

underwriting profit; (v) contingencies; (vi) Investment income from unearned premium reserve and reserve for losses; (vii) dividends, savings or unabsorbed premium deposits allowed or returned by insurers to their policyholders; (VIII) AND TO ALL OTHER RELEVANT FACTORS WITHIN AND OUTSIDE THIS STATE.

(2) Rates shall not be excessive, inadequate, or unfairly discriminatory.

(3) The systems of expense provisions included in the rates for use by any insurer or group of insurers may differ from those of other insurers or groups of insurers to reflect the requirements of the operating methods of any such insurer, or group with respect to any kind of insurance, or with respect to any subdivision or combination thereof for which subdivision or combination separate expense provisions are applicable.

(4) Risks may be grouped by classifications for the establishment of rates and minimum premiums. Classification rates may be modified to produce rates for individual risks in accordance with rating plans which establish standards for measuring variations in hazards or expense provisions, or both. The standards may measure any difference among risks that can be demonstrated to have a probable effect upon losses or expenses.

(5) Uniformity among insurers in any matters within the scope of this subsection is neither required nor prohibited.

(6) UNLESS THE FILER DEMONSTRATES THAT THE PROPOSED RATE IS NOT EXCESSIVE OR INADEQUATE OR UNFAIRLY DISCRIMINATORY, THE COMMISSIONER MAY DISAPPROVE THE FILING.

(d) Rate filings.

(1) Every insurer, except as otherwise provided below, shall file with the Commissioner every manual, ~~minimum~~ POLICY FORM, ENDORSEMENT, MINIMUM RATE, class rate, rating schedule or rating plan and every other rating rule, and every modification of any of the foregoing which it proposes to use. Every filing shall state the proposed effective date thereof and shall indicate the character and extent of the coverage contemplated.

(2) When a filing is not accompanied by the information upon which the insurer supports the filing and the Commissioner does not have sufficient information to determine whether the filing meets the requirements of this section, he shall require the insurer to furnish the information WITHIN 60 DAYS upon which it supports the filing and in this event the waiting period shall commence as of the date the information is furnished. The information furnished in support of a filing may include (i) the judgment of the filer, (ii) its interpretation of any statistical data it relies upon, (iii) the experience of other filers, or (iv) any other relevant factors.

(3) Each filing must include the experience of the filer.

(4) A filing and any supporting information shall be open to public inspection upon the date of filing; if the Commissioner determines it to be in the public interest, and in any case after the filing becomes effective.