

**Bureau Filing No. 0502
Attachment**

PROPOSED REVISIONS

DELAWARE STATISTICAL PLAN MANUAL

1. Section II – Reporting Requirements
Section IV – Codes
Section VI – Examples
2. Illustration 22
3. Premium Algorithm

Delaware Statistical Plan Manual Changes

Proposed Effective January 1, 2006

SECTION II - REPORTING REQUIREMENTS

B. Exposure Information

5. Exposure-Other Than Payroll

For a number of classifications the Manual provides bases of exposure other than payroll. The following method of reporting shall be used in such instances:

a. and b remain unchanged.

Note: Premium for [the]Code 9740, Terrorism Risk Insurance Act of 2002 – Certified Losses, and Code 9741, Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents, does not apply to these classifications.

9. Miscellaneous Statistical Codes

c. Premium Not Subject Report.

(1) through (3) remain the same.

(4) Terrorism Risk Insurance Act of 2002 – Certified Losses - Code 9740

Premium [debit earned under]charge for the Terrorism Risk Insurance Act of 2002 – Certified Losses is reported on a hard copy unit subsequent to experience modification after the expense constant, if applicable[, but prior to employer assessment]. The premium charge for Code 9740 is calculated by dividing a risk's total payroll by \$100 and multiplying the result times the carrier's rating value for Code 9740. Premium developed under the Terrorism Risk Insurance Act of 2002- Certified Losses is not included in Total Standard Premium. Non-payroll exposures are not subject to premium [under]charges for the Terrorism Risk Insurance Act of 2002 – Certified Losses.

(5) Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents (DTEC) - Code 9741

Premium charge for Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents is reported on a hard copy unit subsequent to experience modification after the expense constant, if applicable. The premium charge for Code 9741 is calculated by dividing a risk's total payroll by \$100 and multiplying the result times the carrier's rating value for Code 9741. Premium developed under Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents is not included in Total Standard Premium. Non-payroll exposures are not subject to premium charges for Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents.

SECTION IV – CODES

B. Exposure Information Code

3. Premium Codes

- c. Premium Not Subject tolines “H”, “I” or “J”)
(5) Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents - Code 9741

SECTION VI – EXAMPLES

Illustration 22 – Anniversary Rated Policy with the Premium Charge for Terrorism Risk Insurance Act of 2002 – Certified Losses and Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents

In this illustration it is assumed that more than one experience modification applies during the policy period, and the premium charges for the Terrorism Risk Insurance Act of 2002 and Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents are applicable.

Note: In the following example all premiums are calculated in the same sequence outlined in example 16 (combination example).

The premium charges for the Terrorism Risk Insurance Act of 2002 – Certified Losses, Code 9740, and Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents, Code 9741, are derived by adding up all payroll exposures for a given split period, dividing by \$100 and multiplying the result times the carrier’s rating value for each of these codes. The resulting premium charges should be reported on lines “J” through “K” under Code 9740 and Code 9741.

As with most pricing programs in the state of Delaware (e.g., Construction Credit – Code 9046, Merit Rating Credit – Code 9885) the Terrorism Risk Insurance Act of 2002 – Certified Losses, Code 9740, and Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents, Code 9741, are applicable as of the individual risk’s Anniversary Rating Date.

SECTION X - ALGORITHM

Delaware Premium Algorithm Preface:

*[Optional use November 26, 2002.] Mandatory use for policies effective on or after
[October]January 1, 200[4]6.*

UNIT STATISTICAL REPORT

POLICY INFORMATION

| | | | | | | | | | | | | | |
|---------------|-----------|-------------------|--------------|---------------|-----------------------|------------------------|--------------|----------------------|-----------------|-----------------|----------------|------------|-----------------|
| Report No. 01 | Corr. No. | Replace Rpt. Ind. | Carrier Code | Policy Number | Policy Effective Date | Policy Expiration Date | Expos. State | State Effective Date | Certificate No. | Card Serial No. | Risk ID Number | Page No. 1 | Last Page No. 2 |
| | | | 00200 | WC123456789 | 01/01/06 | 01/01/07 | 07 | | | | | | |

Insured's Name: A. B. C. INC.

Insured's Address:

F.E.I.N.

123456789

Pending File No.

| Mod Effective Date | Rate Effective Date | Policy Conditions | | | | MCO Indicator | Policy Type 1 D | | Deduct. Percent | Deductible Amount Per Claim/Accident | Deductible Amount Aggregate | Reserved | For Carrier Use |
|--------------------|---------------------|-------------------|--------------------|-------------------|--------------------|---------------|-----------------|-----------------|-----------------|--------------------------------------|-----------------------------|----------|-----------------|
| | | 3 Yr FIR Policy | Multi-state Policy | Interstate Rating | Estimated Exposure | | Retro Policy | Plan Incl. Sld. | | | | | |
| 12/01/05 | 12/01/05 | N | Y | N | N | N | 01 | 01 | 0301 | 1000 | | | |

EXPOSURE INFORMATION

| Upld Type | Exp. Cov. | Class Code | Exposure Amount | Manual Rate | Premium Rate |
|-----------|----------------------------|------------|-----------------|-------------|------------------------|
| | 01 | 0665 | 255000 | 7.84 | 19992 |
| | 01 | 0953 | 48000 | .24 | 115 |
| | 01 | 9664 | | | 3277 |
| | A. Total Subject Premium | | | | 16830 |
| | B. Mod (XX.XXX) | | | | 0.930 |
| | C. Total Modified Premium | | | | 15652 |
| | | | | | 3913 |
| | | | | .10 | 1174 |
| | | | | .25 | 2935 |
| | G. Total Standard Exposure | | | | Total Standard Premium |
| | | | | | 261 |
| | | | | | 119 |
| | | | | | .03 |
| | | | | | 91 |
| | | | | | |
| | | | | | |

LOSS INFORMATION

| Upld Type | Claim Number | Acc. Date/ No. Claims | Employer's Attorney Fees | Social Security Number | Part | Nature | Cause | Incurred Indemnity | Incurred Medical | Class Code | Injury | Status | Loss Conditions | | | Jurisdic State | MCO Type |
|-----------|-------------------------|-----------------------|--------------------------|------------------------|------|--------|-------|--------------------|------------------|------------|--------|--------|-----------------|------|-------|----------------|----------|
| | | | | | | | | | | | | | Act | Type | Recov | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | Reversed for Future Use | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | Reversed for Future Use | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | Reversed for Future Use | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | Reversed for Future Use | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | Reversed for Future Use | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | Reversed for Future Use | | | | | | | | | | | | | | | | |

LOSS TOTALS

| | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|--|--|--|--|--|--|--|--|--|--|--|------------------------------|--|--|----------------------|--|--|---------------------|--|--|---------------------|--|--|
| Total Incurred Indemnity | | | | | | | | | | | | Total Incurred Medical | | | Total Paid Indemnity | | | Total Paid Medical | | | | | |
| Total No. Claims | | | | | | | | | | | | Total Incurred Indemnity | | | Total Paid Indemnity | | | Total ALAE Paid | | | Total ALAE Incurred | | |
| Total Employer's Attny. Fees | | | | | | | | | | | | Total Employer's Attny. Fees | | | Total ALAE Paid | | | Total ALAE Incurred | | | | | |

DELAWARE WORKERS COMPENSATION STATISTICAL PLAN MANUAL

Effective Date: January 1, 2006

Page 1

Section X

PREMIUM ALGORITHM

Premium Calculation Algorithm

| Line # | Item Name | Associated Statistical Code | Line # | Source & Derivation |
|--------|--|-----------------------------|--------|---|
| (1) | Classification | xxxx | (1) | Carrier value |
| (2) | Exposure | xxxx | (2) | Risk characteristic |
| (3) | Carrier Rating Value | xxxx | (3) | Carrier value |
| (4) | Classification Manual Premium | | (4) | (2)/100x(3) if classification has payroll exposure. Special procedures apply to non-payroll classes |
| (5) | Total Policy Manual Premium | | (5) | Sum of (4) for all classifications on the policy |
| (6) | Employer Liability Increased Limits Factor | xxxx | (6) | Carrier value |
| (7) | Employer Liability Increased Limits Premium Charge | | (7) | (5)x[(6) expressed as a decimal] |
| (8) | Minimum Premium Employer Liability Increased Limits | 9848 | (8) | Carrier value |
| (9) | Minimum Premium Employer Liability Increased Limits Premium Charge | 9848 | (9) | [(8)-(7)] if (7)<(8) and (6) >0, otherwise zero |
| (10) | Subject Deductible Credit Percentage | 9664 | (10) | Carrier value |
| (11) | Subject Deductible Premium Credit | 9664 | (11) | [(5)+(7)+(9)]x[(-10) expressed as a decimal] |
| (12) | Waiver of Subrogation Charge | 0930 | (12) | Carrier value - subject to experience modification |
| (13) | Waiver of Subrogation Premium | 0930 | (13) | Value from Line (12) |
| (14) | Total Subject Premium | | (14) | [(5)+(7)+(9)+(11)+(13)] |
| (15) | Experience Modification | 9898 | (15) | Zero for non-experience-rated risks |
| (16) | Modified Premium | | (16) | (14)x(15) |
| (17) | Merit Rating Credit Factor | 9885 | (17) | Zero if Merit Rating Credit does not apply |
| (18) | Merit Rating Credit | 9885 | (18) | (14)x[(-17) expressed as a decimal] |
| (19) | Merit Rating Neutral Factor | 9884 | (19) | Zero whether Merit Rating Neutral Adjustment (no credit or debit) does or does not apply |
| (20) | Merit Rating Neutral Adjustment | 9884 | (20) | (14)x[(19) expressed as a decimal] |
| (21) | Merit Rating Debit Factor | 9886 | (21) | Zero if Merit Rating Debit does not apply |
| (22) | Merit Rating Charge | 9886 | (22) | (14)x[(21) expressed as a decimal] |
| (23) | Premium After Experience Modification or Merit Rating | | (23) | (16) if Experience-Rated, [(14)+(18)+(20)+(22)] if Merit-Rated, (14) if Non-Rated |
| (24) | Non-Ratable Classifications | xxxx | (24) | Carrier Value |
| (25) | Non-Ratable Classifications Exposure | | (25) | Portion of payroll exposure subject to Non-Ratable Classifications |
| (26) | Non-Ratable Classification Rating Value | xxxx | (26) | Carrier Value |
| (27) | Non-Ratable Classification Premium | | (27) | (25)/100x(26) [based on applicable Non-Ratable Classification exposure] |

DELAWARE WORKERS COMPENSATION STATISTICAL PLAN MANUAL

Effective Date: January 1, 2006

Page 2

Section X

PREMIUM ALGORITHM

Premium Calculation Algorithm

| Line # | Item Name | Associated Statistical Code | Line # | Source & Derivation |
|--------|--|-----------------------------|--------|---|
| (28) | Aircraft Seat Surcharge Exposure (# of seats) | 9108 | (28) | Actual number of seats for insured risk. Subject to maximum 10 seats per aircraft |
| (29) | Aircraft Seat Surcharge | 9108 | (29) | Carrier Value |
| (30) | Aircraft Seat Surcharge Premium Charge | 9108 | (30) | (28) x (29) |
| (31) | Workfare Program Employees Exposure (PA) | 0982 | (31) | Number of person weeks. A partial workweek for any worker to be counted as 1 person week. |
| (32) | Workfare Program Employees Rating Value (PA) | 0982 | (32) | Carrier Value |
| (33) | Workfare Program Employees Premium (PA) | 0982 | (33) | (31) x (32) |
| (34) | Non-Ratable Classification Premium Total | | (34) | Sum of all (27)+(30)+(33) premiums |
| (35) | Non-Ratable Classification Increased Limits Factor | xxxx | (35) | Carrier value |
| (36) | Non-Ratable Classification Increased Limits Premium Charge | xxxx | (36) | (34)x [(35) expressed as a decimal] |
| (37) | Minimum Premium Non-Ratable Classification Increased Limits | 9848 | (37) | Carrier value |
| (38) | Minimum Premium Non-Ratable Classification Increased Limits Premium Charge | 9848 | (38) | [(37)-(36)] if (36) < (37) and (35) > 0, otherwise zero |
| (39) | Premium Before Schedule Rating | | (39) | (23)+(34)+(36)+(38) |
| (40) | Schedule Rating Plan Adjustment Factor | 9887/9889 | (40) | Carrier value - use 9887 for schedule credits and 9889 for schedule debits |
| (41) | Schedule Rating Plan Premium Adjustment | 9887/9889 | (41) | (39)x[(40) expressed as a decimal]. For schedule credits Line (41) will be negative |
| (42) | Certified Safety Committee Credit Factor (PA) | 9890 | (42) | Credit applies if insured is certified. |
| (43) | Certified Safety Committee Premium Credit (PA) | 9890 | (43) | [(39)+(41)]x[(-42) expressed as a decimal] |
| (44) | Workplace Safety Program Credit Factor (DE) | 9880 | (44) | Credit applies if insured qualifies |
| (45) | Workplace Safety Program Premium Credit (DE) | 9880 | (45) | [(39)+(41)]x[(-44) expressed as a decimal] |
| (46) | Construction Classification Premium Adjustment Program Credit Factor | 9046 | (46) | Based on wage level(s), application to rating organization |
| (47) | Construction Classification Premium Adjustment Program Premium Credit | 9046 | (47) | [(39)+(41)]x[(-46) expressed as a decimal] |
| (48) | Drug-Free Workplace Factor (DE) | 9846 | (48) | Carrier value |
| (49) | Drug-Free Workplace Credit (DE) | 9846 | (49) | [(39)+(41)+(45)+(47)]x[(-48) expressed as a decimal] |

DELAWARE WORKERS COMPENSATION STATISTICAL PLAN MANUAL

Effective Date: January 1, 2006

Page 3

Section X

PREMIUM ALGORITHM

Premium Calculation Algorithm

| Line # | Item Name | Associated Statistical Code | Line # | Source & Derivation |
|--------|--|-----------------------------|--------|---|
| (50) | Managed Care Factor (DE) | 9874 | (50) | Carrier value |
| (51) | Managed Care Credit (DE) | 9874 | (51) | [(39)+(41)+(45)+(47)+(49)]x[(-50) expressed as a decimal] |
| (52) | Package Credit Factor (DE) | 9721 | (52) | Carrier value |
| (53) | Package Credit (DE) | 9721 | (53) | [(39)+(41)+(45)+(47)+(49)+(51)]x[(-52) expressed as a decimal] |
| (54) | Premium After Managed Care and Package Credit If Applicable | | (54) | [(39)+(41)+(43)+(45)+(47)+(49)+(51)+(53)] |
| (55) | Assigned Risk Surcharge Factor (DE) | 0277 | (55) | May apply to some or all assigned risks based on plan and characteristics of individual insured |
| (56) | Assigned Risk Premium Surcharge (DE) | 0277 | (56) | (54)x[(55) expressed as a decimal] |
| (57) | Deductible Credit Factor | 9663 | (57) | Carrier value |
| (58) | Deductible Premium Credit | 9663 | (58) | [(54)+(56)]x[(-57) expressed as a decimal] |
| (59) | Loss Constant | 0032 | (59) | Carrier value - may vary based on risk premium size |
| (60) | Loss Constant Charge | 0032 | (60) | Line (59) if applicable |
| (61) | Short Rate Cancellation Factor | 0931 | (61) | Carrier value - zero if short rate cancellation does not apply |
| (62) | Short Rate Premium | 0931 | (62) | [(54)+(56)+(58)+(60)]x[(61)-1.0000] if (61)>0, otherwise zero |
| (63) | Expense Constant | 0900 | (63) | Carrier value if applicable |
| (64) | Expense Constant Charge | 0900 | (64) | Line (63) |
| (65) | Minimum Premium | 0990 | (65) | Carrier value |
| (66) | Minimum Premium Charge | 0990 | (66) | If (65)>[(54)+(56)+(58)+(60)+(62)+(64)], (65)-[(54)+(56)+(58)+(60)+(62)+(64)], otherwise zero |
| (67) | Unit Statistical Report Total Standard Premium | | (67) | [(54)+(56)+(58)+(60)+(62)+(66)] |
| (68) | Premium Discount Amount | 0063/0064 | (68) | Carrier value based on [(54)+(56)+(58)+(60)+(62)+(66)] |
| (69) | Additional premium Waiver of Subrogation (flat charge) | 9115 | (69) | Carrier value(s) |
| (70) | Terrorism [Premium Charge] Risk Insurance Act (TRIA) of 2002- Certified Losses | 9740 | (70) | (Total payroll/100) x carrier rating value |
| (71) | Domestic Terrorism, Earthquakes and Catastrophic Industrial Accidents (DTEC) | 9741 | (71) | (Total payroll/100) x carrier rating value |

DELAWARE WORKERS COMPENSATION STATISTICAL PLAN MANUAL

Effective Date: January 1, 2006

Page 4

Section X

PREMIUM ALGORITHM

| Line # | Item Name | Associated Statistical Code | Line # | Source & Derivation |
|--------|--|-----------------------------|--------|--|
| (72) | Total Policy Premium Subject to Employer Assessment | | (72) | $(64)+(67)-(68)+(69)+(70)+\mathbf{(71)}$ |
| (73) | Employer Assessment Factor Pursuant to Act 57 of 1997 (PA) | 0938 | (73) | Bureau value for the specific purpose of computing employer assessments |
| (74) | Employer Assessment Amount Pursuant to Act 57 of 1997 (PA) | 0938 | (74) | $[(72)-(11)-(58)]\times(73)$ NOTE: Cells (11) and (58) are credits. Subtracting these credits as shown effectively adds the premium reduction given for deductible coverage back into the premium for purposes of calculating employer assessments |