	Filing Information							
Name of Insurer	Facility Association							
Type of Business	Ambulance							
New Business Effective Date	100 days post approval							
Renewal Business Effective Date	100 days post approval							
Board Order #	A.I. 20(2025)							
Board Decision	Approved							

Coverage	Indicated Rate Change	Proposed Rate Change
Bodily Injury	-3.0%	0.0%
Property Damage - Tort	-3.0%	0.0%
DCPD	-3.0%	0.0%
Uninsured Auto	-2.0%	0.0%
Underinsured Motorist		
Accident Benefits	-2.0%	0.0%
Collision	0.9%	0.0%
Comprehensive	-2.2%	0.0%
Specified Perils	0.0%	0.0%
All Perils		
Total Overall	-2.1%	0.0%

	Current Average Written Premium (\$)									
Statistical Territory	atistical Territory Bodily Injury PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	bodily ilijaly	ly ilijuly PD-Tort	DCFD	Auto	Motorist	Benefits	Comsion	hensive	Perils	All I Cilis
004	0	0	0	0		0	0	0	0	
005	1266	150	321	17		183	0	0	0	
006	0	0	0	0		0	0	0	0	
007	1320	150	305	16		170	896	460	0	

	Proposed Average Written Premium (\$)									
Statistical Territory	Bodily Injury	PD-Tort	DCPD	Uninsured Auto	Underinsured Motorist	Accident Benefits	Collision	Compre- hensive	Specified Perils	All Perils
004	0	0	0	0		0	0	0	0	
005	1266	150	321	17		183	0	0	0	
006	0	0	0	0		0	0	0	0	
007	1320	150	305	16		170	896	460	0	

	Rate Capping Provisions
Proposed Rate Cap	No
Length of Cap	

Summary of Changes/Additional Information							
Provide a general outline of the changes proposed in the filing.							
e.g. discount/surcharge changes, endorsement changes, rate group table updates, capping provisions, etc.)							
this filing propose algorithm changes, surcharge changes, and rule changes							

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	Filing Information							
Name of Insurer	Facility Association							
Type of Business	Funeral Vehicle							
New Business Effective Date	100 days post approval							
Renewal Business Effective Date	100 days post approval							
Board Order #	A.I. 20(2025)							
Board Decision	Approved							

Coverage	Indicated Rate Change	Proposed Rate Change
Bodily Injury	-0.4%	0.0%
Property Damage - Tort	-0.4%	0.0%
DCPD	-0.4%	0.0%
Uninsured Auto	-1.8%	0.0%
Underinsured Motorist		
Accident Benefits	-1.8%	0.0%
Collision	1.0%	0.0%
Comprehensive	-2.0%	0.0%
Specified Perils	0.0%	0.0%
All Perils		
Total Overall	-0.5%	0.0%

	Current Average Written Premium (\$)									
Statistical Territory	atistical Territory Bodily Injury PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	bodily ilijaly	101010	DCID	Auto	Motorist	Benefits	Comsion	hensive	Perils	KIITCIIIS
004	1562	42	363	22		239	390	291	0	
005	0	0	0	О		0	0	0	0	
006	0	0	0	0		0	0	0	0	
007	0	0	0	0		0	0	0	0	

Proposed Average Written Premium (\$)										
Statistical Territory	Statistical Territory Bodily Injury PD-Tort	PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils
Statistical Territory	Boully Illjuly	PD-TOIL	DCPD	Auto	Motorist	Benefits	Collision	hensive	Perils	All Perils
004	1562	42	363	22		239	390	291	0	
005	0	0	0	0		0	0	0	0	
006	0	0	0	0		0	0	0	0	
007	0	0	0	0		0	0	0	0	

	Rate Capping Provisions
Proposed Rate Cap	No
Length of Cap	

Summary of Changes/Additional Information						
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	Filing Information						
Name of Insurer	Facility Association						
Type of Business	Hotel & Country Club Bus						
New Business Effective Date	100 days post approval						
Renewal Business Effective Date	100 days post approval						
Board Order #	A.I. 20(2025)						
Board Decision	Approved						

Coverage	Indicated Rate Change	Proposed Rate Change
Bodily Injury	1.6%	0.0%
Property Damage - Tort	1.6%	0.0%
DCPD	1.6%	0.0%
Uninsured Auto	-2.5%	0.0%
Underinsured Motorist		
Accident Benefits	-2.5%	0.0%
Collision	-4.5%	0.0%
Comprehensive	-2.7%	0.0%
Specified Perils	-2.5%	0.0%
All Perils		
Total Overall	-1.5%	0.0%

	Current Average Written Premium (\$)									
Statistical Territory Bodily Injury	PD-Tort	Tort DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical relition	itory Bouny injury 15 fort		Auto	Motorist	Benefits	Combion	hensive	Perils		
004	440	42	48	4	0	45	670	311	72	
005	303	29	84	3	0	34	475	277	74	
006	128	9	-10	3	0	35	474	358	39	
007	348	31	34	3	0	39	449	225	359	

				Proposed Aver	age Written Pre	mium (\$)				
Statistical Territory Bodily Injury PD-Tort	PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	Boully Injury	PD-1011	DCPD	Auto	Motorist	Benefits	Considir	hensive	Perils	All Perils
004	440	42	48	4	0	45	670	311	72	
005	303	29	84	3	0	34	475	277	74	
006	128	9	-10	3	0	35	474	358	39	
007	348	31	34	3	0	39	449	225	359	

	Rate Capping Provisions
Proposed Rate Cap	No
Length of Cap	

Summary of Changes/Additional Information					
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this filing propose algorithm changes, surcharge changes, and rule changes					

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	Filing Information						
Name of Insurer	Facility Association						
Type of Business	Private Bus						
New Business Effective Date	100 days post approval						
Renewal Business Effective Date	100 days post approval						
Board Order #	A.I. 20(2025)						
Board Decision	Approved						

Coverage	Indicated Rate Change	Proposed Rate Change
Bodily Injury	-5.9%	0.0%
Property Damage - Tort	-5.9%	0.0%
DCPD	-5.9%	0.0%
Uninsured Auto	0.2%	0.0%
Underinsured Motorist		
Accident Benefits	-1.8%	0.0%
Collision	4.1%	0.0%
Comprehensive	1.0%	0.0%
Specified Perils	1.1%	0.0%
All Perils		
Total Overall	-3.9%	0.0%

	Current Average Written Premium (\$)									
Statistical Territory Bodily Injury	PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	bodily ilijary	101010	DCID	Auto	Motorist	Benefits	Comsion	hensive	Perils	KIITCIIIS
004	2323	257	402	3		39	877	511	491	
005	2405	274	262	3		35	624	287	0	
006	962	67	204	3		36	535	325	498	
007	724	70	99	6		61	0	739	443	

				Proposed Aver	age Written Pre	mium (\$)				
Statistical Territory Bodily Injury PD-Tor	PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	Boully Injury	PD-1011	DCPD	Auto	Motorist	Benefits	Considir	hensive	Perils	All Perils
004	2323	257	402	3		39	877	511	491	
005	2405	274	262	3		35	624	287	0	
006	962	67	204	3		36	535	325	498	
007	724	70	99	6		61	0	739	443	

	Rate Capping Provisions
Proposed Rate Cap	No
Length of Cap	

Summary of Changes/Additional Information					
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e.g. discount/surcharge changes, endorsement changes, rate group table updates, capping provisions, etc.)					
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	Filing Information						
Name of Insurer	Facility Association						
Type of Business	Public Buses						
New Business Effective Date	100 days post approval						
Renewal Business Effective Date	100 days post approval						
Board Order #	A.I. 20(2025)						
Board Decision	Approved						

Coverage	Indicated Rate Change	Proposed Rate Change
Bodily Injury	-1.2%	0.0%
Property Damage - Tort	-1.2%	0.0%
DCPD	-1.2%	0.0%
Uninsured Auto	-1.8%	0.0%
Underinsured Motorist		
Accident Benefits	-1.8%	0.0%
Collision	7.1%	0.0%
Comprehensive	-3.2%	0.0%
Specified Perils	-0.5%	0.0%
All Perils		
Total Overall	-0.9%	0.0%

	Current Average Written Premium (\$)									
Statistical Territory	ry Bodily Injury PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	bodily ilijaly	101010	DCID	Auto	Motorist	Benefits	Comsion	hensive	Perils	Killicilis
004	1512	150	91	12		136	273	365	437	
005	1872	196	76	13		146	257	332	314	
006	0	0	0	0		0	0	0	0	
007	2754	269	168	16		170	532	1020	437	

Proposed Average Written Premium (\$)										
Statistical Territory	tical Territory Bodily Injury PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	Boully Injury	PD-1011	DCPD	Auto	Motorist	Benefits	Considir	hensive	Perils	All Perils
004	1512	150	91	12		136	273	365	437	
005	1872	196	76	13		146	257	332	314	
006	0	0	0	0		0	0	0	0	
007	2754	269	168	16		170	532	1020	437	

	Rate Capping Provisions
Proposed Rate Cap	No
Length of Cap	

Summary of Changes/Additional Information						
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	Filing Information						
Name of Insurer	Facility Association						
Type of Business	School Bus						
New Business Effective Date	100 days post approval						
Renewal Business Effective Date	100 days post approval						
Board Order #	A.I. 20(2025)						
Board Decision	Approved						

Coverage	Indicated Rate Change	Proposed Rate Change
Bodily Injury	-4.6%	0.0%
Property Damage - Tort	-4.6%	0.0%
DCPD	-4.6%	0.0%
Uninsured Auto	0.2%	0.0%
Underinsured Motorist		
Accident Benefits	-1.5%	0.0%
Collision	0.7%	0.0%
Comprehensive	-3.5%	0.0%
Specified Perils	-0.1%	0.0%
All Perils		
Total Overall	-2.9%	0.0%

	Current Average Written Premium (\$)									
Statistical Territory Bodily Injury PD-Tort	PD-Tort	DCPD	Uninsured	Underinsured	Accident	Collision	Compre-	Specified	All Perils	
Statistical Territory	bodily ilijaly	101010	DCID	Auto	Motorist	Benefits	Comsion	hensive	Perils	Killicilis
004	480	63	53	8		92	319	221	0	
005	584	86	57	10		115	479	281	161	
006	0	0	0	0		0	0	0	0	
007	485	66	59	8		89	453	297	0	

	Proposed Average Written Premium (\$)									
Statistical Territory	Bodily Injury	PD-Tort	DCPD	Uninsured Auto	Underinsured Motorist	Accident Benefits	Collision	Compre- hensive	Specified Perils	All Perils
004	480	63	53	8		92	319	221	0	
005	584	86	57	10		115	479	281	161	
006	0	0	0	0		0	0	0	0	
007	485	66	59	8		89	453	297	0	

	Rate Capping Provisions
Proposed Rate Cap	No
Length of Cap	

Summary of Changes/Additional Information						
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e.g. discount/surcharge changes, endorsement changes, rate group table updates, capping provisions, etc.)						
this filing propose algorithm changes, base rate changes, surcharge changes, and rule changes						

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