



**NOTICE OF EFFECTIVE FILING**

**TO:** ISO  
**DATE:** March 3, 2020  
**FROM:** Angel Manus  
**PHONE:** 770-671-2353

**PROGRAM:** HIB COMMERCIAL AUTOMOBILE

**HIB CIRCULAR:** 190032; 190029; 170035; 170059; 160059; 160058

**HIB REFERENCE FILING NUMBER:** CA-2017-BRLA1; IALL1; CA-2016-BRLA1; CA-2017-OPIP1; CA-2015-IALL1; CA-2016-OADFR

**CONTENTS:** HIB's Commercial Auto Form, Rule, Loss Cost Revisions

**INCLUDED**(if applicable) ☒ Company Exception Page\_LCM ☒ Company Exception Page\_ELR

**STATE:** Hawaii

**EFFECTIVE DATE:** June 29, 2020

**MODIFICATIONS:** None

**COMMENTS:** None

**COMPANY(IES) EFFECTIVE:**

- ☐ AIU INSURANCE COMPANY
- ☒ AMERICAN HOME ASSURANCE COMPANY
- ☐ AIG ASSURANCE COMPANY
- ☐ AIG PROPERTY CASUALTY COMPANY
- ☐ COMMERCE AND INDUSTRY INSURANCE COMPANY
- ☐ GRANITE STATE INSURANCE COMPANY
- ☐ ILLINOIS NATIONAL INSURANCE CO.
- ☒ NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.
- ☒ NEW HAMPSHIRE INSURANCE COMPANY
- ☒ THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

**FILING NUMBER:** ISO-HI-19-CA-01

AIG Property Casualty  
State Filings Division  
12 Metrotech Center, 27<sup>th</sup> Floor  
Brooklyn, NY 11201

## Disposition for AGNY-132197729

<b>SERFF Tracking Number:</b>	AGNY-132197729	<b>State:</b>	Hawaii
<b>First Filing Company:</b>	American Home Assurance Company ,...	<b>State Tracking Number:</b>	244003
<b>Company Tracking Number:</b>	ISO-HI-19-CA-01		
<b>TOI:</b>	20.0 Commercial Auto	<b>Sub-TOI:</b>	20.0000 Commercial Auto Combinations
<b>Product Name:</b>	HIB Commercial Auto Form, Loss Cost, Rule Revision-019-000-602;165-000-602;229-000-010;130-000-602		
<b>Project Name:</b>	HIB Commercial Auto Form, Loss Cost, Rule Revision		

**Disposition Date:**

03/02/2020

**Effective Date (New):**

06/29/2020

**Effective Date (Renewal):** Effective Date (New) changed from 04/27/2020 to 06/29/2020 and Effective Date (Renewal)

06/29/2020

changed from

04/27/2020 to 06/29/2020 by Oda, Rae on 04/16/2020.

**Status:** \*

Approved

**Comments:**

Company Rate Information							
<b>Company Name:</b>	<b>Overall % Indicated Change:</b>	<b>Overall % Rate Impact:</b>	<b>Written Premium Change for this Program:</b>	<b>Number of Policy Holders Affected for this Program:</b>	<b>Written Premium for this Program:</b>	<b>Maximum % Change (where required):</b>	<b>Minimum % Change (where required):</b>
American Home Assurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
<b>Change Period for Approved Rate:</b>							
National Union Fire Insurance Company of Pittsburgh, Pa.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
<b>Change Period for Approved Rate:</b>							
New Hampshire Insurance Company	27.200 %	20.000 %	\$ 50766	141	\$ 254291	0.000 %	0.000 %
<b>Change Period for Approved Rate:</b>							
The Insurance Company of the State of Pennsylvania	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
<b>Change Period for Approved Rate:</b>							

## Overall Rate Information for Multiple Company Filings

<b>Overall Percentage Rate Indicated For This Filing:</b>	27.200 %
<b>Overall Percentage Rate Impact For This Filing:</b>	20.000 %
<b>Effect of Rate Filing-Written Premium Change For This Program:</b>	\$ 50,766
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	141

## Schedule Items

Item Type	Item Name	Item Status	Public Access
Supporting Document	Reference Filing Adoption		Yes
<i>Supporting Document</i>	<i>Reference Filing Adoption</i>		Yes
Supporting Document	Third Party Authorization		Yes
Supporting Document	Forms Certification		Yes
Supporting Document	Explanatory Memo & Rate Support		Yes
<i>Supporting Document</i>	<i>Explanatory Memo &amp; Rate Support</i>		Yes
Rate	Hawaii Company Exception Page_LCM, [No rule/page number]		Yes
Rate	Hawaii Company Exception Page_ELR, [No rule/page number]		Yes
<i>Rate</i>	<i>Hawaii Company Exception Page_LCM, [No rule/page number]</i>		Yes



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This Filing has been marked as public access.

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**Product Name:** HIB Commercial Auto Form, Loss Cost, Rule  
Revision-019-000-602;165-000-602;229-000-010;130-000-602

**TOI:** 20.0 Commercial Auto

**Sub-TOI:** 20.0000 Commercial Auto Combinations

**Filing Type:** Form/Rate/Rule

**Effective Date Requested (New):** 04/27/2020

**Effective Date Requested (Renewal):** 04/27/2020

**SERFF Tr Num:** AGNY-132197729

**State Tr Num:** 244003

**Co Tr Num:** ISO-HI-19-CA-01

**Date Submitted:** 12/20/2019

**Authors:** Angel Manus, Milinda Tanner

**SERFF Status:** Closed-Approved

**State Status:**

**Co Status:**

**Disposition Date:** 03/02/2020

[General Information](#) | [Form Schedule](#) | [Rate/Rule Schedule](#) | [Supporting Documentation](#) | [Companies and Contact](#) | [Filing Fees](#) | [Filing Correspondence](#)

The rate schedule has been marked public access.

**Add Rate Data?** Rate Data is Required

<b>Filing Method:</b>	Prior Approval
<b>Rate Change Type:</b>	Increase
<b>Overall Percentage of Last Rate Revision:</b>	-13.900 %
<b>Effective Date of Last Rate Revision:</b>	10/01/2016
<b>Filing Method of Last Filing:</b>	Prior Approval
<b>SERFF Tracking Number of Last Filing:</b>	

#### Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum (where r
American Home Assurance Company	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %	0.000 %
National Union Fire Insurance Company of Pittsburgh, Pa.	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %	0.000 %
New Hampshire Insurance Company	27.200 %	20.000 %	\$50,766.00	141	\$254,291.00	0.000 %	0.000 %
The Insurance Company of the State of Pennsylvania	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %	0.000 %

#### Overall Rate Information for Multiple Company Filings

<b>Overall Percentage Rate Indicated For This Filing:</b>	<b>27.200 %</b>
<b>Overall Percentage Rate Impact For This Filing:</b>	<b>20.000 %</b>
<b>Effect of Rate Filing-Written Premium Change For This Program:</b>	<b>\$ 50,766</b>
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	<b>141</b>

Item No.	Schedule Item Status	Exhibit Name: *	Rule# or Page #:	Rate Action: *	Previous State Filing Number:	Attach Document:	Submitted
1		Hawaii Company Exception Page_LCM		New		<a href="#">Hawaii Company Exception Page_LCM.pdf</a>	Date Subr 12/20/2019 By: Angel
2		Hawaii Company Exception Page_ELR		New		<a href="#">Hawaii Company Exception Page_ELR 1.30.20.pdf (Updated)</a> ▼ Show All Files	Date Subr 02/04/2020 By: Angel
<b>Previous Version</b>							
		Hawaii Company Exception Page_LCM		New		<a href="#">Hawaii Company Exception Page_ELR.pdf</a>	Date Sub 12/20/2019 By: Angel

**Icon Legend:** - Draft Schedule Item - Open Objection

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