

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/2013

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$5,592,197.00	+3.8%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopting NCCI's latest filing summarized in approval circular IL-2012-04; changing our deviation to +28%.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

American Family Mutual Insurance Company

Name of Company

Paul Amend - Actuarial Filing & Compliance Analyst

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2013

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u> Line of Insurance	6,796,974	+11.1%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): For new and renewal business effective May 1, 2013, we are adopting the NCCI rates announced in Circular IL-2012-01 and approved in IL-2012-04, with revision to our deviation from 1.000 to 1.150. Our company Miscellaneous Values Page, IL-WC-MV-AIC Ed. 05/13, which has been amended to reflect the revised deviation, will replace page IL-WC-MV-AIC Edition 05/08.

The information provided is exact.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Amerisure Insurance Company  
Name of Company

Tracy Upcott - Compliance Analyst II  
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u> Line of Insurance	<u>7,726,702</u>	<u>+7.5%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): For new and renewal business effective May 1, 2013, we are adopting the NCCI rates announced in Circular IL-2012-01 and approved in IL-2012-04, with revision to our deviation from 1.200 to 1.350. Our company Miscellaneous Values Page, IL-WC-MV-AMIC Ed. 05/13, which has been amended to reflect the revised deviation, will replace page IL-WC-MV-AMI Edition 05/08.

The information provided is exact.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Amerisure Mutual Insurance Company

Name of Company

Tracy Upcott - Compliance Analyst II

Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE**

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 04/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>WC</u> Line of Insurance	617,305	+8.7%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Adoption of NCCI's 1/1/2013 Loss Cost. Filing class code specific LCM for 8006 and 8033 from all other LCM of 1.545 to 1.775.

\*Adjusted to reflect all prior rate changes.  
 \*\*Change in Company's premium level which will result from application of new rates.

Arognaut Great Central Insurance Company  
 Name of Company

Stefanie Westerdahl Sr. Regulatory Analyst  
 Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>WC</u> Line of Insurance	3,439,304	+2.0%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Adoption of NCCI's 1/1/2013 Loss Cost. Filing class code specific LCM for 8006 and 8033 from all other LCM of 1.880 to 2.165.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Argonaut Insurance Company  
Name of Company

Stefanie Westerdahl Sr. Regulatory Analyst  
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>WC</u> Line of Insurance	<u>788,147</u>	<u>-2.9%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of NCCI's 1/1/2013 Loss Cost. Filing class code specific LCM for 8006 and 8033 from all other LCM of 1.390 to 1.600.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Argonaut-Midwest Insurance Company

Name of Company

Stefanie Westerdahl Sr. Regulatory Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective 3/1/13

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	\$327,644	-3.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI Loss Costs IL-2012-04 maintaining current multipliers. Our filing is effective 3/1/13.

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Atlantic Specialty Insurance Company  
Name of Company

*Josette Kiel*

Josette D. Kiel, Chief Underwriting Officer  
Official- Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/2013

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damag Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation Life of Insurance	132,983	-2.3%

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

This filing adopts NCCI's 1/1/2013 loss cost with no changes to our current LCM of 1.699 effective 6/1/2013

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Companion Commercial Ins. Co.

[Signature] Name of Company  
VP: Actuary  
 Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/2013

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	11,174,907	-2.3%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): This filing adopts NCCI's 1/1/2013 loss costs with no changes to our current LCM of 1.947 effective 6/1/2013.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Companion Property and Casualty Ins. Co.

VP: Anthony  
Name of Company  
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

1-1-2013

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop-Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	<u>12,480,730</u>	<u>-10%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

FILING APPLIES TO ALL TERRITORIES.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization)

ILLINOIS VOLUNTARY MARKET ADVISORY RATES  
AND RATING VALUES, EFFECTIVE 1-1-2013, FOR NEW AND  
RENEWAL POLICIES, AS SUBMITTED BY NICE - FILING  
CIRCULAR 16-2010-04

\*\* Change in Company's premium level which will result from application of new rates.

DIAMOND INSURANCE  
Name of Company GROUP

DOREEN PARKS  
BUSINESS DEVELOPMENT  
Official - Title SPECIALIST

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 06/01/13

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u> Line of Insurance	<u>\$10,428,188</u>	<u>0.0%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory loss costs approved in NCCI circular IL-2012-01 with a loss cost multiplier of 1.82 with the exception of class 6204 which will have a multiplier of 1.25.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

EMCASCO Insurance Company  
Name of Company

Linda Samson, Assistant Vice President  
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/13

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation		
Line of Insurance	\$371,700	-3.5%

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI Loss Costs IL-2012-04 maintaining current multipliers. Our filing is effective 3/1/13.

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Employers Fire Insurance Company  
Name of Company

*Josette Kiel*

Josette D. Kiel, Chief Underwriting Officer  
Official- Title

**ILLINOIS DEPARTMENT OF INSURANCE**  
**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective

06/01/13

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u> Line of Insurance	\$5,020,232	0.6%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory loss costs approved in NCCI circular IL-2012-01 with a loss cost multiplier of 1.82 with the exception of class 6204 which will have a multiplier of 1.25.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Employers Mutual Casualty Company  
Name of Company

Linda Samson, Assistant Vice President  
Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective

4/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u>	4,457,581	+ 2.8%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are adopting the NCCI's

Jan 2013 approved loss costs with a 4/1/2013 company effective date. Also, we are removing our +15% deviation for class 7710, and implementing

a +15% deviation for class 7720 (a 1.840 LCM will be used for this class). We will continue to maintain our +15% deviation for classes

5188, 7605, and 9014. Rates are produced with an LCM of 1.840 for the 4 deviated classes, and 1.600 for all other classes.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Everest National Insurance Company

Name of Company

Reid Bellanca - Vice President

Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 6/1/2013

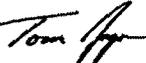
(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers' Compensation</u>	\$2,652,417	-7.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI loss cost circular IL-2012-01 and revising loss costs.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Farmland Mutual Insurance Company  
 \_\_\_\_\_  
 Name of Company  
 Vice President - Underwriting  
  
 \_\_\_\_\_  
 Official - Title

**ILLINOIS SUMMARY SHEET**

**FORM RF - 3**

Change in Company's premium or rate level produced by rate revision effective:

3/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$5,971,528	-4.2%
16. Other <u>(Line of Insurance)</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Adoption of NCCI Loss Costs and Rating Values from NCCI Circular IL-2012-01  
effective January 1, 2013. Our filing (IL12197CG00025) to be effective March 1, 2013.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Great American Alliance Insurance Company  
Name of Company

Richard McIntyre, Senior Compliance Filing Analyst  
Official - Title

**ILLINOIS SUMMARY SHEET**

**FORM RF - 3**

Change in Company's premium or rate level produced by rate revision effective:

3/1/2013

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$112,071	4.3%
16. Other		
(Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Adoption of NCCI Loss Costs and Rating Values from NCCI Circular IL-2012-01  
effective January 1, 2013. Our filing (IL12197CG00025) to be effective March 1, 2013.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Great American Assurance Company  
Name of Company

Richard McIntyre, Senior Compliance Filing Analyst  
Official - Title

**Illinois**

**ILLINOIS SUMMARY SHEET**

**FORM RF - 3**

Change in Company's premium or rate level produced by rate revision effective:  
3/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$1,428,824	-2.6%
16. Other (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Adoption of NCCI Loss Costs and Rating Values from NCCI Circular IL-2012-01  
effective January 1, 2013. Our filing (IL12197CG00025) to be effective March 1, 2013.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Great American Insurance Company of New York  
Name of Company

Richard McIntyre, Senior Compliance Filing Analyst  
Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 3/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers' Compensation</u>	9,609,686	-2.63%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are requesting to adopt both the B-1425 Employer's Liability and minimum premium changes as well as the NCCI 1/1/13 loss costs, both to be effective 3/1/13.  
With this change, we will be moving from rates to loss costs. Estimated numbers are used.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

General Casualty Insurance Company  
Name of Company

Chris Gates, VP - Product Development & Filings  
Official - Title

Adopt the B-1425 and change from rates to loss costs both effective 3/1/13.

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 3/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers' Compensation</u>	7,320,046	-1.62%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are requesting to adopt both the B-1425 Employer's Liability and minimum premium changes as well as the NCCI 1/1/13 loss costs, both to be effective 3/1/13.  
With this change, we will be moving from rates to loss costs. Estimated numbers are used.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

General Casualty Company of Wisconsin  
Name of Company

Chris Gates, VP - Product Development & Filings  
Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE**  
**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 06/01/13

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u> Line of Insurance	\$2,616,084	-1.2%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the advisory loss costs approved in NCCI circular IL-2012-01 with a loss cost multiplier of 1.82 with the exception of class 6204 which will have a multiplier of 1.25.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

\_\_\_\_\_  
Illinois Emcasco Insurance Company  
Name of Company

\_\_\_\_\_  
Linda Samson, Assistant Vice President  
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <b>Workers'</b>	5,996,966	-6.4%
<b>Compensation</b>		
<b>Line of Insurance</b>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

---



---

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of the National Council on Compensation Insurance, Inc.'s ("NCCI") Illinois Voluntary  
Market Advisory Loss Costs and Rating Values effective January 1, 2013, MSIG Effective  
Date February 1, 2013.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Mitsui Sumitomo Insurance  
 Company of America  
 \_\_\_\_\_  
 Name of Company

Scott M. Herbert, Sr. Gov't.  
 Affairs Analyst  
 \_\_\_\_\_  
 Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2013

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <b>Workers'</b>	2,149,732	-6.4%
<b>Compensation</b>		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

\_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of the National Council on Compensation Insurance, Inc.'s ("NCCI") Illinois Voluntary  
Market Advisory Loss Costs and Rating Values effective January 1, 2013, MSIG Effective

Date February 1, 2013

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Mitsui Sumitomo Insurance  
USA Inc.

\_\_\_\_\_  
Name of Company

Scott M. Herbert, Sr. Gov't.  
Affairs Analyst

\_\_\_\_\_  
Official- Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 6/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers' Compensation</u>	\$519,810	1.9%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI loss cost circular IL-2012-01.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

National Casualty Company

Name of Company  
Vice President - Underwriting



Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 6/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers' Compensation</u>	\$3,043,872	-7.9%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI loss cost circular IL-2012-01 and revising LCMs.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Nationwide Agribusiness Insurance Company  
 \_\_\_\_\_  
 Name of Company  
  
 Vice President - Underwriting  
 \_\_\_\_\_  
 Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/13

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation		
Line of Insurance	<u>\$534,108</u>	<u>-3.5%</u>

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI Loss Costs IL-2012-04 maintaining current multipliers. Our filing is effective 3/1/13.

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

OneBeacon America Insurance Company  
Name of Company

*Josette Kiel*

Josette D. Kiel, Chief Underwriting Officer  
Official- Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective 3/1/13

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	\$671,224	-3.5%
<hr/> Line of Insurance <hr/>		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI Loss Costs IL-2012-04 maintaining current multipliers. Our filing is effective 3/1/13.

\* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will result from application of new rates.

OneBeacon Insurance Company  
Name\_of Company

*Josette Kiel*

Josette D. Kiel, Chief Underwriting Officer  
Official- Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03-01-13 New & Renewal

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damag Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	\$47,684,000	-2.3%
	<u>Life of Insurance</u>		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt the revised NCCI advisory loss costs effective 1/01/2013. No changes to our current LCMs. Adopt the revised Employers Liability Coverage rates as supplier by NCCI.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

PEKIN INSURANCE COMPANY

Name of Company

Joseph R. Ricigliano - Vice-President Commercial Lines

Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 3/1/2013

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers' Compensation</u>	14,261,889	-1.14%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are requesting to adopt both the B-1425 Employer's Liability and minimum premium changes as well as the NCCI 1/1/13 loss costs, both to be effective 3/1/13.

With this change, we will be moving from rates to loss costs. Estimated numbers are used.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Regent Insurance Company  
Name of Company

Chris Gates, VP - Product Development & Filings  
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2013

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other Workers Compensation Line of Insurance	1,966,297 for program in year ending 9/30/2012	+21.2% rate level impact/+21.2% prem. level impact

Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Switch from 1/1/12 NCCI Rates to 1/1/13 NCCI Loss Costs. Introduction of LCM and  
minimum premium to be used with loss costs.

\* Adjusted to reflect all prior rate changes.  
 \*\* Change in Company's premium level which will result from application of new rates.

State National Insurance Company Inc.  
 Name of Company

David M. Cleff, Senior Vice President  
and General Counsel  
 Official - Title