

Texas Department of Insurance

Filings Made Easy

April 2024



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GENERAL INFORMATION

PURPOSE

To assist filers in making and submitting filings for property and casualty forms, rates/rules, credit scoring models, underwriting guidelines, and certificates of insurance under Title 28 of the Texas Administrative Code (TAC) Chapter 5, Subchapter M, Divisions 4 through 11 (known as the [Filings Made Easy rule](#)).

The *Filings Made Easy Guide* does not supersede the requirements of Texas laws and regulations governing the business of insurance. Insurers must be aware of and comply with all Texas laws and regulations.

CONTACT INFORMATION

Form, Underwriting Guideline, and Certificate of Insurance Filings

Texas Department of Insurance
Property and Casualty Division – Property and Casualty Lines Office
Mail Code PC-PCL
PO Box 12030
Austin, Texas 78711-2030
512-676-6710
PropertyCasualty@tdi.texas.gov

Rate/Rule and Credit Scoring Model Filings

Texas Department of Insurance
Property and Casualty Division – Property and Casualty Actuarial Office
Mail Code PC-ACT
PO Box 12030
Austin, Texas 78711-2030
512-676-6700
PCActuarial@tdi.texas.gov

STATUTORY AND REGULATORY REFERENCES

Throughout this guide, the *Texas Insurance Code* is referred to as TIC, and the *Texas Administrative Code* is referred to as TAC. Other statutes are clearly referenced within the text.

CONFIDENTIAL OR PUBLIC INFORMATION

If a filer marks its entire filing as confidential, TDI will reject the filing. TDI will also override any schedule tabs marked confidential.

Form filings: Form filings and supporting information are open to public inspection. Filers should not mark form filings or any portion of them as confidential. This does not apply to a commercial property

insurance filing submitted by a Lloyd's plan or a reciprocal or an interinsurance exchange under [TIC Chapter 2301](#).

Certificate of insurance filings: Filings and supporting information for certificates of insurance are open to public inspection. Filers should not mark certificate of insurance filings or any portion of them as confidential.

Rate/rule filings: Rate/rule filings and supporting information are considered public information under [TIC 2251.107](#). They are subject to open records requests. Filers can mark portions of their rate/rule filings confidential. If you mark items confidential, and we receive an open records request, we will ask the Texas Office of the Attorney General for a ruling.

To protect confidential documents from public view, companies must designate such documents as confidential in SERFF by clicking the appropriate box when uploading the documents. It is the responsibility of the company uploading the document to SERFF to ensure that confidential documents are protected by clicking the appropriate box. Simply labeling an individual document as "confidential," "proprietary," or other words denoting privacy will not prevent a document's disclosure to the public. Companies must click on the appropriate box to prevent documents from being publicly available. TDI will not perform this function.

Credit scoring model filings: Credit scoring models are open to public inspection.

Underwriting guidelines - personal automobile and residential property: [TIC 38.002](#) does not make underwriting guidelines confidential. They are subject to open records requests. Filers can mark portions of their underwriting guideline filings confidential. If you mark items confidential, and we receive an open records request, we will ask the Texas Office of the Attorney General for a ruling. See Commissioner's bulletin B-0021-15.

To protect confidential documents from public view, companies must designate such documents as confidential in SERFF by clicking the appropriate box when uploading the documents. It is the responsibility of the company uploading the document to SERFF to ensure that confidential documents are protected by clicking the appropriate box. Simply labeling an individual document as "confidential," "proprietary," or other words denoting privacy will not prevent a document's disclosure to the public. Companies must click on the appropriate box to prevent documents from being publicly available. TDI will not perform this function.

Underwriting guidelines - workers' compensation: [TIC 2053.035](#) and [38.003](#) make your underwriting guidelines confidential.

Underwriting guidelines - other commercial lines: [TIC 38.003](#) makes your underwriting guidelines confidential.

COPYRIGHT INFORMATION

Information included in a filing that is marked "copyright" may be made available for public disclosure in the same manner as information that is not marked "copyright." Public disclosure methods may include posting filings on TDI's website or making them available for viewing through SERFF.

PASSWORD-PROTECTED AND ENCRYPTED DOCUMENTS

Documents included in filings may **not** be encrypted or password protected.

PERSONALLY IDENTIFIABLE INFORMATION

Filings should not include any personally identifiable information (PII). PII is information that can be used either alone or in combination to distinguish an individual's identity. Examples of PII include:

- Any individual policyholder identification, including name, address, phone, or email.
- Social Security numbers.
- Insurance policy numbers.
- Drivers' license, identification card, vehicle identification, and license plate numbers.
- Debit, credit card, bank account, and routing numbers.
- Health information about individuals.

Do not submit filings containing PII. A filing with PII will be removed from public view and some, or all, of the filing must be withdrawn or rejected.

FILING REGULATION BY LINE OF INSURANCE

The following chart summarizes governing statutes and administrative rules for form and rate filing regulation for each line of insurance.

Line of Insurance	Form Filing Regulation		Rate Filing Regulation	
	TIC Chapter <i>unless noted</i>	Regulation	TIC Chapter <i>unless noted</i>	Regulation
Automobile – commercial	2301	Prior approval	2251	File and use
Automobile – personal	2301	Prior approval	2251	File and use
Boiler and machinery	2301	Exempt	2251	Exempt
Combination excess and umbrella - commercial	2301	Exempt	2251	Exempt
Commercial casualty ¹	2301	Prior approval	2251	File and use
Commercial tuition withdrawal insurance	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Contractual liability reimbursement	2301	Prior approval	2251	File and Use
Commercial credit insurance products that cover outstanding commercial debt, including trade credit	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Credit involuntary unemployment	2301	Prior approval	2251	File and use
Crime	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Cybersecurity – personal	2301	Prior approval	2251	File and use

¹ Depending on the coverage or line, form and rate/rule filings may be exempt. See [TIC 2251.0031](#) and [2301.0031](#).

Line of Insurance	Form Filing Regulation		Rate Filing Regulation	
	TIC Chapter <i>unless noted</i>	Regulation	TIC Chapter <i>unless noted</i>	Regulation
Cybersecurity – commercial, including first- and third-party commercial lines coverage for losses arising out of or relating to data privacy breaches, network security, computer viruses, and similar exposures	2301	Exempt	2251	Exempt
Directors’ and officers’ liability	2301	Exempt	2251	Exempt
Employee benefits liability	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Employment practices liability	2301	Exempt	2251	Exempt
Errors and omission liability	2301	Exempt	2251	Exempt
Environmental impairment or pollution liability	2301	Exempt	2251	Exempt
Excess liability – commercial	2301	Exempt	2251	Exempt
Excess liability – personal	2301	Prior approval	2251	File and use
Excess umbrella – commercial	2301	Exempt	2251	Exempt
Excess umbrella - personal	2301	Prior approval	2251	File and use
Farm liability	2301	Prior approval	2251	File and use
Farm and ranch and farm and ranch owners	2301	Prior approval	2251	File and use
Fidelity bonds	2301	Exempt	2251	Exempt
Fidelity insurance	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Fiduciary liability	2301	Exempt	2251	Exempt

Line of Insurance	Form Filing Regulation		Rate Filing Regulation	
	TIC Chapter <i>unless noted</i>	Regulation	TIC Chapter <i>unless noted</i>	Regulation
Financial guaranty	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Flood – commercial	2301	Exempt	2251	Exempt
Flood – personal	2301	Prior approval	2251	File and use
Guaranty bonds	2301	Prior approval	2251	File and use
GAP – dual interest (personal)	2301	Prior approval	2251	File and use
GAP - single interest (commercial)	TAC 5.5201	Exempt	TAC 5.5201	Exempt
General liability	2301	Prior approval	2251	File and use
Glass	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Hail insurance on farm crops	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Identity theft	2301	Prior approval	2251	File and use
Inland marine – group programs that provide coverage to individuals ²	2301	Prior approval	2251	File and use
Inland marine - commercial	2301	Exempt	2251	Exempt
Inland marine – personal ³	2301	Prior approval	2251	File and use
Involuntary unemployment	2301	Prior approval	2251	File and use
Kidnap and ransom	2301	Exempt	2251	Exempt

² See [TAC 5.5001-5.5008](#) for classes of inland marine and whether the rates, rules, and forms are filed or non-filed. For example, some classes of personal inland marine are non-filed.

³ Id.

Line of Insurance	Form Filing Regulation		Rate Filing Regulation	
	TIC Chapter <i>unless noted</i>	Regulation	TIC Chapter <i>unless noted</i>	Regulation
Liquor liability	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Media liability	2301	Exempt	2251	Exempt
Miscellaneous casualty ⁴	2301	Prior approval	2251	File and use
Mortgage guaranty	3502	File and use	3502	File and use
Mortgage guaranty pool	3502	Use and file	3502	File and use
Multi-peril	2301	Prior approval	2251	File and use
Owners and contractors protective liability	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Personal casualty	2301	Prior approval	2251	File and use
Personal liability	2301	Prior approval	2251	File and use
Pet	TAC 5.5008	Exempt	TAC 5.5008	Exempt
Political risk or expropriation	2301	Exempt	2251	Exempt
Product liability, product recall, or completed operations	2301	Exempt	2251	Exempt
Professional liability (medical)	2301	Prior approval	2251	File and use
Professional liability (other than medical)	2301	Exempt	2251	Exempt
Property – commercial, except highly protected commercial property	2301	Prior approval	2251	File and use

⁴ Depending on the coverage or line, form and rate/rule filings may be exempt. See [TIC 2251.0031](#) and [2301.0031](#).

Line of Insurance	Form Filing Regulation		Rate Filing Regulation	
	TIC Chapter <i>unless noted</i>	Regulation	TIC Chapter <i>unless noted</i>	Regulation
Property – highly protected commercial property	2301	Exempt	2251	Exempt
Property – residential (homeowners/dwelling)	2301	Prior approval	2251	File and use
Railroad protective liability	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Rain insurance	TAC 5.5201	Exempt	TAC 5.5201	Exempt
Surety bonds	2301	Exempt	2251	Exempt
Umbrella – commercial	2301	Exempt	2251	Exempt
Umbrella – personal	2301	Prior approval	2251	File and use
Workers' compensation	2052.002	<ul style="list-style-type: none"> • Standard policy/endorsements - promulgated • Non-standard endorsements - prior approval 	2053	File and use

OTHER EXEMPTIONS AND EXCEPTIONS

Lloyd's Plan, Reciprocal or Interinsurance Exchange. [TIC 2251.003\(c\)](#) and [TIC 2301.003\(d\)](#) specifies that these insurers are not required to file rates or policy forms with respect to inland marine insurance, rain insurance, or hail insurance on farm crops. [TIC 2251.003\(c\)](#) specifies that these insurers are not required to file rates for commercial property insurance.

Large Risks. [TIC 2251.101\(c\)](#) and [TIC 2301.004](#) exempts rate and form filings for use with an insured that has:

- (1) Total insured property values of \$5 million or more;
- (2) Total annual gross revenues of \$10 million or more; or
- (3) A total premium of \$25,000 or more for property insurance, \$25,000 or more for general liability insurance, or \$50,000 or more for multiperil insurance.

Farm Mutuals. These insurers are not required to file rates or policy forms. They are exempt from insurance laws other than [TIC Chapter 911](#) and those statutes listed in [TIC 911.001](#), unless the other law specifically provides that it applies to a farm mutual.

Risk Retention Groups. These insurers are not required to file rates or policy forms.

Risk Purchasing Groups. [TAC 5.9326](#) and [TAC 5.9337](#) clarify that forms and rates for RPGs must comply with the filing requirements of the FME rule. See [Commissioner's Bulletin # B-0016-15](#).

HOW TO FILE

LETTERS OF AUTHORIZATION

A third party representing an insurer on a filing must provide a letter of authorization signed by the insurer on the insurer's letterhead. The letter of authorization:

- Applies only to the filing with which it is submitted (e.g. includes a company tracking number, SERFF Tracking Number, or program name); and
- Must be currently dated.

This also applies to managing general agents (MGAs) submitting filings for insurers.

SERFF FILINGS

TDI requires that filings be submitted through the System for Electronic Rates and Forms Filing ([SERFF](#)).

Filings will be rejected if:

- The company does not have a Certificate of Authority (COA) to write business in Texas.
- The company name in the filing does not match the name in its COA.
- The company is not authorized to write the line of business in Texas.
- The filing does not include the NAIC group name and number, if they exist.

The company must use the correct type of insurance (TOI) and sub-TOI when submitting filings.

Do not include a transmittal form in your SERFF filing. The transmittal information is entered directly in SERFF.

AVAILABLE FILING TYPES

Texas requires separate filings for each filing type.

- Policy form.
- Endorsement (amendments).
- Rate/rule.
- Credit scoring model.
- Underwriting guidelines.
- Certificate of insurance.
- Specimen policy.

Each filing must relate to only one line of insurance, except for the following:

- Interline filings.
- Filings for multi-peril insurance.

ACCEPTABLE FILE FORMATS

You must submit attachments in PDF format. However, you may attach an Excel spreadsheet if you also submit a duplicate PDF version.

Policy forms, endorsements, and form usage tables must:

- Not be scanned documents.
- Not include any scanned text, or scanned images with text, that will be part of the insurance contract.
- Be in a format that is selectable and searchable.
- Be in portrait, not landscape, orientation.

POST SUBMISSION UPDATES

Filers may request a post submission update on open or closed filings. TDI will review the request and allow or disallow the change.

FILING EXHIBITS

TDI provides filing exhibits that filers can use to satisfy certain filing requirements. These are interactive PDF forms [here](#) on TDI's website.

TDI Form Number	Instructions	Title
Policy Form, Endorsements		
PC 424	PC 424	Form Usage Table
Rate/Rule		
PC 420	--	Exhibit A – Rate Filing Checklist
PC 365	PC 365	Exhibit C – Statewide Average Rate Level Information
PC 366	PC 366	Exhibit D – Historical Experience
PC 367	PC 367	Exhibit E – Expense Information – Including Disallowed Expense Adjustment
PC 368	PC 368	Exhibit F – Expense Information – For Workers' Compensation and Mortgage Guaranty
PC 369	PC 369	Exhibit G – Loss Cost Information for Reference Filings
PC 370	PC 370	Exhibit H – Multi-Peril Rate/Rule Reference Information
PC 371	PC 371	Exhibit L – Profit Provision Information
PC 376	PC 376	Exhibit WC – Workers' Compensation
PC 360	--	Exhibit MG – Company Certification for Mortgage Guaranty
PC 374	PC 374	Territory Exhibit 1 – Display of Counties Affected by 15% Territory Rule
PC 377	PC 377	Territory Exhibit 2 – Support for Territorial Deviations
PC 375	PC 375	CS Exhibit – Support for Use of Credit Scoring
PC 405	PC 405	CM Exhibit – Additional Information for Certain County Mutuals
EC-1 / PC 340	--	Certification of Sections 2251.251 – 2251.252 Exemption Compliance
PC 422	--	County Exhibit – Average Premium Change by County
Credit Scoring Model		
PC 361	PC 361	Credit Scoring Model Filing Form
PC 404	PC 404	Compliance Questionnaire – Use of Credit Information
Certificate of Insurance		
PC 419	PC 419	Certificate of Insurance Transmittal Form
Residual Market Filing		
PC 358	PC 358	Filing Transmittal Form

TDI Form Number	Instructions	Title
PC 421	--	Exhibit B – SERFF Rate Data

FORM FILINGS

Policy forms and endorsements subject to prior approval must be submitted to TDI at least 60 days before the effective date of the filing. The filing is deemed approved if it is not disapproved within 60 days. The Commissioner of Insurance may extend the period to approve or disapprove the filing an additional ten days by giving the filer notice. Forms are available for use on the date they are approved by TDI.

EFFECTIVE DATES – FORMS

- You may use policy forms and endorsements upon approval by TDI.
- Notification of a change in effective dates is not required for policy form, endorsement, and certificates of insurance filings.

REQUEST FOR DEEMER PERIOD WAIVER

An insurer may waive the deadlines by which the Commissioner must approve or disapprove a form by sending written notice to TDI.

An insurer that waives the deadlines may opt to withdraw its waiver by providing written notice of withdrawal and the withdrawal must be acknowledged by TDI in writing. The deemer period will begin upon acknowledgement.

FILING REQUIREMENTS

GENERAL FILING REQUIREMENTS FOR ALL FORM FILINGS

Form filings must contain the following:

1. Transmittal information (this is included in the General Information and State Specific tabs).
2. A copy of the proposed policy forms or endorsements.
3. A form number for each proposed form.
4. An edition date for each proposed form, if applicable.
5. The TDI file number or SERFF tracking number for the previously approved policy to which the proposed form will be attached, if applicable.
6. A form usage table that includes:
 - a. the form name and form number for each proposed form in the same order as they are shown on the Form Schedule,
 - b. information indicating whether each proposed form is optional, mandatory, or conditional mandatory, and
 - c. for conditional mandatory forms, an addendum to the form usage table that describes the conditions that make each form mandatory.
7. A memorandum that contains:
 - a. a detailed explanation of the reasons for the filing,
 - b. a description of the proposed policy forms or endorsements, and

- c. an explanation of each policy form and endorsement's use.
8. All provisions required by statute, administrative rule, or Commissioner's order.
9. For amended policy forms and endorsements, copies of previously approved or adopted policy forms or endorsements showing the differences between the approved/adopted ones and the filed ones.

TDI may request additional information specific to the filing.

ADDITIONAL REQUIREMENTS FOR PERSONAL AUTOMOBILE AND RESIDENTIAL PROPERTY FORMS

FLESCH SCORE. For personal automobile and residential property insurance, the Flesch Reading Ease Test readability score of at least 40 for filed forms or endorsements with 150 words or more. Each endorsement must be scored independent of the policy. For information about calculating the Flesch score, see [Commissioner's Order No. 92 - 0573](#), which established the minimum Flesch score and the plain language requirements described in the next two paragraphs.

PLAIN LANGUAGE. For personal automobile and residential property insurance, forms must:

- Be written in a clean and coherent manner.
- Be on paper that does not measure more than 8½ inches by 11 inches.
- Wherever practical, use words with common and everyday meanings to facilitate readability and to aid the insured or policyholder in understanding the coverage provided.
- Be printed, except for specification pages, schedules, and tables, in not less than 10-point type, and except for applications, specification pages, schedules and tables, such type is at least one point leaded.
- Be appropriately divided and captioned and prescribed in meaningful sequence; each section to contain an underlined, boldfaced or otherwise conspicuous title or caption at the beginning that indicates the nature of the subject matter included in or covered by the section.
- Have margins that are adequate for the purposes of readability.
- Be printed in such a manner that it includes sufficient contrast of ink and paper to be legible.

For personal automobile and residential property insurance, a **table of contents** or an index of the principal sections of the insurance policy if the insurance policy has more than 3,000 words or if the insurance policy has more than three pages regardless of the number of words.

INAPPLICABLE PROVISIONS. For new or amended personal automobile and residential property endorsements filed on or after January 1, 2025, insurers must enclose provisions that are variable text with brackets. The filings must also indicate that when the endorsement is attached to a policyholder's specific policy, the endorsement will not include any provisions that do not apply to that specific policy.

RESIDENTIAL PROPERTY DECLARATIONS PAGES. Insurers must file residential property policy declarations page forms for approval. (Declarations pages include renewal declarations pages, renewal certificates, amended declarations pages, and separate disclosure pages allowed under TAC 5.9700.) Filed declarations page forms must be completed with sample--not actual--policyholder information sufficient to demonstrate how the insurer will comply with [TIC 2301.056](#), [TAC 5.9327\(b\)](#), and [TAC 5.9700](#).

AUTO APPLICATION FORMS. For personal automobile insurance application forms, insurers must file:

- *For approval:* New or amended application forms that are part of the insurance policy.
- *For information purposes:* When an insurer files a new personal automobile policy form, application forms that are not part of the insurance policy.

INCOMPLETE FILINGS

A filing is incomplete if it does not include the required items above or those required for a reference filing. If TDI determines that a filing is incomplete, TDI will notify the filer and describe the deficiencies in the filing and the additional information required to complete the filing.

If the filing still has deficiencies on the date specified in the notice, TDI may reject the filing. Rejected filings will not be reopened for purposes of resubmission.

The deemer period does not begin until TDI receives a complete filing.

If your reference filing also includes your company's own policy forms or endorsements, you must attach those forms or endorsements to the filing. Do not attach the referenced forms.

FORM SCHEDULE TAB

Attach each form as a separate line item in the Form Schedule tab. Please show the complete name without abbreviations for each form/endorsement, regardless of its length. Each item must include a form number and an edition date, if applicable.

FORM USAGE TABLE

Submit the form usage table under the Supporting Documentation tab. The form usage table must indicate whether each form or endorsement is optional, mandatory, or conditional mandatory. Use the following definitions:

Form Usage	Description
Optional	The policy form or endorsement will be used only if the policyholder chooses to add it to their policy. Example: Optional – Personal Articles Endorsement.
Mandatory	The policy form or endorsement will be required on all policies. Example: Special Provisions – Texas.
Conditional mandatory	The company requires the policy form or endorsement in certain situations. Example: Cosmetic Damage for Metal Roofs Exclusion.

Optional endorsements that broaden or reduce coverage require a debit or credit to comply with the rate standards in [TIC 2251.052](#).

RATE/RULE FILINGS

All rates, rating manuals, rules, fees, and supplementary rating information must be filed in a rate/rule filing. [TAC 5.9333](#) lists the categories of supplementary rating information. Except as noted below, you must submit a filing to TDI on or before the date when the proposed rates go into effect. You are responsible for notifying TDI of any changes to the effective date before the effective date shown in the filing.

Sometimes an insurer submits fees, tiering rules, territory definitions or other rating information in an underwriting guideline filing. This may be because such information is commonly maintained in an "underwriter's manual" or "agent's manual." Regardless of how a document is labeled, if it contains information that is used to determine premium for an insured, it must be filed in a rate/rule filing. It is the filer's responsibility to ensure that all information is included in the correct filing type.

EFFECTIVE DATES – RATES/RULES

- You may use rates and rules for lines regulated under [TIC Chapter 2251](#) on or after the date they are filed. Include effective dates for new and renewal business when you file.
- For workers' compensation, rate/rule filings must be submitted at least 30 days before the effective date and filings may not be submitted any more frequently than once every six months.
- For mortgage guaranty insurance under [TIC 3502](#), rate/rule filings must be submitted at least 15 days before the effective date.
- Notification is required on effective date changes for rate/rule filings. You may request a change in effective date using a post submission update. Filers must notify TDI through a post-submission update before the effective date in the filing. Failure to provide timely notification of a change in effective dates may result in a violation of [TIC Chapter 2251, Subchapter C](#).

FILING REQUIREMENTS

Every filing should contain:

- Manual pages showing the proposed rates, fees, supplementary rating information, and rating rules.
- A filing memorandum.
- Supporting information required by [TAC 5.9334](#).

Use the [Quick Reference – Rate/Rule Filing Requirements](#) chart to determine what supporting information to provide. See the [Appendix for instructions](#) on completing the TDI's rate/rule filing exhibits.

FILING MEMORANDUM

The filing memorandum should explain the purpose of the filing and provide the relevant context or background details relating to the filing. The memorandum should describe all changes proposed in the filing. For example, it may describe proposed changes to existing rating factors, new rating factors or rate

classes being established, or editorial changes being made to rate/rule manual pages. It will reduce the amount of time it takes to review your filing if the memorandum is clear and complete.

ACTUARIAL SUPPORT

Under [TAC 5.9332](#), actuarial support “consists of sufficient documentation and analysis to allow a qualified actuary to understand and evaluate the rates, each component used in developing the rates, and the appropriateness of each material assumption.” Actuarial support should document the calculation of the indicated rates or rating factors from the starting data, including a description of each modification to the data and the specific model or other methodology used to develop the indicated rates or rating factors from the data. Actuarial support also includes a comparison of the indicated rates/factors to the selected rates/factors and must explain any differences between the indicated and selected.

Some form of actuarial support is recommended for virtually all rate filings. Filings to change existing rates or rating factors, as well as filings introducing new rates, should contain support for all the new or changed rates in the filing. Note that it is insufficient to simply reference a lack of data as a reason for not providing support. When filing new rates where there is no relevant actuarial data to analyze, the company should fully describe the factors considered and the judgments made when developing the proposed rates.

Rates which are developed using generalized linear modeling or other predictive modeling techniques should include detailed discussion of the modeling process. This should include a thorough description of the modeling data, data dictionary, variable selection process, model testing and validation, and any judgments made throughout the modeling process.

Under [TIC 2251.052\(d\)](#), in setting rates that apply only to policyholders in this state, an insurer shall use available premium, loss, claim, and exposure information from this state to the full extent of the actuarial credibility of that information. The insurer may use experience from outside this state as necessary to supplement information from this state that is not actuarially credible. Actuarial support must include the data and methodologies used to develop the proposed rates, and may address each of the following as they apply:

1. Rate indication, including all supporting detail as described in [TAC 5.9332](#)
2. Rate relativities (classification, territory, amount of insurance, tiers, etc.)
3. Increased limits factors
4. Deductible credits
5. Discounts and surcharges
6. Description of how final rates are selected based on the indicated rates

SUPPORTING INFORMATION

The FME Guide provides exhibits that filers may use to satisfy certain filing requirements. See the [Filing Exhibits](#) section for links to the exhibits and instructions. The instructions are also provided in the [Appendix](#).

THIRD-PARTY INFORMATION

Rate/rule filings must include information on third-party data and third-party models.

For each third-party data set used in ratemaking or to determine rates or premiums, include:

- The name of the data vendor or source;
- A description of the data, such as a data dictionary, that includes the name for each data element and its corresponding definition;
- A description of how the data is used in ratemaking or otherwise used to determine rates or premiums; and
- A list of the rating variables that reflect use of the data.

For each third-party model used in ratemaking or to determine rates or premiums, include:

- The name of the model vendor or source;
- The model name and version number;
- A description of the model;
- A description of the model input;
- A description of how the model output is used in ratemaking or to determine rates or premiums; and
- A list of the rating variables that depend on the output of the model.

REDUCED RATE/RULE FILING REQUIREMENTS FOR CERTAIN INSURERS

APPLICABILITY

This section is intended to assist insurers complying with [TAC 5.9355 – 5.9357](#) (Division 9 – FME – Reduced Filing Requirements for Certain Insurers) and [TAC 5.5101](#).

REDUCED RATE/RULE FILING REQUIREMENT CATEGORIES, CRITERIA, AND INSTRUCTIONS

Exemption Category	Criteria for Reduced Filing Requirements	Required Documentation
<p>TIC 2251.251 – 2251.252 TAC 5.9357</p> <p>Underserved residential property</p>	<p>During the calendar year preceding the date of the filing</p> <ol style="list-style-type: none"> (1) the insurer and the insurer’s affiliated companies or group must have a market share of less than 2%, (2) for which more than 50% of the policies cover property <ol style="list-style-type: none"> a) valued at less than \$100,000, and b) located in an underserved area as designated by the Commissioner of Insurance. <p>Except an insurer that otherwise meets the criteria for reduced filing as outlined above does not qualify for reduced filing if it either:</p> <ol style="list-style-type: none"> (1) increases rates by an amount that is 10 percent or more over the amount the insurer charged policyholders for equivalent coverage the preceding calendar year; or, (2) increases rates by an annual average amount of 8 percent or more for three consecutive calendar years, not including any year in which there is a weather-related catastrophe or other major natural disaster that requires the commissioner to extend the claim-handling deadlines under TIC 542.059(b) 	<p>In addition to the rates, rating manuals, rating rules, fees, or supplementary rating information being filed, the filing must include:</p> <ul style="list-style-type: none"> • Certification of Exemption Compliance (form EC-1). • Rate change information (see exhibit C in the Rate/Rule Filing section). <p>Note: personal insurance rate/rule filings may also require supporting data for territory deviations or for the use of credit scoring or credit information. See the Rate/Rule Filing section for additional information.</p>

Exemption Category	Criteria for Reduced Filing Requirements	Required Documentation
<p>TAC 5.5101</p> <p>Commercial multi-peril for Lloyd's plans, reciprocals, and interinsurance exchanges</p>	<p>Commercial multi-peril policies containing only the following coverages:</p> <ol style="list-style-type: none"> (1) general liability (2) commercial property (3) commercial casualty, including boiler and machinery, commercial crime, commercial glass, and professional liability; but excluding commercial automobile, fidelity, surety and guaranty bonds, financial guaranty, and workers' compensation; (4) medical professional liability; (5) inland marine; and (6) garage insurance, including all coverages and endorsements included in the Texas Garage Policy, except for those coverages specifically rated based on the risk characteristics of the automobile or the person driving. 	<p>A schedule of the amounts to be charged policyholders or applicants and the amounts of any rate changes for all lines of insurance that are included in the commercial multi-peril policy, including commercial property and inland marine lines of insurance. The schedule shall include any amount charged, including rates, policy fees, service fees, and other fees that are charged or collected under TIC 550.001 or 4005.003.</p> <p>The filing must also include:</p> <ul style="list-style-type: none"> • Rate change information, page 1 only (see exhibit C in the Rate/Rule Filing section)

CREDIT SCORING MODEL FILINGS

This section applies to an insurer that writes personal insurance coverage as defined by [TIC Chapter 559](#) and that uses credit information or credit reports for the underwriting or rating of that coverage. [TAC 5.9350-5.9352](#) provide information on the filing requirements for credit scoring model filings.

FILING REQUIREMENTS

A complete filing contains the following documents. The filing may apply to only one line of insurance.

1. Credit Scoring Model Filing Form (PC 361)
2. Complete copy of the credit scoring model, including variable definitions (except in the case of reference filings as described below)
3. Compliance Questionnaire – Use of Credit Information (PC 404)

Reference filings – A credit scoring model filing may be made referencing a credit scoring model without including a copy of the referenced credit scoring model. The **complete** name of the model must be included on the Credit Scoring Model Filing Form.

Other filing types – Credit scoring model filings must be made separately from all other filing types due to distinct and separate statutes governing underwriting guidelines and credit scoring models. Do not combine with rates/rules, forms, endorsements, or underwriting guideline filings.

Group filings – Multiple companies in a group may file jointly if they use the same credit scoring model and in the same manner.

DIFFERENCES IN RATES CHARGED DUE SOLELY TO DIFFERENCE IN CREDIT SCORES

Supporting data required under [TAC 5.9941](#) should be included as part of an insurer's rate/rule filing. This data is required only when applicable changes are made rather than with every rate/rule filing. See the Rate/Rule Filing section for additional information.

DISCLOSURE FORM CONCERNING THE USE OF CREDIT INFORMATION

An insurer subject to [TIC 559](#) must issue Form CD-1 in accordance with [TAC 5.9940](#) subsection (d).

The disclosure form, unless identical to Form CD-1, must be submitted as a form filing with TDI before use. If the disclosure form is identical to Form CD-1, it does not need to be filed.

As provided in [TAC 5.9940](#) subsection (e), an insurer may use a disclosure form that

- Is allowed or approved for use in another state, and
- Complies with all requirements of this section and Form CD-1.

INSTRUCTIONS FOR CREDIT SCORING MODEL FILING FORM

- Item 1** Check the applicable box describing the credit scoring model. For reference filings, provide the exact name of the model being used. Example – ChoicePoint, Inc. “Attract Standard Auto” or Fair, Isaac and Company “Assist 2.0 TX PG 1003.”
- Item 2** Check the applicable box describing the use of the credit scoring model. For the purposes of this form, underwriting rules are those that designate if a particular insured may be written in a particular company – or the rules that designate which company within a group an insured should be written. Rating rules are those used within one company. They can be tiering rules, discounts, surcharges, etc.
- Item 3** An officer/designee of the company must sign to certify that the reference/filed credit scoring model complies with the TIC.

Note: Credit scoring models should not be confused with the underwriting rules and/or rating rules that utilize these models or the resulting scores. Underwriting rules and rating rules must be filed separately. Support for the use of credit scoring models (as required under [TAC 5.9941](#)) must be included in the rate/rule filings. This information should also be kept at hand as it may be requested by TDI.

UNDERWRITING GUIDELINE FILINGS

APPLICABILITY

Underwriting guidelines are required to be filed for:

- Personal automobile and residential property insurance ([TIC 38.002](#)).
- Workers' compensation insurance ([TIC 2053.034](#)).

All other lines are subject to [TIC 38.003](#) and are not required to be filed, unless specifically requested by TDI or the Office of Public Insurance Counsel (OPIC).

FILING REQUIREMENTS

Underwriting guideline filings must include:

- A comprehensive set of underwriting guidelines. **Attach these to the Rate/Rule Schedule tab.** Indicate "new" or "replacement" under Rate Action. Be sure to indicate the rule number or page number being replaced, if applicable, and provide the previous TDI file number or SERFF tracking number.
- A mark-up or redline version of the underwriting guidelines, clearly indicating any changes.
- For each third-party data set used in underwriting, provide:
 - The name of the data vendor or source;
 - A description of the data, such as a data dictionary, that includes the name for each data element and the corresponding definition;
 - A description of how the data is used in underwriting; and
 - A list of the underwriting guidelines that reflect the use of the data.
- For each third-party model used in underwriting, provide:
 - The name of the model vendor or source;
 - The model name and version number;
 - A description of the model;
 - A description of the model input;
 - A description of how the model output is used in underwriting; and
 - A list of the underwriting guidelines that depend on the output of the model.

Additional information, including the redline copy of the underwriting guidelines and information on the use of third-party data and models, must be submitted under the Supporting Documentation tab.

Filings must clearly indicate any changes in the underwriting guidelines resulting from a change in third-party data and modeling information. If a change in third-party data and modeling information does not result in a change in the underwriting guidelines, insurers do not need to make a filing.

An oral or electronic underwriting guideline must be converted to written form.

GROUP FILINGS

An insurer group or group of affiliated insurers may file one set of underwriting guidelines or update to underwriting guidelines on behalf of individual insurers in the group if the group clearly identifies which underwriting guidelines apply to each insurer within the group.

WHEN TO FILE

Insurers must file a comprehensive set of underwriting guidelines not later than the 10th day after an underwriting guideline has changed.

CERTIFICATE OF INSURANCE FILINGS

Line of Insurance	Form Regulation/Texas Insurance Code	Regulation	Texas Administrative Code
All lines	TIC 1811	Prior approval	TAC 5.9370 – 5.9376

An insurer or an agent may not issue a certificate of insurance unless the certificate is filed and approved by TDI, or is a standard form approved by TDI under [TIC 1811.103](#).

Filings for certificates of insurance filings must include:

- A typed or electronically completed Certificate of Insurance Transmittal Form PC 419.
- A copy of the proposed certificate of insurance form. The form must include a form number and an edition date.
- A marked copy of the certificate of insurance form, if applicable.
- The previously approved TDI file number or SERFF tracking number, when applicable.
- A filing memorandum.

Filers must submit certificate of insurance filings by SERFF, hand delivery, mail, or email at PCFilingsIntake@tdi.texas.gov.

For SERFF filings, if a filing includes contact company information, the company affirmatively consents to the release and disclosure of its company contact information, including any email addresses.

Once approved, insurers or entities other than insurers may use the certificates without having to submit a reference filing.

A list of approved certificates of insurance can be found [here](#) on TDI's website.

SPECIMEN FILINGS

In accordance with [TIC Chapter 1812](#), insurers writing the following lines of insurance must provide an electronic copy of their specimen policy to TDI and the Office of Public Insurance Council (OPIC): personal auto, commercial auto, inland marine and residential property. Specimen policies can be submitted in SERFF.

Specimen policy declaration pages must be previously approved and comply with [TIC 1812.003](#). The declarations page must

- Not contain personally identifiable information.
- State that the specimen policy is posted on insurer's website.
- Identify which posted specimen policy forms are included in the insured's policy.
- Explain how an insured can get a printed copy of the specimen policy forms at no charge.

The specimen policy may be posted to TDI's or OPIC's website.

DUAL FILINGS – EXPIRED JANUARY 7, 2024

Dual filings are no longer an option. See information on monoline filings.

INTERLINE FILINGS

An interline filing is one that may be used for more than one line of insurance submitted for:

- A. A policy jacket, declarations page, signature page, notice of cancellation, disclosure, schedule, general change form, company name change, or policyholder notice that is in a form or endorsement filing.
- B. Policy fees, service fees, and other fees that are charged or collected by the insurer under [TIC 550.001](#) or [4005.003](#) that is in a rate/rule filing.

Do not submit an interline filing referencing to adopt various monoline TDI file numbers or SERFF tracking numbers. It will be rejected.

To submit an Interline filing, use the Interline TOI and appropriate filing type. On Item 7 of the State Specific tab, provide the lines of business being filed. Use the lines shown in the *Filings Made Easy Guide*. Please note the following for Item 7:

- Do not use annual statement lines.
- Do not use abbreviated lines of insurance.
- Do not use program names.
- Do not include a risk purchasing group.
- Do not include exempt lines of insurance.

MONOLINE FILINGS

Monoline refers to a filing submitted for one line of insurance that may also be used in multi-peril insurance.

MULTI-PERIL FILINGS

Policies and rates for two or more lines of insurance that are subject to regulation under [TIC Chapter 2251](#) and [TIC Chapter 2301](#) are considered multi-peril insurance.

If multi-peril insurance includes only exempt lines of insurance, a filing is not required. If one or more lines are not exempt, a filing is required for the nonexempt lines. The table shows examples of different combinations of lines of insurance for multi-peril.

Line 1 (TIC 2251/2301)	Line 2 (TIC 2251/2301)	Filing required
Filed	Filed	Yes
Filed	Not filed (exempt)	Yes, for line 1
Not filed (exempt)	Not filed (exempt)	No

A multi-peril filing can adopt monoline TDI file numbers or SERFF tracking numbers.

ADVISORY ORGANIZATION FILINGS

Advisory organizations may file prospective loss costs, supplementary rating information, policy forms, and endorsements, subject to [TIC Chapter 1805](#).

Advisory organizations are subject to the same filing requirements as insurers, except that they do not need to include the following in their filings:

- Proposed effective dates.
- Form usage tables.
- Written premium and policyholder information.
- Policyholder impact information.
- Historical premium and loss information.
- Expense information.
- Profit provision information.

An insurer that subscribes to an advisory organization must make a reference filing to use the advisory organization's accepted or approved filing. Advisory organizations may not file on behalf of their subscribers.

REFERENCE FILINGS

Reference filings are used to adopt an advisory organization's or another insurance company's approved/accepted policy form, endorsement, rate, rule, or credit scoring model.

A reference filing may not include changes to an approved/accepted policy form, endorsement, rate, rule, or credit scoring model.

If your reference filing also includes your company's own policy forms or endorsements, you must attach those forms or endorsements to the filing. Do not attach the referenced forms.

Advisory organizations do not submit filings for their members in Texas. A company must file to affirmatively adopt an advisory organization's approved/accepted filings.

Do not submit a filing only to notify TDI of your company's intention not to adopt a filing.

Filers should:

- Include the name of the insurance company or advisory organization in the General Information tab and on item 6 of the State Specific tab.
- Use the correct line of insurance the filings were approved/accepted as.
- Use the correct filing type the filings were approved/accepted as. Note that some older filings are a combination of multiple filing types (policy forms, endorsements, manual rules, and rates). If you are referencing one of these filings, you must submit a separate filing for each filing type from the combination filing you intend to adopt. For example, if you only submit a policy form filing referencing a combination filing, the company has only adopted the policy forms and not the associated rates or rules.
- Use the rate/rule filing type to reference any combination of rate/rule, rate, and manual rule filings.
- Include TDI file numbers or SERFF tracking numbers being referenced on item 6 of the State Specific tab or attach a list in the Supporting Documentation tab for several numbers. For rate/rule filings referencing an advisory organization's filing, attach company exception pages. Do not attach loss costs or rules found in the advisory organization's filing.
- For rate/rule filings referencing another insurer's filing, attach all rates and rating information required under [TIC 2251.101](#), including information copied or derived from the referenced filing. Ensure all referenced information complies with current statutes and regulations before submitting a filing.
- Include proposed effective dates.
- For personal automobile, residential property, and personal multi-peril insurance, the filing must also include:
 - A list of each form and endorsement that the insurer will use from each referenced filing, and
 - A form usage table.

Filings should not include:

- A list of advisory organization tracking or circular numbers.
- A list of policy form/endorsement name and form number information.
- Documents in the referenced filing that are adopted without modification.
- A statement saying the company "is adopting all approved or accepted filings from an advisory organization" or "will auto-adopt all filings made by an advisory organization." The filing must include the TDI file numbers or the SERFF tracking numbers.

Show the reference filing information as illustrated below:

- ISO, TDI state tracking number S12221.
- AAIS, TDI link number 84602.
- XYZ Company, TDI file number 9200110010.
- ABC Company, SERFF tracking number ABCD-123456789.

Lists of approved/accepted filings from advisory organizations are [here](#) on TDI's website.

RESIDUAL MARKET FILINGS

Residual market entities (TWIA, FAIR, TAIPA, and JUA) can submit filings by SERFF, email, or mail. While these entities do not have to use SERFF, it helps expedite the filing process.

Filings not submitted through SERFF should be submitted using one of the following methods:

Email: PCFilingsIntake@tdi.texas.gov

Mail: Texas Department of Insurance
Property and Casualty Division – Property and Casualty Filings Intake and Open Records
Mail Code PC-INT
PO Box 12030
Austin, Texas 78711-2030

Deliver: Property and Casualty Division, MC: PC-INT
Texas Department of Insurance
Service Center
6th Floor, Room 6.900
1601 Congress Avenue
Austin, Texas 78701

TRANSMITTAL INFORMATION

Filings not submitted through SERFF must include a Filing Transmittal Form. Each entity is responsible for reproducing and accurately completing the transmittal form.

INSTRUCTIONS FOR TEXAS PROPERTY AND CASUALTY FILING TRANSMITTAL FORM

- Item 1** Show the name of the entity and its NAIC number, if available.
- Item 2** Show the entity filing number.
- Item 3** If the filing revises or replaces a previous filing, check "Revision/Replacement" and provide the TDI file number or SERFF tracking number that is being revised/replaced. A revision/replacement includes endorsements/forms, rules, and rates, to be used with a previously approved/accepted filing. If the filing is not a revision/replacement, then check "New Filing."
- Item 4** Show the effective date for the filing.
- Item 5** Show only one line of insurance.
- Item 6** Show the name, phone number (toll-free number, if available), address, and email address of the person able to provide additional information regarding the filing.

- Item 7** Check the applicable box describing the type of filing. Entities must submit separate filings for each filing type (forms/endorsements, rates/rules, underwriting guidelines, and credit scoring models).
- Item 8** Provide requested information, if applicable.
- Item 9** Indicate if you waive the form's deemer by checking "yes" or "no."

FREQUENTLY ASKED QUESTIONS

TDI FILE NUMBER

What is a TDI file number?

The TDI file number is the number that TDI assigns to a filing and includes:

- TDI link number.
- TDI number (old 10-digit file numbers that began with 9212).
- State tracking number.

FILING TYPES

Can I submit certificate of insurance forms with policy form or endorsement filings?

No. Certificate of insurance forms subject to [TIC Chapter 1811](#) must be filed separately using the "Certificate of Insurance" filing type.

In which filing type do I submit underwriting guidelines?

Underwriting guidelines that determine whether to accept or reject an applicant for coverage or to determine company placement within a group must be included in an underwriting guideline filing.

Guidelines or rules to determine how to classify risks that are accepted (e.g. tiering rules) must be included in a rate/rule filing. These may also be included in an underwriting guideline filing. Note that the definitions of underwriting guidelines and supplementary rating information in the TIC overlap.

INSURANCE LINES

What is commercial property insurance?

Commercial property insurance is defined in [TIC 2251.002](#) and [2301.002](#) as insurance coverage against loss caused by or resulting from loss, damage, or destruction of real or personal property provided through a commercial property insurance policy. The term includes any combination of:

- Commercial fire or allied lines;
- Commercial inland marine insurance;
- Commercial crime coverage;
- Boiler and machinery insurance other than explosion;
- Glass insurance provided as part of other coverage; and
- As authorized by commissioner rule, insurance covering other perils or providing other coverages or other lines of first party property insurance.

Can we file hired and nonowned auto with monoline general liability?

No. Hired and nonowned auto is a commercial automobile coverage. It is not a general liability coverage. If you intend to write hired and nonowned auto in conjunction with general liability, then the filing must be submitted as commercial multi-peril.

Can we complete Item 7 (Interline Filing) of the State Specific tab when submitting a multi-peril filing?

No. Interline filings and multi-peril filings are separate lines of insurance.

DUAL FILINGS**What happened to dual filings?**

The definition of dual filings was removed with amendments to the Filings Made Easy rule that was effective January 8, 2024.

MULTI-PERIL USE**I have a product that was submitted in a monoline filing. Can I use it in multi-peril insurance without filing it again?**

Yes. A filing submitted for a line of insurance that is subject to regulation under [TIC Chapter 2251](#) and [Chapter 2301](#) may also be used in multi-peril insurance.

ASSOCIATED FILINGS**What are associated filings?**

These are filings of different filing types submitted for concurrent changes to the same program. Examples of associated filings are:

- A revised policy form filing and a rate/rule filing.
- A new endorsement filing and a new credit scoring model.

Filings submitted for different lines of insurance cannot be associated filings.

NEW ENTRANTS**Does my company need to have its certificate of authority (COA) before I can submit a filing?**

Yes. TDI's Financial Regulation Division must have issued the COA for your company before you can make a filing in SERFF. If the company does not have its COA, we will reject the filing.

Note: The COA must include correct lines of insurance for the product you are filing.

CHANGES TO COMPANY NAME, LOGO, OR ADDRESS

What should we file if the company name changes?

Submit name change applications to TDI's Company Licensing and Registration Office. After you receive your revised Certificate of Authority from TDI showing the new company name, you must file updates to your form and rate/rule filings.

For form and rate/rule filings, provide a statement in the SERFF General Information tab confirming that the filing is only for a name change and that no additional changes have been made to the previous filings.

What should we file if the company logo or address changes?

You do not have to file forms to change the company logo or address.

Form Filing

The forms can be revised in one of two ways.

Option 1:

- File a name change endorsement explaining that the new company name replaces the previous company name wherever the company name appears.

Option 2:

- File the new version of your previously approved policy forms and endorsements with the company's new name.
- Include the TDI file numbers or SERFF tracking numbers for the previously approved forms in the SERFF Form Schedule.
- Update form numbers with the new edition date.

Rate/Rule Filing

- File the new version of the manual using the company's new name.
- Include:
 - Exhibit A.
 - Exhibit C pages 1 and 2.
 - A marked-up version of the revised rate and rule pages.
- Fill in the rate schedule tab with zeroes.

WITHDRAWN FORMS OR RATES

Do I need to make a filing to withdraw an approved form?

You ordinarily do not need to make a filing to tell us about withdrawing approved forms or form filings.

Sometimes, we may ask you to withdraw a previously approved form. In that case, we will update the previous filing to reflect the withdrawal.

Do I need to make a filing to withdraw previously approved/accepted rates or rules?

You do not need to request to withdraw previously approved/accepted rates or rules and you do not need to make a new filing to withdraw previously approved/accepted rates.

WITHDRAWAL PLAN FILINGS

Review TIC [Chapter 827](#) to determine whether a withdrawal plan must be submitted. Withdrawal plans are filed with the Company Licensing and Registration Office and are not submitted through SERFF. Do not submit a filing through SERFF for the sole purpose of filing a withdrawal plan.

For more information, see [here](#).

COMMON ISSUES FOUND IN FORM AND RATE/RULE FILINGS

This section is intended to assist filers by listing areas where filings are frequently deficient and require additional information before review can be continued or completed. Common issues include:

All Filing Types

- **(Attack of the) Cloned filings:** Incorrect information (TOI, Sub-TOI, Filing Type, filing description information, State Specific tab) is uploaded in the new filing which results in additional objections being sent.
- **Filing company name:** Names must match the Certificate of Authority (COA) issued by the Department.
- **TOI/Sub-TOI:** Incorrect for the line of insurance or information being filed.
- **Line of insurance:** Companies must have a COA for the line.
- **Filing type:** Incorrect filing submission. For example, submitting a policy form as an endorsement or including rate/rule pages in form filings.
- **Managing general agent (MGA):** The name that is submitted must match the license that is issued by the Department. Also, the MGA must be appointed by the company.
- **Risk purchasing groups (RPG):** The name of the RPG must be included in the filing. The RPG must be registered with the Department.
- **Reference filings:** Incorrect information submitted. Refer to "Reference Filings" in this Guide for details about submitting reference filings.

- **Documentation:** Vague or incomplete filing memorandum. Inaccurately labeled or named documents.

Form Filings

- **Form name:** Must be complete and match the form schedule.
- **Form number:** Must be complete and match the form schedule including the edition date, if applicable.
- **TDI file number or SERFF tracking number for previously approved policy form:** Missing, incorrect, or incomplete.
- **Form usage table:** Incorrect information.

Rate/Rule Filings

- Missing or incomplete actuarial support for proposed changes.
- Missing one or more categories of required supporting information.
- Incomplete information provided on company exhibits. Although the TDI Exhibits themselves are not required, the information requested in them is required. If you use your own version of a TDI exhibit, please make sure it contains at least as much information as the corresponding TDI exhibit. Note that using the TDI exhibits assists TDI staff in reviewing your filing.
- Exhibits for a relativity analysis that show an "indicated" factor but do not document the method that produced the factor.
- Exhibits that show selected relativities that do not follow the indicated relativities, with no explanation given for the differences between indicated and selected. If the proposed factors are not equal to the indicated factors, the company must explain how the proposed factors are determined from the indicated factors.

APPENDIX

QUICK REFERENCE – FORM REQUIREMENTS

	Automobile - Commercial	Automobile - Personal	Boiler and Machinery	Commercial Casualty	Credit/GAP Personal and Commercial	Credit Involuntary Unemployment (TIC Ch. 3501)	Crime	Farm Liability	Fidelity, Surety and Financial Guaranty Bonds or Insurance (Other than Criminal Court Appearance Bonds)	General Liability	Glass	Identity Theft (TIC Ch. 706)	Inland Marine - Commercial	Inland Marine - Personal	Rain, Crop, and Hail	Involuntary Unemployment	Medical Professional Liability	Misc. Professional Liability	Mortgage Guaranty	Mortgage Guaranty Pool	Multi-Peril	Personal Casualty	Personal Liability	Property - Commercial, Farm and Ranch and Farm and Ranch Owners	Property - Commercial Group Property	Property - Residential (Dwelling)	Property - Residential (Homeowners)	Umbrella	Workers' Compensation
Statutory Requirements																													
Toll free no./complaint notice (TIC 521.005; 521.051 - 521.056; 521.101 - 521.103; TAC 1.601)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Texas laws governing policies (TIC Art. 21.42)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Uninsured/underinsured motorist coverage (TIC 1952.101 - 1952.110)	X	X																											
Personal injury protection coverage (TIC 1952.151 - 1952.161)	X	X																											
Vehicles acquired during policy period (TIC 1952.059)		X																											
Vehicle impounded for drug violation (TIC 1952.057)	X	X																											
Transportation network companies' definitions and exclusions (TIC Ch. 1954)	X	X																											
Contractual limitations period – suits (Civil Practice and Remedies Code 16.070)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Notice requirements (Civil Practice and Remedies Code 16.071)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

	Automobile - Commercial	Automobile - Personal	Boiler and Machinery	Commercial Casualty	Credit/GAP Personal and Commercial	Credit Involuntary Unemployment (TIC Ch. 3501)	Crime	Farm Liability	Fidelity, Surety and Financial Guaranty Bonds or Insurance (Other than Criminal Court Appearance Bonds)	General Liability	Glass	Identity Theft (TIC Ch. 706)	Inland Marine - Commercial	Inland Marine - Personal	Rain, Crop, and Hail	Involuntary Unemployment	Medical Professional Liability	Misc. Professional Liability	Mortgage Guaranty	Mortgage Guaranty Pool	Multi-Peril	Personal Casualty	Personal Liability	Property - Commercial, Farm and Ranch and Farm and Ranch Owners	Property - Commercial Group Property	Property - Residential (Dwelling)	Property - Residential (Homeowners)	Umbrella	Workers' Compensation	
Contractual limitations period and claim filing period (TIC 2301.010)																										X	X			
Examination under oath of minors (Texas Family Code 151.001(a)(7))	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Rebating or discrimination (TIC Ch. 1806)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Specimen policies (TIC 1812.003)	X	X											X	X												X	X			
Notice of material change (TIC 2002.001)																										X	X			
Notice of material change (TIC 2002.102)																							X			X	X			
Notice of material change (TIC 551.055)		X																								X	X			
Additional insured provisions (TIC Ch. 151)									X																					
Portable electronics (TIC 551.202 - 551.205)												X	X																	
Electronic equipment policy (TAC 5.5008)												X	X																	
Jewelry – loss settlement (TIC 2002.004)													X													X	X			
Coverage for spouses and former spouses (TIC 1952.056; 2002.003)		X																								X	X			
Medical professional liability conditions/provisions (TIC Ch. 1901)																	X													
Punitive damages (TIC 1901.252)																	X													
Cancellation of policy after foreclosure (TIC 549.003)																										X	X			

	Automobile - Commercial	Automobile - Personal	Boiler and Machinery	Commercial Casualty	Credit/GAP Personal and Commercial	Credit Involuntary Unemployment (TIC Ch. 3501)	Crime	Farm Liability	Fidelity, Surety and Financial Guaranty Bonds or Insurance (Other than Criminal Court Appearance Bonds)	General Liability	Glass	Identity Theft (TIC Ch. 706)	Inland Marine - Commercial	Inland Marine - Personal	Rain, Crop, and Hail	Involuntary Unemployment	Medical Professional Liability	Misc. Professional Liability	Mortgage Guaranty	Mortgage Guaranty Pool	Multi-Peril	Personal Casualty	Personal Liability	Property - Commercial, Farm and Ranch and Farm and Ranch Owners	Property - Commercial Group Property	Property - Residential (Dwelling)	Property - Residential (Homeowners)	Umbrella	Workers' Compensation
Deductibles (TIC 2301.056 , TAC 5.9327 , and 5.9700)																									X	X			
Lien on insured property (TIC 2002.002)																										X	X		
Windstorm, hurricane, or hail exclusion (TIC 2210.205)																										X	X		
Disclosure guaranty fund non-participation (TIC 461.001 - 461.003 ; TAC 1.1001)					X	X													X										
Cancellation nonrenewal (TIC 551.051 - 551.055 ; 551.004)		X		X				X										X			X	X	X					X	
Cancellation nonrenewal (TIC 551.101 - 551.112)	X						X			X											X			X	X	X	X		
Cancellation or nonrenewal of certain policies issued to elected officials (TIC 551.151 - 551-152)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Refund of unearned premium (TIC 558.002)		X																								X	X		
Voiding coverage (TIC 705.003 - 705.004)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Notice of prompt payment of claims (TIC 542.051 - 542.061)	X	X	X		X	X	X		X		X	X	X	X	X	X						X	X	X	X	X	X	X	X
Notice of settlement of liability claims (TIC 542.151 - 542.154)	X	X		X			X	X	X								X	X				X		X	X	X	X	X	
Fire insurance: total loss of real property (TIC 862.053)																								X	X	X	X		
Interest of mortgagee or trustee (TIC 862.055)																								X		X	X		

Form of Regulation - Policy Forms and Endorsements	All policy forms and endorsements are prior approval, <u>except</u> : <ul style="list-style-type: none">• mortgage guaranty - file and use• mortgage guaranty pool - use and file• commercial group property - file for informational purposes only• workers' compensation<ul style="list-style-type: none">○ policy forms - promulgated TIC 2052.002○ endorsements: standard - promulgated TIC 2052.002○ endorsements: non-standard - prior approval TIC 2052.002○ negotiated deductible endorsements – prior approval 2053.202 and 2052.002
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QUICK REFERENCE – RATE/RULE FILING REQUIREMENTS

	TAC Citation ²	FME Exhibit ³	Filings for:								
			New Rates or Rules	Changes to Rates or Rules	Owner-occupied Homeowners ⁴	Personal Auto ⁴	Loss Cost Reference (except WC)	Loss Cost Reference (WC)	Mortgage Guaranty	Reduced Requirements ⁵	Short Track ⁶
Filing Information¹											
Transmittal information			X	X	X	X	X	X	X	X	X
Rates and supplementary rating information			X	X	X	X	X	X	X	X	X
Filing memorandum			X	X	X	X	X	X	X	X	X
Rate/rule filing checklist	1	A	X	X	X	X	X	X	X	X	X
Rate change information	2	C	X	X	X	X	X	X	X	X	X
SERFF company rate information	3		X	X	X	X	X	X	X	X	X
Loss cost information	4	G					X	X			
Actuarial memorandum	5		X	X	X	X	X	X	X		
Actuarial support	6		X	X	X	X	X	X	X		
Policyholder impact information	7				X	X				X	
Average rate change by county	8	County			X					X	
Historical premium and loss information	9	D		X	X	X	X	X	X		
Expense information (with disallowed expenses)	10	E	X	X	X	X	X				
Expense information	10	F						X	X		
Profit provision information	11	L	X	X	X	X	X	X	X		
Third-party data information	12		X	X	X	X	X	X	X		
Third-party model information	13		X	X	X	X	X	X	X		
Certification – mortgage guaranty		MG							X		

Filing Information ¹	TAC Citation ²	FME Exhibit ³	Filings for:								
			New Rates or Rules	Changes to Rates or Rules	Owner-occupied Homeowners ⁴	Personal Auto ⁴	Loss Cost Reference (except WC)	Loss Cost Reference (WC)	Mortgage Guaranty	Reduced Requirements ⁵	Short Track ⁶
Certification – TIC 2251.251 reduced filing		EC-1			X					X	
Multi-peril reference information		H		X ⁷							
Additional information for certain county mutuals		CM				X ⁸					
Workers' compensation information							X				
Territory exhibit – display of subdivided counties					X ⁹	X ⁹					
Territory exhibit – support for territorial deviations					X ⁹	X ⁹					
Credit scoring – support		CS		X ¹⁰	X ¹⁰	X ¹⁰					
Side-by-side comparison or mark up											X

¹ Items marked with an X are required for that type of filing. TDI may request additional information in accordance with [TAC 5.9335](#).

² Refers to relevant subsection of [TAC 5.9334\(h\)](#). For example, category 1 refers to rate filing checklists which are described in [TAC 5.9334\(h\)\(1\)](#). Descriptions of the information required in each supporting item are found [TAC 5.9332](#).

³ Refers to the exhibit title in the *Filings Made Easy Guide*. Filers may use these exhibits to satisfy the filing requirements for the respective category.

⁴ Excluding short track filings, [TAC Ch. 5, Division 9 filings](#), and filings for new rates.

⁵ See [TAC 5.9357](#) for applicability

⁶ See [TAC 5.9331\(b\)\(4\)](#) for definition.

⁷ Only required for multi-peril reference filings.

⁸ Only required for county mutuals that are operated in accordance with [TIC 912.056](#).

⁹ Only required for companies that use ZIP code rating or otherwise subdivide counties.

¹⁰ Only required for personal insurance that utilizes credit scoring.

RATE/RULE EXHIBIT INSTRUCTIONS

EXHIBIT C – STATEWIDE AVERAGE RATE LEVEL INFORMATION

Page 1 of this exhibit breaks down the statewide average rate change. Page 2 of the exhibit is where filers show their rate change history.

A company's revisions may be more detailed than the exhibit outlines. The company should submit an additional exhibit with a level of detail necessary to show the impact of each changed component.

SPECIFIC INSTRUCTIONS FOR CALCULATIONS

- Column D should be left blank for all filings other than Loss Cost Reference Filings.
- For Prospective Loss Cost Reference Filings
 - Column C is the percentage change in the underlying loss costs.
 - Column D should match line 7 of Exhibit G.
 - Column E is the overall change resulting from rate changes in the filing, other than changes to loss cost level or loss cost multiplier.
 - Column F is calculated as $[(1 + \text{column C}) \times (1 + \text{column D}) \times (1 + \text{column E})] - 1$. For example, if column C = -11.3%, column D = 22.2%, and column E = 10%, then column F = $[(0.887 \times 1.222 \times 1.100)] - 1 = 19.2\%$.
- For all other filings, column C is the percentage change in base rates, column E is the overall change resulting from rate changes other than to base rates, and column F is equal to $[(1 + \text{column C}) \times (1 + \text{column E})] - 1$.
- Line 1 column B should be used as weighting values when calculating the proposed rate level change percent for all coverages/forms combined. All coverages/forms must be included, even if only some coverages/forms are being changed. If there are no direct written premiums for the latest year, use an estimate of the anticipated premium distribution, and attach supporting detail of how the estimate was derived.
- Programs with fee income should always include a figure in line 2. For these programs:
 - Line 3 column B = Line 1 column B + Line 2 Column B.
 - Line 3 column F = $(\text{Line 1 column B} * \text{Line 1 column F} + \text{Line 2 column B} * \text{Line 2 column F}) / \text{Line 3 column B}$.
 - Line 3 column G = $(\text{Line 1 column B} * \text{Line 1 column G} + \text{Line 2 column B} * \text{Line 2 column G}) / \text{Line 3 column B}$.
 - Here is an example of lines 1, 2, and 3 for programs with fee income. This example only focuses on these lines. The lines for each coverage should still be included.

(A)	(B)	(C)	(D)	(E)	(F)	(G)
Coverage/form	Latest year direct written premiums	Base rate or loss cost change	Percentage change resulting from revised loss cost multiplier	Percentage change resulting from other updates	Overall change	Indicated change
1. All coverages/forms combined	\$ 1,000.00	10.0%	0.0%	0.0%	10.0%	20.0%
2. Fee income	\$ 100.00				15.0%	15.0%
3. Statewide Total	\$ 1,100.00				10.5%	19.5%

- For all other filings, line 3 columns F and G should equal line 1.
- Exhibit C page 2 should be completed with information on all filings for the program made in the prior 6 years. All fields are required.

EXHIBIT D – HISTORICAL EXPERIENCE

This exhibit displays historical premium, loss, and loss ratio experience.

GENERAL INSTRUCTIONS

- The Texas experience should be the amounts, or a subset of the amounts, reported on the Exhibit of Premiums and Losses in the Annual Statement (Statutory Page 14).
- The countrywide experience should be the amounts, or a subset of the amounts, reported on the Insurance Expense Exhibit (IEE), Part III, or Statutory Page 14.
- Provide an exhibit for each company in the filing.
- Provide information for the specific program and line of business to which the filing pertains.
- Provide experience for each of the most recent five calendar years.
- Calculate column E, the incurred loss and DCCE ratio, as column D ÷ column B.

EXHIBIT E – EXPENSE INFORMATION, INCLUDING DISALLOWED EXPENSE ADJUSTMENT

This exhibit displays historical expense information and selected provisions for lines of business other than workers' compensation and mortgage guaranty.

GENERAL INSTRUCTIONS

- Provide dollar amounts in thousands.
- Provide experience for at least the three most recent calendar years.
- The Texas experience on lines 1-4 and 10-11 should be the amounts, or a subset of the amounts, reported on the Exhibit of Premiums and Losses in the Annual Statement (Statutory Page 14 Data).
- The countrywide experience on lines 5-9 and 12-14 should match the amounts reported on the Insurance Expense Exhibit (IEE), Part III. The countrywide experience on line 8a and lines 9a through 9h should match the information reported by each insurer in response to the annual *TDI Call for Disallowed Expense Data*.
- The expense provisions listed on lines 15-20 should be those provisions that underlie your proposed rates. To the extent that these provisions differ from historical provisions, provide support. For new rates for which historical provisions are not available, complete lines 15-20 with projected expenses, with information supporting the projected expenses attached separately.
- Line 8b = line 8 – line 8a.
- Line 9g, Fees to advisory organizations – Under [TAC 5.9331](#), payments anticipated to be made to advisory organizations licensed to do business in Texas, for services authorized by [TIC Chapter 1805](#) for the development of statistical plans, data collection and reporting, the development and distribution of prospective loss costs, supplementary rating information, policy forms and endorsements, research, and the performance of inspections and other activities reasonably related thereto, are not disallowed expenses and should not be included in the amount on line 9g.
- Line 9h = line 9b + line 9c + line 9d + line 9e + line 9f + line 9g.
- Line 9i = line 9 – line 9a – line 9h, **limited to** a maximum of 110% of the industry median.
 - 110% of industry median – Industry information is [here](#) on TDI's website.
 - Each line of insurance that a company writes in Texas is counted separately in determining the median.
- Line 9j = line 9a + line 9i.
- Line 20, profit – TDI requires insurers to use a total rate of return methodology in the development of Texas rates. Income of all types (premiums, installment fees, investment income, realized capital gains and unrealized capital gains) from all sources (policyholder supplied funds and surplus) must be considered in a rate filing. The selected methodology should be based on a reasonable after-tax total rate-of-return on GAAP net worth. Using a traditional 5% profit, or any other unsupported profit loading is not acceptable. See Exhibit L for display of support for the profit assumption.

DEFINITIONS

- For filings under TIC [Chapter 2251](#), advertising expenses that are disallowed (line 8a) are defined as advertising expenses other than for advertising: (1) directly related to the services or products provided by the insurer, or (2) designed and directed at loss prevention.

EXHIBIT F – EXPENSE INFORMATION – FOR WORKERS’ COMPENSATION AND MORTGAGE GUARANTY

The purpose of this exhibit is to display historical expense information and selected provisions for workers’ compensation and mortgage guaranty filings.

GENERAL INSTRUCTIONS

- Provide dollar amounts in thousands.
- Provide experience for at least the three most recent calendar years.
- The Texas experience on lines 1-4 and 10-11 should be the amounts, or a subset of the amounts, reported on the Exhibit of Premiums and Losses in the Annual Statement (Statutory Page 14 Data).
- The countrywide experience required on lines 5-9 and 12-14 should be the amounts, or a subset of the amounts, reported on the Insurance Expense Exhibit (IEE), Part III.
- The expense provisions listed on lines 15-20 should be those provisions that underlie your proposed rates. To the extent that these provisions differ from historical provisions, support should be provided. For new rates for which historical provisions are not available, complete lines 15-20 with projected expenses, with information supporting the projected expenses attached separately.
- Line 20, profit and contingencies – TDI requires insurers to use a total rate of return methodology in the development of Texas rates. Income of all types (premiums, installment fees, investment income, realized capital gains and unrealized capital gains) from all sources (policyholder supplied funds and surplus) must be considered in a rate filing. The selected methodology should be based on a reasonable after-tax total rate-of-return on GAAP net worth. Using a traditional 5% profit, or any other unsupported profit loading is not acceptable. See Exhibit L for display of support for the profit assumption.

EXHIBIT G – LOSS COSTS REFERENCE INFORMATION

This exhibit is only applicable to loss cost reference filings.

GENERAL INSTRUCTIONS

- An insurer may reference the loss costs filed by an advisory organization to which it subscribes.
- Actuarial justification based on the insurer's loss experience must be provided for any loss cost modification factor. This justification may consist of an actuarial indication.
- The expense and profit provisions must match lines 15-20 of exhibit E or F, as applicable.
- Line 7 equals $[(\text{line 5}) / (\text{line 6})] - 1$.
- Line 10 equals $[(1 + \text{line 7}) \times (1 + \text{line 8}) \times (1 + \text{line 9})] - 1$.

If expense constants are used, provide, on a separate exhibit, the amount of the expense constant, a description of its derivation, and an explanation of how the expense ratios in line 3 were established to not duplicate the expenses implicit in the expense constant.

EXHIBIT H – MULTI-PERIL RATE REFERENCE INFORMATION

This exhibit is only applicable to multi-peril reference filings.

GENERAL INSTRUCTIONS

- A company may reference its own filed monoline rates.
- The filing must list each line of insurance for which rates are being referenced, along with the SERFF tracking number or TDI file number of the company's latest rate filing in each line.
- The company may also use this exhibit to reference package modification factors developed by an advisory organization.
- If the company making the filing develops its own package modification factors, the proposed factors and supporting data must be provided.

EXHIBIT L – PROFIT PROVISION INFORMATION

This exhibit details the methodology, assumptions, and support for the assumptions used to arrive at the profit provision underlying the proposed rates. **This exhibit is provided only as an example.** Insurers should provide their profit provision information in the format most suitable to their methodology, but the information provided should be sufficiently detailed to demonstrate that the proposed profit provision is expected to produce an after-tax return on equity that is reasonable in relation to the insurance coverage provided.

An Excel version of the exhibit is provided in [the personal lines indication templates](#).

GENERAL INSTRUCTIONS

- Line 1, Target after-tax return on GAAP equity: Provide the target after-tax rate-of-return as a percentage of GAAP equity. GAAP equity is required to make comparisons between businesses and industries of similar risk. Support for this line must be attached. Note that it is **not** sufficient to state that the value is management’s objective.
- Line 2, Ratio of GAAP equity to statutory surplus: Provide the GAAP equity to statutory surplus ratio. If your company is not required to provide GAAP financials, attach a description of the methodology used to calculate your target rate-of-return on surplus.
- Lines 4, 5, and 8 through 10 should match the company’s latest IEE.
- Line 12: Attach support for a value that differs from line 11.
- Lines 13 and 14 should match the company’s latest IEE.
- Line 17 should match the figure selected on Exhibits E, F, and G, as applicable.

EXHIBIT WC – WORKERS’ COMPENSATION INFORMATION

This exhibit is only applicable to workers’ compensation rate filings. It is provided to assist insurer’s compliance with [TIC 2053.002](#).

GENERAL INSTRUCTIONS

- For all first-time filings or if no prior experience, leave lines 2 and 3 of section 1 and all of section 2 blank.
- Show individual company experience.
- Experience for section 2 is for at least the five most recent policy years valued as of 12 months after the beginning of the policy year.
- Use premium-weighted averages in calculating the average schedule rating modification. Weight average schedule rating credits/debits on modified premium immediately prior to the application of schedule rating.
- Express the modification as a factor, where a factor of 1.00 implies an average schedule rating modification of zero. An average schedule rating modification of -10% should be reported as .90, and an average schedule rating modification of +15% should be reported as 1.15.
- Reflect changes in the average overall risk variations based on loss or expense considerations, including schedule rating, in on-level premium calculations.

TERRITORY RELATIVITIES

This section is intended to assist insurers in complying with [TIC 2251.052\(e\)](#), [2253.001](#), and [TAC 5.9960](#).

[TIC 2251.052\(e\)](#) states that, in determining rating territories and territorial rates, an insurer shall use methods based on sound actuarial principles. [TIC 2251.051\(d\)\(2\)](#) defines a rate as unfairly discriminatory if the rate does not bear a reasonable relationship to the expected loss and expense experience among risks. [TIC 544.002](#) and [544.003](#) state that a person may not vary the rate charged to an individual based on the individual's geographic location unless the charge is based on sound actuarial principles reasonably related to actual or anticipated loss experience. Changing territory relativities without actuarial justification is a violation of these statutes.

For an initial filing, the insurer must demonstrate that the proposed territory relativities are based on sound actuarial principles. Include documentation detailing the data and methodology used to develop the initial territory relativities. Insurers should use caution when developing territory relativities using non-actuarial data sources, such as quoting engines or non-insurance sources, such as census data. Prior to filing, the insurer should confirm that the data source is appropriate for this purpose, and that the vendor will provide detailed supporting information in response to the department's requests. [See [third-party information](#) for more details.]

For a revision to existing rates, the insurer must demonstrate, using a relativity analysis, that the current rate level is neither inadequate nor excessive for the geographic location in which the rate applies. Territories with similar loss experience should receive a similar rate change. As with initial filings, statute prohibits charging a rate that is not related to risk of loss.

[TIC 2253.001](#) provides that an insurer writing residential property or personal automobile insurance may not use rating territories that subdivide a county unless the county is subdivided and the rate for any subdivision within that county is not greater than 15% higher than the rate used in any other subdivisions in the county by that insurer.

[TAC 5.9960](#) makes an exception from this restriction if the rate is based on sound actuarial principles, is supported by data filed with TDI, and complies with all statutory and regulatory requirements.

Two sample exhibits are provided to assist insurers. These are samples only; company specific formats may also be sufficient.

Insurers that meet the requirements in [TIC 2253.001](#) and [TAC 5.9660](#) must still comply with the other statutes referenced in this section of the Guide. Companies should submit support for all new and updated territory rating factors to demonstrate compliance with [TIC 544.002](#), [544.003](#), and [2251.052\(e\)](#).

GENERAL INSTRUCTIONS

- For companies that use ZIP code rating or otherwise subdivide counties, compliance with [TAC 5.9960](#) should be addressed with every rate filing (except minor rule filings).

- Depending on the nature of the filing, this may be handled through 1) a simple statement in the cover letter, or 2) a brief exhibit detailing which counties are affected and supporting data or reference to supporting data as appropriate.

SUPPORTING DATA

- Companies should provide an exhibit detailing which counties are affected by the 15% territory rule (see Territory Exhibit 1). Per [TAC 5.9960](#), supporting data must be supplied to support deviations higher than 15% (see Territory Exhibit 2). If your company data is not fully credible, industrywide statistical plan data is available upon request.

TERRITORY EXHIBIT 1 – DISPLAY OF COUNTIES THAT ARE SUBDIVIDED

Sample Exhibit 1 displays all counties that are subdivided and their maximum base rate differentials.

This exhibit is provided for illustrative purposes for companies that need to comply with [TIC 2253.001](#) and [TAC 5.9960](#). Company analysis and exhibits may also be sufficient.

GENERAL INSTRUCTIONS

- For each county that is subdivided, list all the territories within that county.
- For each territory, list the base rate (or territory relativity, if applicable). One column should be used for each coverage and/or form with a unique set of deviations. For example, personal auto filings usually include columns for BI liability, PD liability, PIP, collision, and comprehensive. For homeowners filings, a column may be necessary for each different form (e.g. HO, tenants, condos, etc.). Modify the number of columns and headers as appropriate.
- For each county, calculate the highest differential within the county (max rate ÷ min rate).

SAMPLE – FOR ILLUSTRATIVE PURPOSES ONLY

County / Territory	BI Liability	PD Liability	PIP	Comprehensive	Collision
Sample county 1 (rates)					
Territory 63	\$69	\$149	\$43	\$143	\$291
Territory 163	\$61	\$121	\$43	\$160	\$250
Territory 263	\$75	\$161	\$44	\$125	\$295
Max difference	23%	33%	2%	28%	18%
Sample county 2 (rates)					
Territory 6	\$59	\$125	\$47	\$174	\$247
Territory 16	\$66	\$142	\$53	\$199	\$280
Max difference	12%	14%	13%	14%	13%

TERRITORY EXHIBIT 2 – SUPPORT FOR TERRITORIAL DEVIATIONS

Sample Territory Exhibit 2 provides supporting information for territory deviations.

This exhibit is provided for illustrative purposes for companies that need to comply with [TIC 2253.001](#) and [TAC 5.9960](#). Company analysis and exhibits may also be sufficient.

GENERAL INSTRUCTIONS

- Column 1 – List each territory.
- Column 2 – Provide the earned exposure for each territory. (Vehicle years, house years, etc.)
- Column 3 – Provide the earned premium for each territory. If any adjustments are made to the earned premium such as adjusting it to a base level, it should be footnoted or addressed in an actuarial memorandum.
- Column 4 – Provide the loss ratio for each territory.
- Column 5 – Provide credibility for each territory. Credibility method should be footnoted or addressed in an actuarial memorandum.
- Column 6 – Credibility weighted loss ratio
(column 4 x column 5) + [C x (1.00 – column 5)].
Complement of credibility (C) should be footnoted or addressed in an actuarial memorandum.
- Column 7 – Indicated relativity
Column 6 ÷ [base value of column 6]
Base value is typically statewide average. If any other value is used, it should be footnoted or addressed in an actuarial memorandum.
- Column 8 – Selected relativity from the proposed rates should be restated here for comparison purposes.
- Column 9 – Current relativity from existing rates should be restated here for comparison purposes. This column is only needed for revision filings.
- Column 10 – Percent change
((column 8 ÷ column 9) – 1) x 100%
This column is only needed for revision filings.

CS EXHIBIT – SUPPORT FOR THE USE OF CREDIT SCORING

Rate and rule filings must include support for the use of credit scoring. This section is intended to assist insurers writing personal insurance in complying with [TIC Chapter 559](#) and [TAC 5.9941](#).

[TIC Chapter 559](#) defines personal insurance as personal automobile, residential property, residential fire and allied lines, or a noncommercial insurance policy covering a boat, personal watercraft, snowmobile, or recreational vehicle.

[TIC Chapter 559](#) provides certain requirements pertaining to the use of credit information and credit scoring by insurers in Texas for underwriting or rating personal insurance policies.

[TAC 5.9941](#) specifies that an insurer may vary its rates charged to applicants or insureds for personal insurance policies due solely to credit scoring. The differences in rates charged due solely to credit scoring must be based on sound actuarial principles and supported by data filed with TDI.

This sample exhibit is provided for illustrative purposes only. It may not be appropriate for all situations. Company specific formats may also be provided.

GENERAL INSTRUCTIONS

- For companies that use credit scoring, compliance with [TAC 5.9941](#) should be addressed with any filing that mentions credit scoring.
- An exhibit providing supporting data should be included with any filing that modifies the portion of the rating system (discounts/surcharges/tiering, etc.) that uses credit scoring. This includes the introduction of the use of credit information or credit scoring.
- For clarity on filings in which no such change was made, it may be stated in the cover letter, filing memorandum, or actuarial memorandum that no change was made to the use of credit.
- Column 1 – Provide each insurance score category used including no-hit/no-score.
- Column 2 – Provide the earned exposure for each category.
- Column 3 – Provide the earned premium for each category. If any adjustments are made to the earned premium such as adjusting it to a base level, it should be footnoted or addressed in an actuarial memorandum.
- Column 4 – Provide the incurred losses for each category. Note, for coverages such as homeowners or comprehensive for auto, appropriate adjustments should be made to remove catastrophe losses and other non-recurring losses such as mold. These adjustments should be footnoted or addressed in an actuarial memorandum.
- Column 5 – The loss ratio should be calculated for each category.
Loss ratio = column 4 ÷ column 3
- Column 6 – The pure premium should be calculated for each category.
Pure premium = column 4 ÷ column 2
- Column 7 – Indicated relativity, loss ratio basis. The calculation should vary depending on how credit scores are used. For example, if a company uses a discount plan, it should be calculated as column 5 ÷ (maximum value in column 5). Similarly, if a company uses a combination

surcharge/discount plan, it should be calculated as column 5 ÷ (value of base category in column 5).

- Column 8 – Indicated relativity, pure premium basis.
Indicated relativity, pure premium basis = column 6 ÷ (value of base category in column 6)
- Column 9 – Selected factors/differentials from proposed rates should be restated here for comparison purposes.
- Column 10 – Current relativity from existing rates should be restated here for comparison purposes. This column is only needed for revision filings.
- Column 11 – Percent change. This column is only needed for revision filings.
Percent change = ((column 9 ÷ column 10) – 1) x 100%.

SUPPORTING DATA

- Supporting data under the requirements of [TAC 5.9941](#) should include insurance score categories, including no-hit/no-score, and a pure premium or loss ratio analysis supporting the proposed rate differentials.
- If a company has varying credit factors based on coverage and/or territory grouping, supporting information should be provided for each set of unique credit-based relativities.

CM EXHIBIT – ADDITIONAL INFORMATION FOR CERTAIN COUNTY MUTUALS

This exhibit is only applicable to certain county mutuals that qualify to continue to use managing general agents (MGAs), districts, or local chapters to manage a portion of the company's business independent of all other business of the county mutual in accordance with [TIC 912.056](#). For these companies, additional information is required by [TAC 5.9361](#). While the following exhibit may be used, a company form or filing memorandum may also be used if the information provided meets the requirements of [TAC 5.9361](#). This information is required for all lines of business.

GENERAL INSTRUCTIONS

- Line 1 – Show the name and license number of the filing entity. Check the appropriate box designating whether the filing entity is a MGA, district, or local chapter of a county mutual insurance company. Note, when filing for business written directly by the county mutual without the use of an independent MGA, district, or local chapter, this exhibit is not required.
- Line 2 – If the county mutual's contact information was included in the filing transmittal, this space may be used for MGA, district, or local chapter contact information. If the county mutual's contact information was not provided in the transmittal, it should be provided here.
- Line 3 – List the name and number of the forms and endorsements to be used by the MGA, district, or local chapter to which the filing pertains. Include the TDI filing number under which it was approved for use by the county mutual.

INFORMATION LINKS

[Filings Made Easy Rule](#)

[Property and Casualty Filing Review Requirement Checklists](#)

[Texas Insurance Code](#)

[Texas Administrative Code](#)

[Approved/Disapproved Form Filings](#)

[Approved/Disapproved Advisory Organization Filings](#)

[Certificates of Insurance](#)



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