A
9740	0.01	0.02					
9741	0.01	0.01					
Per capita							
0908	233.22	334.31	624	85.20	108.51	120.10	C
0909	91.10	130.58	421	33.28	42.39	46.91	B
0912	327.28	469.12	759	119.56	152.27	168.53	B
0913	510.27	731.41	1,021	186.41	237.41	262.76	C
A rated							
9985	A	A	A	A	A	A	

* Loss, loss adjustment expense and administrative fund assessment provision for use in conjunction with individual carrier expense provisions in writing non-assigned risk business.

** Table A-1 applies to the most current policy year, Table A-2 to the first prior policy year, and Table A-3 to the second prior policy year.

Associated classes- both codes must be applied. The second code is not subject to experience rating and applies to the full payroll of the associated class.

**DELAWARE COMPENSATION RATING BUREAU, INC.
MISCELLANEOUS RATING VALUES
EFFECTIVE DECEMBER 1, 2014**

Residual Market Expense Constant

The expense constant is unchanged at \$290.

Corporate Officer Payrolls

The minimum individual payroll for an executive officer is increasing to \$700 per week.

The maximum individual payroll for an executive officer is unchanged at \$2,500 per week.

Retrospective Rating Values (Other Than USL&HW Coverages)

Residual Market Tax Multiplier

The residual market tax multiplier is 1.1530

Optional Loss Development Factors (unlimited basis)

First Adjustment	0.6537
Second Adjustment	0.5160
Third Adjustment	0.4117

State & Hazard Group Relativities

Hazard Group	A	1.627
	B	1.178
	C	0.980
	D	0.957
	E	0.750
	F	0.644
	G	0.537

Small Deductible Program Loss Elimination Ratios and Premium Credits

<u>Deductible Level</u>	<u>Loss Elimination Ratio</u>	<u>Premium Credit</u>
\$500	0.014	0.011
1,000	0.026	0.020
1,500	0.036	0.028
2,000	0.044	0.034
2,500	0.051	0.039
3,000	0.058	0.044
3,500	0.063	0.049
4,000	0.068	0.053
4,500	0.073	0.056
5,000	0.078	0.060

**DELAWARE COMPENSATION RATING BUREAU, INC.
MISCELLANEOUS RATING VALUES
EFFECTIVE DECEMBER 1, 2014**

Delaware Construction Classification Premium Adjustment Program: EFFECTIVE JUNE 1, 2015

<u>Average Hourly Wage</u>		<u>DCCPAP Credit</u>
\$18.74	or less	0%
\$18.75	\$19.15	5%
\$19.16	\$19.60	6%
\$19.61	\$20.05	7%
\$20.06	\$20.50	8%
\$20.51	\$21.00	9%
\$21.01	\$21.50	10%
\$21.51	\$22.00	11%
\$22.01	\$22.55	12%
\$22.56	\$23.10	13%
\$23.11	\$23.65	14%
\$23.66	\$24.20	15%
\$24.21	\$24.80	16%
\$24.81	\$25.40	17%
\$25.41	\$26.05	18%
\$26.06	\$26.70	19%
\$26.71	\$27.40	20%
\$27.41	\$28.10	21%
\$28.11	\$28.80	22%
\$28.81	\$29.55	23%
\$29.56	\$30.30	24%
Over \$30.30		25%

DELAWARE
Approved Effective: 12/1/2014

Excess Loss Pure Premium Factors

Loss Limit	Hazard Group						
	A	B	C	D	E	F	G
\$10,000	0.695	0.721	0.723	0.739	0.752	0.767	0.775
\$15,000	0.667	0.698	0.702	0.719	0.735	0.754	0.765
\$20,000	0.645	0.679	0.682	0.704	0.721	0.742	0.755
\$25,000	0.624	0.661	0.665	0.689	0.708	0.732	0.747
\$30,000	0.608	0.645	0.651	0.675	0.696	0.722	0.738
\$35,000	0.591	0.632	0.637	0.663	0.685	0.712	0.730
\$40,000	0.578	0.620	0.626	0.651	0.674	0.703	0.722
\$50,000	0.553	0.597	0.604	0.631	0.656	0.686	0.707
\$75,000	0.505	0.552	0.560	0.591	0.617	0.651	0.676
\$100,000	0.466	0.516	0.525	0.557	0.587	0.624	0.649
\$125,000	0.433	0.485	0.496	0.529	0.558	0.596	0.627
\$150,000	0.406	0.459	0.470	0.504	0.535	0.575	0.604
\$175,000	0.381	0.435	0.447	0.482	0.514	0.555	0.586
\$200,000	0.357	0.412	0.426	0.461	0.494	0.536	0.570
\$225,000	0.335	0.392	0.406	0.443	0.476	0.519	0.554
\$250,000	0.313	0.373	0.388	0.424	0.460	0.504	0.538
\$275,000	0.293	0.354	0.370	0.409	0.444	0.489	0.525
\$300,000	0.275	0.336	0.353	0.393	0.430	0.475	0.511
\$325,000	0.258	0.319	0.336	0.378	0.415	0.461	0.498
\$350,000	0.242	0.303	0.321	0.362	0.401	0.448	0.486
\$375,000	0.225	0.288	0.306	0.347	0.387	0.436	0.474
\$400,000	0.211	0.273	0.291	0.333	0.374	0.423	0.463
\$425,000	0.198	0.259	0.278	0.320	0.361	0.411	0.451
\$450,000	0.184	0.246	0.264	0.307	0.349	0.399	0.440
\$475,000	0.172	0.234	0.252	0.295	0.336	0.388	0.430
\$500,000	0.161	0.221	0.240	0.282	0.324	0.376	0.419
\$600,000	0.124	0.183	0.199	0.240	0.283	0.334	0.379
\$700,000	0.098	0.152	0.165	0.206	0.246	0.299	0.344
\$800,000	0.077	0.128	0.140	0.177	0.217	0.267	0.312
\$900,000	0.061	0.110	0.118	0.153	0.190	0.240	0.284
\$1,000,000	0.0502	0.0949	0.1023	0.1342	0.1692	0.2164	0.2598
\$2,000,000	0.0280	0.0512	0.0558	0.0743	0.0946	0.1274	0.1594
\$3,000,000	0.0202	0.0358	0.0391	0.0521	0.0664	0.0912	0.1166
\$4,000,000	0.0164	0.0279	0.0305	0.0404	0.0515	0.0714	0.0919
\$5,000,000	0.0134	0.0233	0.0254	0.0331	0.0422	0.0585	0.0758
\$6,000,000	0.0110	0.0200	0.0217	0.0283	0.0359	0.0496	0.0644
\$7,000,000	0.0093	0.0178	0.0190	0.0249	0.0313	0.0431	0.0562
\$8,000,000	0.0080	0.0159	0.0172	0.0222	0.0278	0.0382	0.0496
\$9,000,000	0.0069	0.0141	0.0156	0.0200	0.0249	0.0342	0.0445
\$10,000,000	0.0062	0.0125	0.0140	0.0183	0.0231	0.0310	0.0404

DELAWARE
Approved Effective: 12/1/2014

Excess Loss Pure Premium Factors including ALAE

Loss Limit	Hazard Group						
	A	B	C	D	E	F	G
\$10,000	0.793	0.822	0.824	0.842	0.857	0.875	0.884
\$15,000	0.761	0.796	0.800	0.820	0.838	0.860	0.872
\$20,000	0.736	0.775	0.778	0.803	0.822	0.846	0.861
\$25,000	0.712	0.754	0.759	0.786	0.808	0.835	0.851
\$30,000	0.693	0.735	0.742	0.770	0.794	0.823	0.842
\$35,000	0.674	0.720	0.727	0.756	0.781	0.812	0.833
\$40,000	0.659	0.707	0.714	0.742	0.769	0.801	0.823
\$50,000	0.630	0.681	0.688	0.719	0.748	0.782	0.807
\$75,000	0.575	0.629	0.639	0.674	0.704	0.742	0.771
\$100,000	0.531	0.588	0.598	0.635	0.669	0.711	0.741
\$125,000	0.494	0.553	0.565	0.603	0.637	0.680	0.715
\$150,000	0.462	0.523	0.536	0.574	0.610	0.655	0.689
\$175,000	0.434	0.496	0.509	0.550	0.586	0.633	0.668
\$200,000	0.406	0.470	0.485	0.526	0.563	0.611	0.650
\$225,000	0.382	0.447	0.462	0.505	0.543	0.592	0.631
\$250,000	0.357	0.425	0.442	0.483	0.525	0.575	0.613
\$275,000	0.334	0.404	0.422	0.466	0.506	0.558	0.598
\$300,000	0.313	0.382	0.402	0.448	0.490	0.541	0.583
\$325,000	0.293	0.363	0.383	0.431	0.473	0.526	0.568
\$350,000	0.275	0.345	0.366	0.413	0.457	0.511	0.554
\$375,000	0.256	0.328	0.348	0.397	0.441	0.497	0.540
\$400,000	0.240	0.311	0.331	0.380	0.426	0.482	0.528
\$425,000	0.225	0.295	0.316	0.365	0.412	0.469	0.515
\$450,000	0.210	0.280	0.301	0.350	0.397	0.455	0.503
\$475,000	0.196	0.266	0.287	0.336	0.383	0.442	0.490
\$500,000	0.183	0.252	0.273	0.321	0.370	0.428	0.478
\$600,000	0.141	0.208	0.226	0.273	0.322	0.381	0.432
\$700,000	0.111	0.173	0.188	0.235	0.280	0.340	0.392
\$800,000	0.088	0.145	0.159	0.202	0.247	0.304	0.355
\$900,000	0.068	0.124	0.134	0.174	0.216	0.273	0.324
\$1,000,000	0.0566	0.1077	0.1161	0.1525	0.1924	0.2463	0.2958
\$2,000,000	0.0313	0.0577	0.0630	0.0841	0.1073	0.1448	0.1812
\$3,000,000	0.0224	0.0402	0.0439	0.0587	0.0751	0.1034	0.1324
\$4,000,000	0.0180	0.0312	0.0341	0.0454	0.0581	0.0808	0.1042
\$5,000,000	0.0152	0.0258	0.0282	0.0370	0.0475	0.0661	0.0858
\$6,000,000	0.0126	0.0222	0.0240	0.0315	0.0403	0.0560	0.0728
\$7,000,000	0.0107	0.0196	0.0210	0.0277	0.0350	0.0484	0.0635
\$8,000,000	0.0092	0.0174	0.0190	0.0247	0.0311	0.0429	0.0559
\$9,000,000	0.0078	0.0157	0.0172	0.0221	0.0277	0.0383	0.0501
\$10,000,000	0.0071	0.0143	0.0157	0.0202	0.0257	0.0347	0.0454

DELAWARE
Approved Effective: 12/1/2014

Excess Loss Premium Factors

Loss Limit	Hazard Group						
	A	B	C	D	E	F	G
\$10,000	0.495	0.513	0.514	0.526	0.535	0.546	0.551
\$15,000	0.475	0.496	0.499	0.512	0.523	0.536	0.544
\$20,000	0.459	0.483	0.486	0.501	0.513	0.528	0.537
\$25,000	0.445	0.471	0.474	0.490	0.504	0.521	0.531
\$30,000	0.433	0.459	0.463	0.480	0.495	0.514	0.525
\$35,000	0.421	0.450	0.454	0.472	0.487	0.507	0.519
\$40,000	0.411	0.441	0.446	0.463	0.480	0.500	0.514
\$50,000	0.394	0.425	0.430	0.449	0.467	0.488	0.503
\$75,000	0.359	0.393	0.399	0.421	0.439	0.463	0.481
\$100,000	0.332	0.367	0.374	0.397	0.418	0.444	0.462
\$125,000	0.309	0.346	0.353	0.377	0.398	0.425	0.446
\$150,000	0.289	0.327	0.335	0.359	0.381	0.409	0.430
\$175,000	0.272	0.310	0.318	0.343	0.366	0.395	0.417
\$200,000	0.254	0.294	0.304	0.329	0.352	0.382	0.406
\$225,000	0.239	0.280	0.289	0.316	0.339	0.370	0.394
\$250,000	0.224	0.266	0.277	0.302	0.328	0.359	0.383
\$275,000	0.209	0.253	0.264	0.291	0.317	0.349	0.374
\$300,000	0.196	0.240	0.252	0.280	0.306	0.338	0.364
\$325,000	0.184	0.228	0.240	0.269	0.296	0.329	0.355
\$350,000	0.173	0.216	0.229	0.258	0.286	0.320	0.346
\$375,000	0.161	0.206	0.218	0.248	0.276	0.311	0.338
\$400,000	0.151	0.195	0.208	0.238	0.267	0.302	0.330
\$425,000	0.142	0.185	0.199	0.228	0.258	0.293	0.322
\$450,000	0.132	0.176	0.189	0.219	0.249	0.285	0.314
\$475,000	0.124	0.168	0.180	0.210	0.240	0.276	0.306
\$500,000	0.116	0.159	0.172	0.201	0.232	0.268	0.298
\$600,000	0.089	0.131	0.143	0.172	0.202	0.238	0.270
\$700,000	0.071	0.109	0.119	0.148	0.176	0.213	0.245
\$800,000	0.056	0.092	0.101	0.127	0.155	0.191	0.222
\$900,000	0.044	0.079	0.085	0.110	0.136	0.172	0.203
\$1,000,000	0.0371	0.0688	0.0741	0.0967	0.1215	0.1550	0.1858
\$2,000,000	0.0213	0.0378	0.0411	0.0541	0.0686	0.0919	0.1145
\$3,000,000	0.0158	0.0269	0.0292	0.0384	0.0486	0.0662	0.0842
\$4,000,000	0.0122	0.0213	0.0231	0.0301	0.0380	0.0521	0.0666
\$5,000,000	0.0095	0.0180	0.0194	0.0249	0.0314	0.0430	0.0552
\$6,000,000	0.0078	0.0157	0.0168	0.0215	0.0269	0.0367	0.0471
\$7,000,000	0.0066	0.0136	0.0149	0.0191	0.0237	0.0320	0.0414
\$8,000,000	0.0057	0.0116	0.0131	0.0172	0.0212	0.0286	0.0366
\$9,000,000	0.0050	0.0101	0.0114	0.0156	0.0191	0.0257	0.0330
\$10,000,000	0.0044	0.0089	0.0099	0.0141	0.0178	0.0234	0.0301

DELAWARE
Approved Effective: 12/1/2014

Excess Loss Premium Factors including ALAE

Loss Limit	Hazard Group						
	A	B	C	D	E	F	G
\$10,000	0.564	0.585	0.586	0.599	0.610	0.622	0.629
\$15,000	0.541	0.566	0.569	0.584	0.596	0.612	0.621
\$20,000	0.524	0.551	0.554	0.571	0.585	0.602	0.613
\$25,000	0.507	0.537	0.540	0.559	0.574	0.594	0.606
\$30,000	0.493	0.523	0.528	0.548	0.565	0.585	0.599
\$35,000	0.480	0.513	0.517	0.538	0.556	0.578	0.592
\$40,000	0.469	0.503	0.508	0.528	0.547	0.570	0.585
\$50,000	0.449	0.485	0.490	0.512	0.532	0.556	0.574
\$75,000	0.410	0.448	0.455	0.479	0.501	0.528	0.548
\$100,000	0.378	0.419	0.426	0.452	0.476	0.506	0.527
\$125,000	0.352	0.394	0.402	0.429	0.453	0.484	0.509
\$150,000	0.329	0.372	0.382	0.409	0.434	0.466	0.490
\$175,000	0.309	0.354	0.363	0.391	0.417	0.451	0.475
\$200,000	0.290	0.335	0.346	0.374	0.401	0.435	0.462
\$225,000	0.272	0.318	0.329	0.359	0.387	0.423	0.449
\$250,000	0.255	0.303	0.315	0.344	0.374	0.410	0.436
\$275,000	0.238	0.288	0.301	0.332	0.361	0.398	0.426
\$300,000	0.224	0.273	0.287	0.319	0.349	0.385	0.415
\$325,000	0.210	0.259	0.273	0.307	0.337	0.374	0.405
\$350,000	0.197	0.246	0.261	0.294	0.326	0.364	0.395
\$375,000	0.183	0.234	0.249	0.282	0.314	0.354	0.385
\$400,000	0.172	0.222	0.238	0.271	0.304	0.344	0.376
\$425,000	0.161	0.211	0.226	0.260	0.293	0.334	0.367
\$450,000	0.150	0.200	0.215	0.250	0.283	0.324	0.358
\$475,000	0.141	0.190	0.205	0.239	0.273	0.315	0.349
\$500,000	0.131	0.180	0.195	0.229	0.264	0.305	0.340
\$600,000	0.101	0.149	0.162	0.195	0.230	0.271	0.308
\$700,000	0.080	0.124	0.135	0.168	0.200	0.243	0.279
\$800,000	0.064	0.105	0.114	0.144	0.176	0.217	0.253
\$900,000	0.050	0.090	0.097	0.125	0.155	0.195	0.231
\$1,000,000	0.0416	0.0778	0.0838	0.1096	0.1380	0.1762	0.2113
\$2,000,000	0.0236	0.0424	0.0462	0.0611	0.0776	0.1042	0.1300
\$3,000,000	0.0173	0.0300	0.0326	0.0431	0.0547	0.0748	0.0954
\$4,000,000	0.0140	0.0236	0.0257	0.0337	0.0427	0.0587	0.0754
\$5,000,000	0.0108	0.0198	0.0215	0.0277	0.0352	0.0483	0.0623
\$6,000,000	0.0089	0.0172	0.0185	0.0238	0.0300	0.0412	0.0531
\$7,000,000	0.0075	0.0152	0.0163	0.0211	0.0263	0.0358	0.0465
\$8,000,000	0.0065	0.0132	0.0146	0.0189	0.0235	0.0319	0.0411
\$9,000,000	0.0056	0.0114	0.0130	0.0171	0.0211	0.0286	0.0370
\$10,000,000	0.0050	0.0101	0.0114	0.0157	0.0197	0.0260	0.0337