



**NOTICE OF EFFECTIVE FILING**

**TO:** ISO Distribution List  
**DATE:** March 3, 2021  
**FROM:** Milinda Tanner  
**PHONE:** 770-870-2420

**PROGRAM:** ISO COMMERCIAL AUTOMOBILE

**ISO CIRCULAR:** LI-CA-2020-243; LI-CA-2020-240; LI-CA-2020-239

**ISO REFERENCE FILING NUMBER:** CA-2019-OFR19; CA-2019-RLC19; CA-2019-RRU19

**CONTENTS:** Delay Adoption of ISO's 2020 Multi-State Loss Cost, Rule and Form Revisions

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

**STATE:** Missouri

**EFFECTIVE DATE:** June 1, 2021

**MODIFICATIONS:** None

**COMMENTS:** Revisions do not apply to Glatfelter Programs

**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-CW-20-CA-01

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

## Disposition for AGNY-132528317

## Filing at a Glance

<b>State:</b> Missouri	<b>SERFF Tracking Number:</b> AGNY-132528317
<b>TOI:</b> 20.0 Commercial Auto	<b>State Tracking Number:</b> 47
<b>Sub-TOI:</b> 20.0000 Commercial Auto Combinations	<b>Company Tracking Number:</b> ISO-CW-20-CA-01
<b>Filing Type:</b> Form/Rate/Rule	<b>Product Name:</b> ISO's Delay Adoption 2020 Multi-State Loss Cost. Rule and Form Revisions 165-000- 602:019-000-602; 229-000-010; 102-000- 602; 107-000-602; 130-000-602
<b>First Filing Company:</b> American Home Assurance Company ,...	<b>Project Name:</b> ISO's Delay Adoption 2020 Multi-State Loss Cost, Rule and Form Revision
	<b>Destruction Date:</b>

**Disposition Date:**

03/03/2021

**Effective Date (New):**

06/01/2021

**Effective Date (Renewal):**

06/01/2021

**Status:** \*

REVIEWED

**Comments:**

Thank you for your filing submission. At this point in time, I do not have any further questions and am concluding my review of this filing. Please note that although this filing has reached final review with the Department it does not mean the Department is precluded from initiating future inquiries or from taking further administrative or legal action. Ultimately, the insurance company is responsible for ensuring it is in compliance with Missouri insurance law through its administration of insurance policies and handling of claims.

## 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 %

**Change Period for Approved Rate:**

AIU Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

Commerce and Industry Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

Granite State Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

Illinois National Insurance Co.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

National Union Fire Insurance Company of Pittsburgh, Pa.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

New Hampshire Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

The Insurance Company of the State of Pennsylvania	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

AIG Assurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

AIG Property Casualty Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved****Rate:**

## Overall Rate Information for Multiple Company Filings

<b>Overall Percentage Rate Indicated For This Filing:</b>	0.000 %
<b>Overall Percentage Rate Impact For This Filing:</b>	0.000 %
<b>Effect of Rate Filing-Written Premium Change For This Program:</b>	\$ 0
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	0

## Schedule Items

<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
Supporting Document	Filing Memorandum	REVIEWED	Yes
Supporting Document	Exhibit A, B, & C (20 CSR 500-4.200)	REVIEWED	Yes
<i>Supporting Document</i>	<i>Exhibit A, B, &amp; C (20 CSR 500-4.200)</i>	<i>SUPERSEDED</i>	<i>Yes</i>
<i>Supporting Document</i>	<i>Exhibit A, B, &amp; C (20 CSR 500-4.200)</i>	<i>SUPERSEDED</i>	<i>Yes</i>
Supporting Document	Actuarial Justification	REVIEWED	Yes