



## THE WORKERS' COMPENSATION RATING AND INSPECTION BUREAU

June 2, 2010

### CIRCULAR LETTER NO. 2152

**To All Members and Subscribers of the Bureau:**

#### MANUAL RATES AND RATING VALUES EFFECTIVE 9/1/2010

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Attached please find revised manual pages that reflect the rates and rating values effective 9/1/2010.

Note that F-Class rates have been revised. No changes were made with respect to the rates for Admiralty and Federal Employers' Liability Act classifications. Additionally, there were changes to the following:

- the table of increased limits has been expanded in Rule VIII-Limits of Liability of the *Massachusetts Workers' Compensation and Employers Liability Insurance Manual*.
- the applicable USL&HW percentage used in connection with Rule XII-D-3 of the *Massachusetts Workers' Compensation and Employers Liability Insurance Manual*.
- the basis of premium for taxicab employee operated vehicles and leased or rented vehicles shown in the rate pages under Miscellaneous Values of the *Massachusetts Workers' Compensation and Employers Liability Insurance Manual*. The basis of premium for taxicabs is a function of the State Average Weekly Wage (SAWW) and will be updated annually, in the same fashion as the premium for sole proprietors, partners of a legal partnership, and members of an LLC who elect to become employees and obtain workers compensation insurance coverage, to coincide with the SAWW change.
- the USL&HW Act—Expected Loss Factor—Non-F Classes shown in Part Five of the *Experience Rating Plan Manual*.

When the new rates, experience ratings, and ARAP factors are received, carriers should no longer attach Massachusetts Pending Premium Change Endorsement WC 20 04 01 to policies.

The revised guidelines for filing deviations will be available shortly on the Division of Insurance's website ([www.mass.gov/doj](http://www.mass.gov/doj)).

The new rates and rating values will be available in electronic form on our web site ([www.wcribma.org](http://www.wcribma.org)). Experience rating and ARAP factors (including replacement of preliminary experience ratings and ARAP factors), effective September 1, 2010 and subsequent, will be issued in due course using the new Expected Loss Rates and D-Ratios.

PAUL F. MEAGHER  
President

*Attachments*

**MASSACHUSETTS WORKERS COMPENSATION  
AND EMPLOYERS LIABILITY INSURANCE MANUAL**

**PART ONE  
RULE VIII**

1<sup>st</sup> Reprint

*Effective September 1, 2010*

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**RULE VIII – LIMITS OF LIABILITY**

Item 3.B. of the Information Page

This rule applies in Massachusetts except as follows:

No limit of liability stated in the Information Page or elsewhere in the policy shall be applicable to the company's liability to the insured under Section 25 of M.G.L. Chapter 152, as amended. This exception is expressed in the Massachusetts Limits of Liability Endorsement (WC 20 03 01) for use on all policies affording coverage under the Massachusetts Workers Compensation Act.

**A. WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY**

**1. Part One - Workers Compensation**

There is no limit of liability in the Standard Policy for Part One-Workers Compensation. The policy provides all benefits required by any workers compensation law of a state listed in Item 3.A. of the Information Page.

**2. Part Two - Employers Liability**

**a. Standard Limits**

The standard limits of liability under Part Two are:

Bodily Injury by Accident:	\$100,000 - each accident
Bodily Injury by Disease:	\$100,000 - each employee
Bodily Injury by Disease:	\$500,000 - policy limit

**b. Increased Limits**

The limits under Part Two may be increased, subject to the following:

(1) The limits of liability shall be the same for all states specified in Item 3.A. of the Information Page.

(2) The additional premium for increased limits shall be determined by multiplying the Manual Premium by the percentage in the following Table for Increased Limits. It shall not be less than the minimum premium shown in the table.

(3) The premium for increased limits shall be included in Subject Premium.

(4) Percentages for limits other than shown above are available upon application to the MA Bureau.

**c. Accident Limit**

The limit of liability under Part Two for Bodily Injury by Accident applies to all bodily injury arising out of any one accident.

**d. Disease Limits**

The limit of liability under Part Two for Bodily Injury by Disease – each employee – applies as a separate limit to bodily injury by disease to any one employee, and the limit of liability for Bodily Injury by Disease – policy limit – applies as an aggregate limit for all bodily injury by disease, regardless of the number of employees who sustain bodily injury by disease.

**e. Show Limits on the Information Page**

The limits of liability under Part Two must be stated in Item 3.B. of the Information Page.

**f. Table for Increased Limits Percentages**

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**TABLE FOR INCREASED LIMITS PERCENTAGES**

Bodily Injury By Disease Policy Limit (\$000s)

	500	1,000	2,000	2,500	3,000	4,000	5,000	10,000	15,000	20,000	25,000	30,000	35,000	40,000	45,000	50,000	
Bodily Injury	100	n/a	0.50	0.66	0.75	0.83	0.92	1.00	1.25	1.37	1.45	1.49	1.53	1.57	1.61	1.65	1.69
By Accident	500	1.00	1.25	1.41	1.50	1.58	1.67	1.75	2.00	2.13	2.21	2.25	2.29	2.33	2.38	2.42	2.46
(each employee)	1,000		2.00	2.16	2.25	2.33	2.42	2.50	2.75	2.91	2.01	3.06	3.11	3.17	3.22	3.27	3.32
Disease	2,000		2.66	2.72	2.79	2.86	2.93	3.17	3.32	3.42	3.48	3.53	3.58	3.63	3.68	3.74	
(each employee)	2,500			2.91	2.98	3.01	3.10	3.33	3.49	3.59	3.65	3.70	3.75	3.80	3.85	3.90	
(\$000s)	3,000				3.08	3.14	3.19	3.42	3.58	3.68	3.74	3.79	3.84	3.89	3.94	4.00	
	4,000					3.36	3.40	3.63	3.79	3.89	3.94	4.00	4.05	4.10	4.15	4.20	
Bodily Injury	5,000						3.62	3.84	4.00	4.10	4.15	4.20	4.25	4.31	4.36	4.41	
By Disease	10,000							4.67	4.83	4.93	4.98	5.03	5.08	5.14	5.19	5.24	
(each employee)	15,000								5.34	5.45	5.50	5.55	5.60	5.66	5.71	5.76	
Disease	20,000									5.86	5.92	5.97	6.02	6.07	6.12	6.17	
(each employee)	25,000										6.28	6.33	6.38	6.43	6.49	6.54	
(\$000s)	30,000											6.64	6.69	6.75	6.80	6.85	
	35,000												6.95	7.00	7.06	7.11	
	40,000													7.21	7.26	7.32	
	45,000														7.42	7.47	
	50,000															7.63	

**TABLE OF MINIMUM PREMIUM FOR INCREASED LIMITS**

100	0	75	75	100	100	125	125	150	175	200	225	250	275	300	325	350
500+	50	75	75	100	100	125	125	150	175	200	225	250	275	300	325	350

## B. VOLUNTARY COMPENSATION INSURANCE

### 1. Standard Limits

The standard limits of liability under Part Two - Employers Liability Insurance for employees subject to voluntary compensation insurance are:

Bodily Injury by Accident: \$100,000 - each accident  
Bodily Injury by Disease: \$100,000 - each employee  
Bodily Injury by Disease: \$500,000 - policy limit

The limit of liability for Bodily Injury by Accident applies to all bodily injury arising out of any one accident.

The limit of liability for Bodily Injury by Disease - each employee applies as a separate limit to bodily injury by disease to any one employee, and the limit of liability for Bodily Injury by Disease - policy limit applies as an aggregate limit for all bodily injury by disease, regardless of the number of employees who sustain bodily injury by disease.

### 2. Increased Limits

The standard limits under Part Two – Employers Liability Insurance for employees subject to voluntary compensation insurance may be increased. The premium for the increased limits shall be determined on the basis of the percentages in Rule VIII-A.2.f.

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**3. Premium Determination**

Premium shall be determined on the basis of the workers compensation rules, classifications and rates in this manual for the state workers compensation law designated in the schedule in the Voluntary Compensation and Employers Liability Coverage Endorsement.

**4. Payroll Records**

When voluntary compensation insurance is provided for a group of employees, separate payroll records shall be maintained by the insured for the designated group of employees.

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**RATES**

**LEGEND**

(a) Rate for each individual risk must be obtained by Home Office from the MA Bureau.

F Rate provides for coverage under the United States Longshore and Harbor Workers' Compensation Act.

D Supplement Disease Loading. Refer to Section IV of the Manual  
Supplement - - Treatment of Disease Coverage.

CLASS CODE	MIN RATE	LOSS PREM CONST	CLASS CODE	MIN RATE	LOSS PREM CONST	CLASS CODE	MIN RATE	LOSS PREM CONST	CLASS CODE	MIN RATE	LOSS PREM CONST
0005	2.82	278. 20.	1430	12.06	500. --	2156	8.11	500. --	2741	6.21	467. --
0008	2.35	261. 20.	1438	3.10	268. --	2157	5.88	456. --	2747	7.95	500. --
0016	3.51	302. 20.	1463	7.53	500. --	2172	1.65	217. --	2790	2.32	240. --
0034	3.64	306. 20.	1624D	5.33	457. 20.	2174	4.67	322. --	2802	4.63	321. --
0035	1.99	249. 20.	1655	6.09	483. 20.	2211	6.14	465. --	2835	2.29	239. --
0036	3.64	306. 20.	1701	4.99	334. --	2220	3.67	287. --	2836	3.30	275. --
0037	2.35	261. 20.	1710D	5.33	457. 20.	2260	6.01	460. --	2841	3.82	293. --
0042	4.03	320. 20.	1747	4.17	305. --	2286	3.67	287. --	2883	3.76	291. --
0046	2.84	278. 20.	1748	3.39	278. --	2288	2.20	236. --	2923	2.04	230. --
0050	5.69	499. 50.	1852	7.76	500. --	2302	3.67	287. --	2942	2.31	240. --
0059D	0.28	. . .	1853	1.82	223. --	2305	1.98	228. --	3018	2.91	261. --
0065D	0.12	. . .	1860	2.72	254. --	2362	2.44	244. --	3022	4.03	300. --
0066D	0.10	. . .	1924	2.70	254. --	2380	2.98	263. --	3027	4.89	330. --
0067D	0.10	. . .	1925	4.49	316. --	2402	3.15	269. --	3028	4.45	315. --
0079	2.84	278. 20.	2001	3.33	276. --	2413	3.65	287. --	3030	8.53	500. --
0083	5.20	452. 20.	2002	3.83	293. --	2416	3.34	276. --	3040	7.77	500. --
0106	14.64	500. 20.	2003	3.33	276. --	2417	3.13	269. --	3041	4.71	324. --
0113	3.64	306. 20.	2014	3.92	296. --	2501	2.44	244. --	3042	4.61	320. --
0170	3.64	306. 20.	2021	3.37	277. --	2503	1.03	195. --	3064	3.08	267. --
0251	3.15	289. 20.	2039	2.88	260. --	2534	2.44	244. --	3066	3.08	267. --
0400	(a)	(a)	2041	2.62	251. --	2570	4.94	332. --	3076	2.74	255. --
0401*	(a)	(a)	2070	4.35	311. --	2576	3.32	275. --	3081D	8.46	500. --
0770b	1.52	. . .	2081	4.03	300. --	2578	3.32	275. --	3082D	8.46	500. --
0773c	3.99	. . .	2089	2.58	249. --	2585	2.89	260. --	3085D	5.06	336. --
0774d	2.94	. . .	2095	4.37	312. --	2586	1.57	214. --	3110	8.61	500. --
0775e	2.45	. . .	2101	2.58	249. --	2587	2.48	266. 20.	3111	2.64	251. --
0776f	2.67	. . .	2105	(a)	(a)	2623	3.51	282. --	3113	2.25	238. --
0779g	2.27	. . .	2111	2.72	254. --	2640	2.52	247. --	3114	3.72	289. --
0799h	9.02	. . .	2114	2.58	249. --	2651	2.52	247. --	3118	2.25	238. --
0908	94.00	158. --	2115	3.35	276. --	2660	2.13	234. --	3119	1.06	196. --
0909	135.00	199. --	2121	2.22	237. --	2683	2.21	236. --	3120	2.00	229. --
0912	269.00	333. --	2130	2.76	256. --	2688	2.72	254. --	3122	2.68	253. --
0913	188.00	252. --	2131	2.43	244. --	2702	15.49	500. 20.	3127	0.92	191. --
0917	2.54	268. 20.	2143	3.17	270. --	2710	6.60	481. --	3131	2.20	236. --
0918	0.63	201. 20.	2150	5.34	346. --	2731	4.82	328. --	3132	2.70	254. --

\*0401 - Minimum Premium \$100 per ginning location.

Non-Ratable Code and Rate to be used with the following classifications:

b 4770 d 4774 f 4776 h 4799

c 4773 e 4775 g 4779

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CLASS CODE	MIN RATE	LOSS PREM	LOSS CONST												
3145	2.00	229.	--	3642	1.11	198.	--	4304	4.09	302.	--	4799h	33.93	500.	--
3146	2.17	235.	--	3643	1.74	220.	--	4307	1.46	210.	--	4825	0.62	181.	--
3169	4.45	315.	--	3647	2.90	261.	--	4308	0.96	193.	--	4828	1.33	206.	--
3179	1.74	220.	--	3648	1.81	222.	--	4350	0.66	182.	--	4829	1.33	206.	--
3180	2.97	263.	--	3681	0.84	188.	--	4351	0.99	194.	--	4902	2.31	240.	--
3188	3.52	282.	--	3685	0.84	188.	--	4352	1.17	200.	--	4923	1.22	202.	--
3200	3.27	273.	--	3724	5.48	492.	50.	4360	1.22	202.	--	5020	6.25	500.	50.
3220	2.00	229.	--	3726	15.42	500.	50.	4361	0.48	196.	20.	5022	10.55	500.	50.
3223	(a)	(a)	(a)	3807	4.45	315.	--	4362	0.65	202.	20.	5037	23.51	500.	50.
3227	4.45	315.	--	3808	3.97	298.	--	4410	4.75	325.	--	5040	54.08	500.	50.
3241	2.70	254.	--	3821	4.04	320.	20.	4417	5.53	353.	--	5057	33.00	500.	50.
3255	3.57	284.	--	3826	2.44	244.	--	4432	1.33	206.	--	5059	33.00	500.	50.
3257	3.15	269.	--	3830	2.00	229.	--	4439	2.46	245.	--	5069	33.00	500.	50.
3270	2.00	229.	--	3841	1.88	225.	--	4452	3.10	268.	--	5102	6.89	500.	50.
3300	7.31	500.	--	4000	4.82	348.	20.	4459	3.19	271.	--	5146	5.34	487.	50.
3305	(a)	(a)	(a)	4021	4.01	299.	--	4470	3.00	264.	--	5160	4.21	356.	50.
3315	2.80	257.	--	4024	3.27	273.	--	4484	2.57	249.	--	5183	3.50	332.	50.
3334	(a)	(a)	(a)	4034	5.84	454.	--	4493	3.47	280.	--	5188	4.13	354.	50.
3336	3.32	275.	--	4036	2.83	258.	--	4511	0.35	191.	20.	5190	2.84	308.	50.
3365	9.67	500.	50.	4038	2.47	245.	--	4512	0.15	184.	20.	5191	0.98	213.	20.
3372	2.51	247.	--	4053	2.12	233.	--	4557	1.55	213.	--	5192	4.04	320.	20.
3373	3.78	291.	--	4061	3.12	268.	--	4558	1.85	224.	--	5213	18.85	500.	50.
3381	3.48	281.	--	4062	3.12	268.	--	4561	2.46	245.	--	5215	5.33	487.	50.
3383	1.44	209.	--	4112	0.67	182.	--	4583	3.44	279.	--	5221	6.24	500.	50.
3385	0.88	190.	--	4113	2.12	233.	--	4611	1.66	217.	--	5222	8.70	500.	50.
3400	4.45	315.	--	4114	2.76	256.	--	4635	3.43	279.	--	5223	5.33	487.	50.
3507	3.46	280.	--	4130	5.25	343.	--	4653	3.28	274.	--	5348	5.81	500.	50.
3515	2.99	264.	--	4133	2.08	232.	--	4665	8.94	500.	--	5402	11.49	500.	50.
3548	2.00	229.	--	4150	1.05	196.	--	4692	0.59	180.	--	5403	9.61	500.	50.
3558	0.62	181.	--	4239	3.55	283.	--	4693	1.03	195.	--	5437	5.23	483.	50.
3559	2.00	229.	--	4243	3.13	269.	--	4720	1.99	229.	--	5443	5.27	484.	50.
3571	1.28	204.	--	4244	3.99	299.	--	4740	1.31	205.	--	5445	7.24	500.	50.
3574	2.00	229.	--	4250	1.96	228.	--	4741	3.50	282.	--	5462	9.58	500.	50.
3612	2.02	230.	--	4251	1.96	228.	--	4770b	10.14	500.	--	5472	8.75	500.	50.
3620	5.08	337.	--	4273	3.22	272.	--	4773c	19.50	500.	--	5473	12.60	500.	50.
3629	2.00	229.	--	4279	3.80	292.	--	4774d	16.63	500.	--	5474	5.09	478.	50.
3632	2.00	229.	--	4282	0.73	185.	--	4775e	15.07	500.	--	5478	4.68	464.	50.
3634	1.96	228.	--	4283	3.09	267.	--	4776f	14.04	500.	--	5479	7.78	500.	50.
3635	4.02	300.	--	4299	2.25	238.	--	4777	3.44	279.	--	5480	4.68	464.	50.
3638	2.00	229.	--	4301	4.17	305.	--	4779g	12.88	500.	--	5506	7.05	500.	50.

For Non-Ratable portion of Rate, refer to:

b 0770

d 0774

f 0776

h 0799

c 0773

e 0775

g 0779

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CLASS CODE	MIN RATE	LOSS PREM	LOSS CONST												
5507	7.05	500.	50.	7230	6.24	488.	20.	8018	3.14	289.	20.	8709F	6.51	478.	--
5508D	6.01	500.	50.	7231	6.33	492.	20.	8021	2.74	275.	20.	8710	2.18	255.	20.
5509	3.43	329.	50.	7309F	35.39	500.	--	8031	2.63	271.	20.	8719	2.18	255.	20.
5538	5.72	500.	50.	7313F	14.69	500.	--	8032	1.51	232.	20.	8720	1.01	214.	20.
5545	30.99	500.	50.	7317F	14.04	500.	--	8033	1.90	246.	20.	8721	0.17	185.	20.
5547	17.07	500.	50.	7327F	32.13	500.	--	8034	3.88	315.	20.	8726F	7.21	500.	--
5606	1.62	266.	50.	7350F	16.61	500.	--	8039	1.62	236.	20.	8742	0.15	184.	20.
5610	5.43	490.	50.	7360	5.48	462.	20.	8044	3.20	291.	20.	8745	3.28	294.	20.
5645	8.68	500.	50.	7370	4.60	340.	20.	8046	2.37	262.	20.	8747	1.15	219.	20.
5651	8.68	500.	50.	7380	5.71	470.	20.	8048	3.27	293.	20.	8748	0.45	195.	20.
5701	23.75	500.	50.	7382	4.09	322.	20.	8050	1.68	238.	20.	8800	0.75	205.	20.
5703	26.72	500.	50.	7403	4.73	345.	20.	8058	2.71	274.	20.	8803	0.04	180.	20.
5705	11.15	500.	50.	7405i	0.92	211.	20.	8103	2.99	284.	20.	8810	0.09	182.	20.
6003	12.92	500.	50.	7420	5.87	475.	20.	8105	4.56	339.	20.	8820	0.09	182.	20.
6005	6.01	500.	50.	7421*	2.02	250.	20.	8106	7.39	500.	20.	8829	2.06	251.	20.
6204	9.67	500.	50.	7422	2.02	250.	20.	8107	3.98	318.	20.	8831	1.16	220.	20.
6217	4.35	452.	50.	7425	3.35	296.	20.	8111	3.33	296.	20.	8832	0.22	187.	20.
6229	4.35	452.	50.	7431j	1.52	232.	20.	8116	3.98	318.	20.	8833	1.07	216.	20.
6233	3.82	343.	50.	7445k	0.31	.	.	8203	5.75	471.	20.	8835	2.03	250.	20.
6251D	5.99	500.	50.	7453I	0.50	.	.	8204	5.42	460.	20.	8837	(a)	(a)	(a)
6252D	7.83	500.	50.	7502	3.83	313.	20.	8215	3.09	287.	20.	8868	0.61	200.	20.
6306	7.61	500.	50.	7515	2.28	259.	20.	8227	3.93	347.	50.	8901	0.09	182.	20.
6319	4.86	470.	50.	7520	3.15	289.	20.	8232	4.43	334.	20.	9014	2.48	266.	20.
6325	4.38	453.	50.	7538	5.39	489.	50.	8233	8.78	500.	20.	9015	2.72	274.	20.
6400	7.05	500.	50.	7539	1.18	220.	20.	8235	3.80	312.	20.	9016	1.58	234.	20.
6504	2.58	249.	--	7580	2.47	265.	20.	8263	5.94	478.	20.	9019	3.63	306.	20.
6801F	12.10	500.	--	7590	6.33	492.	20.	8264	4.67	342.	20.	9033	4.66	342.	20.
6811	9.17	500.	20.	7600	3.23	292.	20.	8265	8.78	500.	20.	9040	2.94	282.	20.
6824F	10.18	500.	--	7601	5.39	489.	50.	8279	4.36	332.	20.	9052	1.49	231.	20.
6826F	11.56	500.	--	7610	0.18	185.	20.	8291	4.15	324.	20.	9058	1.49	231.	20.
6834	2.97	283.	20.	7704	1.80	242.	20.	8292	3.85	314.	20.	9060	1.13	219.	20.
6836	2.43	264.	20.	7720	1.73	240.	20.	8293	8.28	500.	20.	9061	0.96	213.	20.
6843F	13.73	500.	--	7855	6.16	500.	50.	8350	5.75	471.	20.	9063	0.67	202.	20.
6854	10.40	500.	20.	8001	1.46	230.	20.	8380	2.45	265.	20.	9077F	4.58	319.	--
6872F	34.76	500.	--	8002	2.27	258.	20.	8381	1.68	238.	20.	9079	1.07	216.	20.
6874F	32.64	500.	--	8006	1.52	232.	20.	8385	3.31	295.	20.	9088	(a)	(a)	(a)
6882	26.33	500.	20.	8008	0.63	201.	20.	8392	1.23	222.	20.	9089	1.23	222.	20.
6884	24.73	500.	20.	8010	1.53	233.	20.	8393	1.88	245.	20.	9093	1.11	218.	20.
7133	(a)	(a)	(a)	8013	0.45	195.	20.	8500	8.78	500.	20.	9101	3.17	290.	20.
7219	8.28	500.	20.	8017	1.15	219.	20.	8601	0.26	188.	20.	9102	2.24	257.	20.

\*7421--A policy surcharge of \$100 per passenger seat, subject to a maximum surcharge of \$1,000 per aircraft, shall be charged in addition to the premium otherwise determined under this classification. These surcharges shall not be cumulative in the event of substitution of aircraft during the policy period; but these surcharges shall be cumulative in the event more than one aircraft is owned or operated during the same policy period. These surcharges to employees other than members of flying crew are to be reported under Code 0088.

For Non-Ratable portion of Rate, refer to:

i 7445

j 7453

Non-Ratable Code and Rate to be used with:

k 7405

l 7431

## **MASSACHUSETTS WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE MANUAL**

## Original Printing

*Effective September 1, 2010*

Page RA-4

## RATES

MASSACHUSETTS WORKERS COMPENSATION  
AND EMPLOYERS LIABILITY INSURANCE MANUAL

Original Printing

Effective September 1, 2010

Page RA-5

**MISCELLANEOUS VALUES****Basis of Premium** applicable in accordance with the footnote instructions for Code 7370 - "Taxicab Co.":

Employee operated vehicles.....	\$85,400
Leased or rented vehicles.....	\$56,900

**Basis of Premium** for Sole Proprietors, Partners of Legal Partnerships, Members of Limited Liability

Companies or Partners of Limited Liability Partnerships in accordance with Rule IX-B. 3. a.....	\$39,800
Minimum individual payroll for an executive officer per week.....	\$200
Maximum individual payroll for an executive officer per week.....	\$1,000

**Terrorism Insurance Program—Certified Loss:** ..... 0.03**BENEFITS DEDUCTIBLE COVERAGE PROGRAM**

Medical and Indemnity	Premium Reduction
Deductible Amount	Percentage
\$500	1.9%
\$1,000	3.1%
\$2,000	4.7%
\$2,500	5.3%
\$5,000	7.8%

**BENEFITS CLAIM AND AGGREGATE DEDUCTIBLE PROGRAM**

Basis for the Aggregate Limit	Claim Deductible Amount	Aggregate Deductible Amount	Premium Reduction Percentage
\$ 0 to \$75,000	\$2,500	\$10,000	5.2%
\$75,001 to \$100,000	\$2,500	\$10,000	5.2%
\$100,001 to \$125,000	\$2,500	\$10,000	5.1%
\$125,001 to \$150,000	\$2,500	\$10,000	5.0%
\$150,001 to \$200,000	\$2,500	\$10,000	4.8%
over \$200,000	\$2,500	5% of Basis for the Aggregate Limit	4.6%

**Expense Constant** applicable in accordance with MA Manual Rule VI-E-2:

Policies which develop earned Standard Premium of less than \$200.....	\$159
Policies which develop earned Standard Premium of at least \$200 and less than \$1,000.....	\$250
Policies which develop earned Standard Premium of \$1,000 or more.....	\$338

The expense constant for private residence per capita classifications is \$64, up to a maximum of 4.

**Premium Discount Percentages**—(See MA Manual Rule VII). The following premium discounts are applicable to Standard Premiums. Note: Premium Discount is not applicable to Assigned Risk policies.

	Type A Discount	Type B Discount
First	0.0%	0.0%
Next	9.1%	5.1%
Next	11.3%	6.5%
Over	12.3%	7.5%

**United States Longshore and Harbor Workers' Compensation Coverage** Percentage applicable only in connection with Rule XII-D-3. "U.S. Longshore and Harbor Workers' Compensation Act" of the MA Manual..... 32.0%  
(Multiply a Non-F classification rate by a factor of 1.32)**EXPERIENCE RATING ELIGIBILITY**

A risk is eligible for intrastate experience rating when the payrolls or other exposures developed in the last year or last two years of the experience period produced a premium of at least \$11,000. If more than two years, an average annual premium of at least \$5,500 is required. Page A-1 of the Experience Rating Plan Manual should be referenced for the latest eligibility amounts by state.

**MANUAL SUPPLEMENT - TREATMENT OF DISEASE COVERAGE**  
**TABLE OF DISEASE ELEMENTS**  
**Disease Symbol: S = Silica**

Code #	Specific Disease Element	Disease Symbol
0059D†	.28††	S
0065D†	.12	S
0066D†	.10	S
0067D†	.10	S
1624D*	.06	S
1710D*	.12	S
3081D*	.15	S
3082D*	.19	S
3085D*	.15	S
5508D*	.07	S
6251D*	.07	S
6252D*	.07	S

† See Section IV – Supplementary Disease Rate under Manual Supplement – Treatment of Disease Coverage.

†† *Rate updated to reflect September 1, 2010 rate revision.*

\* The manual rates for these classifications include the specific disease element which is subject to removal. See Section III – Disease Loading under Manual Supplement – Treatment of Disease Coverage.

**RETROSPECTIVE RATING PLAN MANUAL  
STATE SPECIAL RATING VALUES**

*Effective September 1, 2010*

**MASSACHUSETTS  
RR1  
Original Printing**

<b>Hazard Group Differentials</b>						
A	B	C	D	E	F	G
2.17	1.69	1.43	1.29	1.09	0.84	0.60
1	2	3	4			
1.77	1.39	0.95	0.60			

**Tax Multipliers**

1.031*		
Federal Tax Multiplier		1.129

\* Includes 0.24% residual market subsidy provision

**3. Expected Loss Ratio**

0.629

**4. Loss Conversion Factor**

1.189

**Expected Loss and Allocated Expense Ratio**

0.697

**Allocated Loss Adjustment**

**Expense Option (ALAE Option)**

**Loss Conversion Factor**

1.073

**5. Table of Expense Ratios Excluding Taxes  
and Including Profit and Contingencies**

**Type A Company**

Massachusetts

Effective September 1, 2010

**Type B Company**

Massachusetts

Effective September 1, 2010

**6. 2008—Table of Expected Loss Ranges**

September 1, 2010

**Table of Expense Ratios Excluding Allocated  
Loss Adjustment Expense and Taxes  
and Including Profit and Contingencies**

**Type A Company**

Massachusetts

Effective September 1, 2010

**Type B Company**

Massachusetts

Effective September 1, 2010

**7a.**

**Excess Loss Factors**

(Applicable to New and Renewal Policies)

Per Accident Limitation	Hazard Groups							Hazard Groups †			
	A	B	C	D	E	F	G	1	2	3	4
\$25,000	0.382	0.408	0.433	0.456	0.476	0.506	0.541	0.402	0.440	0.493	0.541
30,000	0.363	0.390	0.416	0.440	0.461	0.492	0.531	0.384	0.423	0.479	0.531
35,000	0.347	0.374	0.401	0.426	0.448	0.480	0.521	0.367	0.409	0.466	0.521
40,000	0.332	0.359	0.387	0.414	0.436	0.468	0.513	0.352	0.395	0.454	0.513
50,000	0.305	0.333	0.362	0.392	0.414	0.447	0.497	0.326	0.371	0.433	0.497
75,000	0.254	0.282	0.312	0.346	0.369	0.403	0.461	0.275	0.323	0.389	0.461
100,000	0.217	0.243	0.274	0.310	0.333	0.366	0.431	0.237	0.285	0.352	0.431
125,000	0.189	0.212	0.242	0.279	0.301	0.333	0.404	0.206	0.254	0.320	0.404
150,000	0.166	0.187	0.216	0.254	0.274	0.305	0.379	0.182	0.228	0.292	0.379
175,000	0.147	0.166	0.194	0.232	0.250	0.279	0.358	0.161	0.206	0.267	0.358
200,000	0.131	0.149	0.176	0.212	0.229	0.257	0.338	0.144	0.187	0.245	0.338
250,000	0.107	0.122	0.146	0.181	0.195	0.220	0.303	0.118	0.157	0.209	0.303
300,000	0.089	0.102	0.124	0.156	0.168	0.191	0.273	0.099	0.134	0.181	0.273
500,000	0.051	0.059	0.074	0.097	0.105	0.120	0.192	0.057	0.081	0.114	0.192
1,000,000	0.023	0.027	0.034	0.047	0.051	0.059	0.103	0.026	0.038	0.055	0.103
2,000,000	0.010	0.012	0.015	0.021	0.023	0.027	0.051	0.011	0.017	0.025	0.051
3,000,000	0.006	0.007	0.009	0.013	0.014	0.017	0.032	0.007	0.010	0.016	0.032
4,000,000	0.004	0.005	0.006	0.009	0.010	0.012	0.023	0.005	0.007	0.011	0.023
5,000,000	0.003	0.004	0.005	0.007	0.008	0.009	0.018	0.004	0.005	0.008	0.018

† Carriers must advise the Bureau in writing by August 1 of each year if electing to use the four hazard group option for policies effective on or after September 1 of that year. The four hazard group option will expire September 1, 2011.

Effective September 1, 2010

7b.

**ALAE Option Excess Loss and Allocated Expense Factors**  
(Applicable to New and Renewal Policies)

Per Accident Limitation	Hazard Groups						Hazard Groups †				
	A	B	C	D	E	F	G	1	2	3	4
\$25,000	0.435	0.463	0.490	0.514	0.536	0.569	0.605	0.456	0.497	0.555	0.605
30,000	0.415	0.444	0.472	0.498	0.520	0.554	0.594	0.437	0.480	0.540	0.594
35,000	0.397	0.427	0.455	0.483	0.506	0.541	0.585	0.419	0.464	0.526	0.585
40,000	0.380	0.411	0.440	0.469	0.493	0.529	0.575	0.403	0.449	0.514	0.575
50,000	0.352	0.383	0.414	0.446	0.470	0.507	0.559	0.375	0.424	0.491	0.559
75,000	0.296	0.328	0.361	0.397	0.422	0.460	0.522	0.320	0.372	0.444	0.522
100,000	0.255	0.285	0.319	0.358	0.384	0.421	0.490	0.278	0.331	0.405	0.490
125,000	0.223	0.251	0.285	0.325	0.350	0.387	0.461	0.244	0.297	0.371	0.461
150,000	0.198	0.223	0.256	0.297	0.321	0.356	0.436	0.217	0.269	0.341	0.436
175,000	0.177	0.199	0.231	0.273	0.295	0.328	0.413	0.194	0.244	0.314	0.413
200,000	0.159	0.180	0.211	0.252	0.272	0.304	0.391	0.174	0.223	0.290	0.391
250,000	0.131	0.148	0.177	0.216	0.234	0.262	0.354	0.144	0.189	0.250	0.354
300,000	0.110	0.125	0.151	0.188	0.203	0.229	0.321	0.121	0.162	0.218	0.321
500,000	0.064	0.073	0.091	0.119	0.129	0.147	0.230	0.071	0.100	0.139	0.230
1,000,000	0.029	0.034	0.043	0.058	0.063	0.073	0.127	0.032	0.047	0.068	0.127
2,000,000	0.013	0.015	0.019	0.027	0.029	0.034	0.063	0.014	0.021	0.032	0.063
3,000,000	0.008	0.009	0.012	0.016	0.018	0.021	0.040	0.009	0.013	0.020	0.040
4,000,000	0.005	0.006	0.008	0.012	0.013	0.015	0.029	0.006	0.009	0.014	0.029
5,000,000	0.004	0.005	0.006	0.009	0.010	0.011	0.022	0.005	0.007	0.010	0.022

8. **Retrospective Development Factors**

With Loss Limit			Without Loss Limit			4th & Subsequent Adjustment
1st	2nd	3rd	1st	2nd	3rd	
Adj. 0.11	Adj. 0.07	Adj. 0.05	Adj. 0.14	Adj. 0.09	Adj. 0.06	0.00

9. **State Special Classifications by Hazard Group**

All Massachusetts Classifications by Hazard Group can now be found in the Massachusetts Workers' Compensation & Employers Liability Insurance Manual in the Appendix Section. Refer to Appendix G in the 2008 Edition.

† Carriers must advise the Bureau in writing by August 1 of each year if electing to use the four hazard group option for policies effective on or after September 1 of that year. The four hazard group option will expire September 1, 2011.

**TABLE OF EXPENSE RATIOS—EXCLUDING TAXES AND INCLUDING PROFIT AND  
CONTINGENCIES - TYPE A COMPANY - MASSACHUSETTS** *Effective 01 Sep 2010*

<b>Standard Premium</b>	<b>Expense Ratio</b>	<b>Standard Premium</b>	<b>Expense Ratio</b>	<b>Standard Premium</b>	<b>Expense Ratio</b>
0 -	10,057	0.341	18,101 -	18,479	0.301
10,058 -	10,173	0.340	18,480 -	18,874	0.300
10,174 -	10,291	0.339	18,875 -	19,287	0.299
10,292 -	10,413	0.338	19,288 -	19,718	0.298
10,414 -	10,537	0.337	19,719 -	20,168	0.297
10,538 -	10,665	0.336	20,169 -	20,640	0.296
10,666 -	10,795	0.335	20,641 -	21,134	0.295
10,796 -	10,929	0.334	21,135 -	21,652	0.294
10,930 -	11,066	0.333	21,653 -	22,197	0.293
11,067 -	11,206	0.332	22,198 -	22,770	0.292
11,207 -	11,350	0.331	22,771 -	23,373	0.291
11,351 -	11,498	0.330	23,374 -	24,008	0.290
11,499 -	11,650	0.329	24,009 -	24,680	0.289
11,651 -	11,806	0.328	24,681 -	25,390	0.288
11,807 -	11,966	0.327	25,391 -	26,142	0.287
11,967 -	12,130	0.326	26,143 -	26,939	0.286
12,131 -	12,299	0.325	26,940 -	27,788	0.285
12,300 -	12,473	0.324	27,789 -	28,691	0.284
12,474 -	12,652	0.323	28,692 -	29,655	0.283
12,653 -	12,836	0.322	29,656 -	30,686	0.282
12,837 -	13,025	0.321	30,687 -	31,791	0.281
13,026 -	13,220	0.320	31,792 -	32,979	0.280
13,221 -	13,421	0.319	32,980 -	34,259	0.279
13,422 -	13,629	0.318	34,260 -	35,642	0.278
13,630 -	13,842	0.317	35,643 -	37,142	0.277
13,843 -	14,063	0.316	37,143 -	38,774	0.276
14,064 -	14,291	0.315	38,775 -	40,555	0.275
14,292 -	14,526	0.314	40,556 -	42,508	0.274
14,527 -	14,769	0.313	42,509 -	44,659	0.273
14,770 -	15,020	0.312	44,660 -	47,039	0.272
15,021 -	15,280	0.311	47,040 -	49,687	0.271
15,281 -	15,549	0.310	49,688 -	52,651	0.270
15,550 -	15,828	0.309	52,652 -	55,991	0.269
15,829 -	16,117	0.308	55,992 -	59,784	0.268
16,118 -	16,417	0.307	59,785 -	64,127	0.267
16,418 -	16,728	0.306	64,128 -	69,152	0.266
16,729 -	17,051	0.305	69,153 -	75,030	0.265
17,052 -	17,387	0.304	75,031 -	82,000	0.264
17,388 -	17,737	0.303	82,001 -	90,399	0.263
17,738 -	18,100	0.302	90,400 -	100,714	0.262

Note: Above table based on the following discounts:

Standard Premium	Discount
First	10,000
Next	190,000
Next	1,550,000
Over	1,750,000
	0.0%
	9.1%
	11.3%
	12.3%

**MASSACHUSETTS**

Page 6

**Retrospective Rating Plan Manual - 2009 Edition**

**TABLE OF EXPENSE RATIOS—EXCLUDING TAXES AND INCLUDING PROFIT AND  
CONTINGENCIES - TYPE B COMPANY - MASSACHUSETTS** *Effective 01 Sep 2010*

<b>Standard Premium</b>	<b>Expense Ratio</b>	<b>Standard Premium</b>	<b>Expense Ratio</b>	<b>Standard Premium</b>	<b>Expense Ratio</b>
0 - 10,102	0.341	19,814 - 20,640	0.316	237,014 - 255,905	0.291
10,103 - 10,313	0.340	20,641 - 21,539	0.315	255,906 - 278,069	0.290
10,314 - 10,532	0.339	21,540 - 22,519	0.314	278,070 - 304,438	0.289
10,533 - 10,761	0.338	22,520 - 23,593	0.313	304,439 - 336,331	0.288
10,762 - 11,001	0.337	23,594 - 24,775	0.312	336,332 - 375,688	0.287
11,002 - 11,251	0.336	24,776 - 26,081	0.311	375,689 - 425,477	0.286
11,252 - 11,513	0.335	26,082 - 27,533	0.310	425,478 - 490,479	0.285
11,514 - 11,787	0.334	27,534 - 29,155	0.309	490,480 - 578,924	0.284
11,788 - 12,075	0.333	29,156 - 30,981	0.308	578,925 - 706,284	0.283
12,076 - 12,377	0.332	30,982 - 33,051	0.307	706,285 - 905,485	0.282
12,378 - 12,695	0.331	33,052 - 35,418	0.306	905,486 - 1,261,193	0.281
12,696 - 13,029	0.330	35,419 - 38,149	0.305	1,261,194 - 1,794,971	0.280
13,030 - 13,381	0.329	38,150 - 41,337	0.304	1,794,972 - 1,970,178	0.279
13,382 - 13,753	0.328	41,338 - 45,107	0.303	1,970,179 - 2,183,287	0.278
13,754 - 14,147	0.327	45,108 - 49,633	0.302	2,183,288 - 2,448,091	0.277
14,148 - 14,563	0.326	49,634 - 55,168	0.301	2,448,092 - 2,785,996	0.276
14,564 - 15,005	0.325	55,169 - 62,093	0.300	2,785,997 - 3,232,119	0.275
15,006 - 15,474	0.324	62,094 - 71,006	0.299	3,232,120 - 3,848,359	0.274
15,475 - 15,974	0.323	71,007 - 82,907	0.298	3,848,360 - 4,754,941	0.273
15,975 - 16,507	0.322	82,908 - 99,600	0.297	4,754,942 - 6,220,296	0.272
16,508 - 17,077	0.321	99,601 - 124,710	0.296	6,220,297 - 8,991,143	0.271
17,078 - 17,688	0.320	124,711 - 166,748	0.295	8,991,144 - 16,213,479	0.270
17,689 - 18,344	0.319	166,749 - 206,520	0.294	16,213,480 - OVER	0.269
18,345 - 19,050	0.318	206,521 - 220,718	0.293		
19,051 - 19,813	0.317	220,719 - 237,013	0.292		

Note: Above table based on the following discounts:

<b>Standard Premium</b>	<b>Discount</b>
First 10,000	0.0%
Next 190,000	5.1%
Next 1,550,000	6.5%
Over 1,750,000	7.5%

**TABLE OF EXPENSE RATIOS—EXCLUDING ALLOCATED LOSS ADJUSTMENT EXPENSE AND TAXES AND INCLUDING PROFIT AND CONTINGENCIES - TYPE A COMPANY - MASSACHUSETTS**

Effective 01 Sep 2010

Standard Premium	Expense Ratio	Standard Premium	Expense Ratio	Standard Premium	Expense Ratio
0 -	10,057	0.273	18,101 -	18,479	0.233
10,058 -	10,173	0.272	18,480 -	18,874	0.232
10,174 -	10,291	0.271	18,875 -	19,287	0.231
10,292 -	10,413	0.270	19,288 -	19,718	0.230
10,414 -	10,537	0.269	19,719 -	20,168	0.229
10,538 -	10,665	0.268	20,169 -	20,640	0.228
10,666 -	10,795	0.267	20,641 -	21,134	0.227
10,796 -	10,929	0.266	21,135 -	21,652	0.226
10,930 -	11,066	0.265	21,653 -	22,197	0.225
11,067 -	11,206	0.264	22,198 -	22,770	0.224
11,207 -	11,350	0.263	22,771 -	23,373	0.223
11,351 -	11,498	0.262	23,374 -	24,008	0.222
11,499 -	11,650	0.261	24,009 -	24,680	0.221
11,651 -	11,806	0.260	24,681 -	25,390	0.220
11,807 -	11,966	0.259	25,391 -	26,142	0.219
11,967 -	12,130	0.258	26,143 -	26,939	0.218
12,131 -	12,299	0.257	26,940 -	27,788	0.217
12,300 -	12,473	0.256	27,789 -	28,691	0.216
12,474 -	12,652	0.255	28,692 -	29,655	0.215
12,653 -	12,836	0.254	29,656 -	30,686	0.214
12,837 -	13,025	0.253	30,687 -	31,791	0.213
13,026 -	13,220	0.252	31,792 -	32,979	0.212
13,221 -	13,421	0.251	32,980 -	34,259	0.211
13,422 -	13,629	0.250	34,260 -	35,642	0.210
13,630 -	13,842	0.249	35,643 -	37,142	0.209
13,843 -	14,063	0.248	37,143 -	38,774	0.208
14,064 -	14,291	0.247	38,775 -	40,555	0.207
14,292 -	14,526	0.246	40,556 -	42,508	0.206
14,527 -	14,769	0.245	42,509 -	44,659	0.205
14,770 -	15,020	0.244	44,660 -	47,039	0.204
15,021 -	15,280	0.243	47,040 -	49,687	0.203
15,281 -	15,549	0.242	49,688 -	52,651	0.202
15,550 -	15,828	0.241	52,652 -	55,991	0.201
15,829 -	16,117	0.240	55,992 -	59,784	0.200
16,118 -	16,417	0.239	59,785 -	64,127	0.199
16,418 -	16,728	0.238	64,128 -	69,152	0.198
16,729 -	17,051	0.237	69,153 -	75,030	0.197
17,052 -	17,387	0.236	75,031 -	82,000	0.196
17,388 -	17,737	0.235	82,001 -	90,399	0.195
17,738 -	18,100	0.234	90,400 -	100,714	0.194

Note: Above table based on the following discounts:

	Standard Premium	Discount
First	10,000	0.0%
Next	190,000	9.1%
Next	1,550,000	11.3%
Over	1,750,000	12.3%

**MASSACHUSETTS**

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**Retrospective Rating Plan Manual - 2009 Edition**

**TABLE OF EXPENSE RATIOS—EXCLUDING ALLOCATED LOSS ADJUSTMENT EXPENSE AND TAXES AND INCLUDING PROFIT AND CONTINGENCIES - TYPE B COMPANY - MASSACHUSETTS**

Effective 01 Sep 2010

Standard Premium	Expense Ratio	Standard Premium	Expense Ratio	Standard Premium	Expense Ratio
0 -	10,102	0.273	19,814 -	20,640	0.248
10,103 -	10,313	0.272	20,641 -	21,539	0.247
10,314 -	10,532	0.271	21,540 -	22,519	0.246
10,533 -	10,761	0.270	22,520 -	23,593	0.245
10,762 -	11,001	0.269	23,594 -	24,775	0.244
11,002 -	11,251	0.268	24,776 -	26,081	0.243
11,252 -	11,513	0.267	26,082 -	27,533	0.242
11,514 -	11,787	0.266	27,534 -	29,155	0.241
11,788 -	12,075	0.265	29,156 -	30,981	0.240
12,076 -	12,377	0.264	30,982 -	33,051	0.239
12,378 -	12,695	0.263	33,052 -	35,418	0.238
12,696 -	13,029	0.262	35,419 -	38,149	0.237
13,030 -	13,381	0.261	38,150 -	41,337	0.236
13,382 -	13,753	0.260	41,338 -	45,107	0.235
13,754 -	14,147	0.259	45,108 -	49,633	0.234
14,148 -	14,563	0.258	49,634 -	55,168	0.233
14,564 -	15,005	0.257	55,169 -	62,093	0.232
15,006 -	15,474	0.256	62,094 -	71,006	0.231
15,475 -	15,974	0.255	71,007 -	82,907	0.230
15,975 -	16,507	0.254	82,908 -	99,600	0.229
16,508 -	17,077	0.253	99,601 -	124,710	0.228
17,078 -	17,688	0.252	124,711 -	166,748	0.227
17,689 -	18,344	0.251	166,749 -	206,520	0.226
18,345 -	19,050	0.250	206,521 -	220,718	0.225
19,051 -	19,813	0.249	220,719 -	237,013	0.224

Note: Above table based on the following discounts:

Standard Premium	Discount
First	10,000
Next	190,000
Next	1,550,000
Over	1,750,000

## EXPERIENCE RATING PLAN MANUAL

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Effective September 1, 2010

**TABLE OF EXPECTED LOSS RATES AND DISCOUNT RATIOS**

CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO
0005	1.17	.22	2002	1.74	.19	2683	1.00	.19	3241	1.11	.20	4053	0.88	.18
0008	1.00	.17	2003	1.38	.22	2688	1.23	.19	3255	1.66	.21	4061	1.42	.18
0016	1.42	.18	2014	1.59	.19	2702	4.76	.16	3257	1.30	.19	4062	1.29	.18
0034	1.50	.19	2021	1.43	.16	2710	2.35	.19	3270	0.83	.18	4112	0.28	.19
0035	0.90	.23	2039	1.31	.19	2731	1.95	.19	3300	3.02	.19	4113	0.88	.18
0036	1.50	.19	2041	1.19	.21	2741	2.89	.22	3305	(a)	(a)	4114	1.14	.19
0037	1.00	.17	2070	1.80	.18	2747	3.70	.17	3315	1.27	.21	4130	2.17	.20
0042	1.72	.19	2081	1.66	.21	2790	1.05	.18	3334	(a)	(a)	4133	0.94	.22
0046	1.19	.21	2089	1.07	.20	2802	1.97	.20	3336	1.34	.22	4150	0.49	.19
0050	2.35	.15	2095	1.80	.18	2835	1.07	.22	3365	3.71	.17	4239	1.44	.18
0059D	.	.	2101	1.17	.20	2836	1.54	.19	3372	1.07	.18	4243	1.29	.19
0065D	.	.	2105	(a)	(a)	2841	1.73	.19	3373	1.56	.20	4244	1.65	.18
0066D	.	.	2111	1.23	.22	2883	1.55	.20	3381	1.44	.22	4250	0.81	.19
0067D	.	.	2114	1.17	.20	2923	0.93	.20	3383	0.65	.22	4251	0.81	.20
0079	1.15	.18	2115	1.36	.17	2942	1.08	.23	3385	0.40	.19	4273	1.33	.20
0083	2.15	.17	2121	0.92	.19	3018	1.18	.17	3400	1.89	.20	4279	1.57	.20
0106	5.22	.18	2130	1.14	.17	3022	1.83	.20	3507	1.43	.19	4282	0.33	.20
0113	1.50	.19	2131	1.00	.20	3027	1.98	.17	3515	1.24	.21	4283	1.28	.19
0170	1.50	.19	2143	1.44	.19	3028	1.84	.23	3548	0.83	.20	4299	1.02	.20
0251	1.30	.19	2150	2.20	.22	3030	3.45	.16	3558	0.26	.15	4301	1.89	.15
0400	(a)	(a)	2156	3.35	.19	3040	3.15	.18	3559	0.83	.20	4304	1.74	.20
0401	(a)	(a)	2157	2.43	.22	3041	1.94	.17	3571	0.58	.17	4307	0.68	.21
0770	.	.	2172	0.70	.19	3042	1.96	.13	3574	0.91	.20	4308	0.44	.38
0773	.	.	2174	2.12	.17	3064	1.27	.18	3612	0.86	.19	4350	0.27	.23
0774	.	.	2211	2.48	.17	3066	1.27	.18	3620	2.06	.21	4351	0.41	.16
0775	.	.	2220	1.51	.18	3076	1.24	.19	3629	0.91	.20	4352	0.53	.20
0776	.	.	2260	2.43	.16	3081D	3.42	.18	3632	0.85	.20	4360	0.55	.19
0779	.	.	2286	1.66	.18	3082D	3.42	.18	3634	0.89	.21	4361	0.22	.18
0799	.	.	2288	1.00	.20	3085D	2.05	.18	3635	1.66	.23	4362	0.27	.19
0908	38.92	.16	2302	1.51	.18	3110	3.56	.20	3638	0.91	.20	4410	1.96	.18
0909	61.13	.20	2305	0.84	.19	3111	1.09	.20	3642	0.46	.19	4417	2.51	.22
0912	122.25	.20	2362	1.01	.19	3113	0.93	.19	3643	0.72	.20	4432	0.62	.22
0913	77.84	.16	2380	1.23	.21	3114	1.54	.21	3647	1.24	.21	4439	1.00	.16
0917	1.15	.24	2402	1.27	.17	3118	1.02	.19	3648	0.82	.21	4452	1.28	.18
0918	0.26	.23	2413	1.51	.18	3119	0.49	.21	3681	0.38	.20	4459	1.32	.19
1430	4.88	.23	2416	1.38	.18	3120	0.93	.22	3685	0.38	.20	4470	1.24	.21
1438	1.10	.18	2417	1.29	.19	3122	1.22	.20	3724	1.85	.18	4484	1.06	.20
1463	2.68	.15	2501	1.01	.20	3127	0.38	.19	3726	4.49	.12	4493	1.43	.19
1624D	1.90	.16	2503	0.47	.20	3131	0.91	.19	3807	2.02	.20	4511	0.15	.19
1655	2.46	.16	2534	1.11	.20	3132	1.11	.20	3808	1.69	.19	4512	0.06	.22
1701	2.02	.24	2570	2.24	.21	3145	0.82	.22	3821	1.72	.19	4557	0.70	.19
1710D	2.16	.16	2576	1.51	.20	3146	0.89	.18	3826	1.01	.22	4558	0.76	.20
1747	1.69	.17	2578	1.37	.20	3169	1.84	.20	3830	0.85	.20	4561	1.02	.16
1748	1.37	.19	2585	1.31	.20	3179	0.79	.20	3841	0.78	.21	4583	1.23	.17
1852	2.39	.12	2586	0.65	.20	3180	1.35	.21	4000	1.72	.17	4611	0.75	.23
1853	0.78	.16	2587	1.12	.19	3188	1.60	.17	4021	1.62	.17	4635	1.05	.15
1860	1.23	.21	2623	1.50	.21	3200	1.35	.21	4024	1.32	.18	4653	1.49	.22
1924	1.23	.20	2640	1.07	.19	3220	0.83	.21	4034	2.36	.18	4665	3.62	.16
1925	1.91	.18	2651	1.14	.19	3223	(a)	(a)	4036	1.14	.18	4692	0.27	.22
2001	1.51	.22	2660	0.97	.21	3227	2.02	.20	4038	1.15	.18	4693	0.43	.19

(a) Expected Loss Rates and Discount Ratios for each individual risk must be obtained by Home Office from the MA Bureau.  
D Supplement Disease Loading.

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**EXPERIENCE RATING PLAN MANUAL**  
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**TABLE OF EXPECTED LOSS RATES AND DISCOUNT RATIOS**

CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO	CLASS CODE	EXP LOSS RATE	DISC RATIO
5507	2.38	.15	7382	1.69	.19	8215	1.25	.18	9060	0.51	.20			
5508D	2.30	.15	7403	1.91	.18	8227	1.14	.16	9061	0.45	.19			
5509	1.16	.17	7405	0.50	.23	8232	1.79	.19	9063	0.30	.21			
5538	2.19	.16	7420	1.80	.11	8233	3.55	.17	9077F	1.80	.17			
5545	9.02	.15	7421	0.72	.15	8235	1.57	.20	9079	0.50	.21			
5547	4.97	.15	7422	0.62	.15	8263	2.53	.15	9088	(a)	(a)			
5606	0.55	.17	7425	1.03	.11	8264	1.89	.17	9089	0.56	.18			
5610	2.12	.15	7431	0.62	.15	8265	3.13	.17	9093	0.51	.22			
5645	2.93	.17	7445	.	.	8279	1.56	.19	9101	1.44	.22			
5651	2.93	.17	7453	.	.	8291	1.76	.20	9102	0.93	.22			
5701	6.92	.14	7502	1.55	.19	8292	1.59	.20	9154	0.50	.19			
5703	10.24	.13	7515	0.70	.18	8293	3.35	.23	9156	0.47	.20			
5705	4.27	.14	7520	1.30	.19	8350	2.05	.18	9178	8.24	.20			
6003	4.95	.14	7538	1.57	.15	8380	1.04	.19	9179	10.86	.26			
6005	2.30	.15	7539	0.42	.17	8381	0.72	.20	9180	1.61	.20			
6204	3.26	.17	7580	1.00	.19	8385	1.34	.18	9182	1.40	.20			
6217	1.47	.17	7590	2.69	.15	8392	0.51	.20	9186	1.42	.20			
6229	1.47	.17	7600	1.31	.18	8393	0.78	.19	9220	1.48	.23			
6233	1.29	.16	7601	1.82	.15	8500	3.55	.17	9402	1.99	.17			
6251D	2.02	.14	7610	0.08	.20	8601	0.11	.18	9403	2.77	.17			
6252D	2.28	.15	7704	0.64	.19	8709F	2.04	.14	9410	0.80	.20			
6306	2.57	.16	7720	0.70	.18	8710	0.88	.20	9501	1.34	.20			
6319	1.64	.16	7855	2.36	.16	8719	0.67	.20	9505	1.34	.20			
6325	1.48	.16	8001	0.66	.21	8720	0.41	.17	9519	1.02	.17			
6400	2.84	.17	8002	0.94	.18	8721	0.07	.19	9521	1.83	.16			
6504	1.17	.20	8006	0.63	.19	8726F	2.78	.15	9522	0.81	.18			
6801F	4.66	.21	8008	0.29	.21	8742	0.06	.19	9533	7.06	.15			
6811	3.91	.21	8010	0.69	.20	8745	1.40	.20	9534	1.89	.16			
6824F	3.59	.15	8013	0.19	.22	8747	0.52	.21	9545	1.57	.16			
6826F	4.45	.15	8017	0.52	.21	8748	0.19	.20	9549	1.96	.19			
6834	1.26	.18	8018	1.43	.20	8800	0.35	.19	9552	3.38	.16			
6836	0.98	.19	8021	1.13	.17	8803	0.02	.17	9553	2.98	.16			
6843F	4.31	.14	8031	1.09	.20	8810	0.04	.20	9586	0.21	.22			
6854	3.62	.14	8032	0.69	.21	8820	0.04	.20	9620	0.33	.17			
6872F	10.90	.13	8033	0.78	.20	8829	0.85	.20						
6874F	10.24	.13	8034	1.60	.19	8831	0.48	.20						
6882	9.15	.13	8039	0.73	.22	8832	0.09	.19						
6884	8.60	.13	8044	1.36	.18	8833	0.44	.21						
7133	(a)	(a)	8046	0.98	.19	8835	0.84	.20						
7219	2.95	.16	8048	1.48	.17	8837	(a)	(a)						
7230	2.66	.20	8050	0.76	.20	8868	0.28	.20						
7231	2.70	.18	8058	1.12	.20	8901	0.04	.20						
7309F	11.10	.12	8103	1.27	.16	9014	0.97	.19						
7313F	4.61	.13	8105	2.07	.16	9015	1.13	.19						
7317F	4.40	.10	8106	2.99	.19	9016	0.65	.20						
7327F	10.08	.18	8107	1.61	.19	9019	1.47	.16						
7350F	5.85	.14	8111	1.38	.19	9033	1.93	.18						
7360	2.22	.20	8116	1.64	.19	9040	1.33	.22						
7370	1.90	.21	8203	2.38	.18	9052	0.68	.20						
7380	2.43	.19	8204	2.19	.15	9058	0.69	.20						

(a) Expected Loss Rates and Discount Ratios for each individual risk must be obtained by Home Office from the MA Bureau.

F Expected Loss Rates and Discount Ratios for risks covered under the United States Longshore and Harbor Workers' Compensation Act.

D Supplement Disease Loading.

**EXPERIENCE RATING PLAN MANUAL  
PART FIVE**
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**MASSACHUSETTS**
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**2<sup>nd</sup> Reprint**
**TABLE OF WEIGHTING VALUES**

Expected Losses	Weighting Values	Expected Losses	Weighting Values	Expected Losses	Weighting Values
0 – 1,465	.04	414,704 – 447,441	.24	1,709,498 – 1,848,219	.44
1,466 – 5,925	.05	447,442 – 481,918	.25	1,848,220 – 2,002,922	.45
5,926 – 10,481	.06	481,919 – 518,279	.26	2,002,923 – 2,176,537	.46
10,482 – 43,009	.07	518,280 – 556,688	.27	2,176,538 – 2,372,758	.47
43,010 – 62,608	.08	556,689 – 597,322	.28	2,372,759 – 2,596,311	.48
				–	
62,609 – 81,298	.09	597,323 – 640,385	.29	2,596,312 – 2,853,332	.49
81,299 – 100,030	.10	640,386 – 686,101	.30	2,853,333 – 3,151,949	.50
100,031 – 119,130	.11	686,102 – 734,725	.31	3,151,950 – 3,503,149	.51
119,131 – 138,766	.12	734,726 – 786,547	.32	3,503,150 – 3,922,163	.52
138,767 – 159,046	.13	786,548 – 841,893	.33	3,922,164 – 4,430,733	.53
				–	
159,047 – 180,058	.14	841,894 – 901,136	.34	4,430,734 – 5,061,008	.54
180,059 – 201,878	.15	901,137 – 964,705	.35	5,061,009 – 5,862,615	.55
201,879 – 224,578	.16	964,706 – 1,033,092	.36	5,862,616 – 6,916,408	.56
224,579 – 248,231	.17	1,033,093 – 1,106,869	.37	6,916,409 – 8,363,612	.57
248,232 – 272,911	.18	1,106,870 – 1,186,699	.38	8,363,613 – 10,475,100	.58
				–	
272,912 – 298,698	.19	1,186,700 – 1,273,360	.39	10,475,101 – 13,844,488	.59
298,699 – 325,675	.20	1,273,361 – 1,367,769	.40	13,844,489 – 20,072,740	.60
325,676 – 353,934	.21	1,367,770 – 1,471,015	.41	20,072,741 – 35,479,449	.61
353,935 – 383,574	.22	1,471,016 – 1,584,400	.42	35,479,450 – 137,163,671	.62
383,575 – 414,703	.23	1,584,401 – 1,709,497	.43	137,163,672 – 999,999,999	.63

- (a) State Per Claim Accident Limitation ..... \$175,000
- (b) State Multiple Claim Accident Limitation ..... \$350,000
- (c) U.S. Longshore and Harbor Workers' Act Per Claim Accident Limitation ..... \$130,000
- (d) U.S. Longshore and Harbor Workers' Act Multiple Claim Accident Limitation ..... \$260,000
- (e) Employers Liability Accident Limitation ..... \$55,000
- (f) USL&HW Act—Expected Loss Factor—Non-F Classes ..... **19.1% †**
- (g) Cap on Modifications = 1 + (0.00005) [(Expected Losses) + (2) (Expected Losses) / (7.00)]

**† The USL&HW Act—Expected Loss Factor—Non-F Classes updated to reflect September 1, 2010 rate revision.**