

# Summary of Changes Effective March 1, 2018:

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## **Filing Guidelines for PPV Full Filing:**

1. Page 1: clarify that PPV fleets are also exempt from filings
2. Page 13: remove the reference that “fixed expense may be allocated to basic coverage” to be consistent with 4.f.1
3. Page 22: clarify that rating profiles are on an un-capped basis

## **Filing Guidelines for PPV Simplified Filing:**

1. Page 1: clarify that underwriting manual updates with eligibility rule changes will go through simplified filings
2. Page 1: clarify that PPV fleets are also exempt from filings
3. Page 4: clarify that rating profiles are on an un-capped basis

## **Filing Guidelines for Non-PPV Full Filing:**

1. Page 1: clarify that if an insurer has not submitted a FULL filing in the last 3 years and a rate change of 10% or more is proposed, then a full filing is required.
2. Page 13: remove the reference that “fixed expense may be allocated to basic coverage” to be consistent with 4.f.1
3. Page 22: clarify that rating profiles are on an un-capped basis

## **Filing Guidelines for non-PPV Simplified Filing:**

1. Page 1: clarify that if an insurer has not submitted a FULL filing in the last 3 years and a rate change of 10% or more is proposed, then a full filing is required.
2. Page 4: clarify that rating profiles are on an un-capped basis

## **PPV and Non-PPV Full Filing Appendix A:**

1. Tab A3: add a column to show the latest completed accident year loss ratio (developed but not trended)
2. Tab A6 and A9: clarify dislocation requirements

## **PPV and Non-PPV Simplified Filing Appendix A:**

1. Tab A6 and A9: clarify dislocation requirements

**Q&A Updates:**

1. Question 12 was added to clarify that the 10% limit on differential increase and 20% limit on dislocation still apply when insurers are taking more than 3% PPV simplified filing increase. The subsequent questions were renumbered.
2. Question 15 was modified to be consistent with the revised Non-PPV filing guideline.

See [Frequently Asked Questions web page](#) for all FAQs.