

July 6, 2006

ALL ASSOCIATION MEMBERS

Circular Letter No. 06-1488

**RE: [CORRECTION] NCCI Item U-1396 — URE Workers Comp. Statistical Plan Update**

The purpose of this circular is to inform you of a housekeeping matter in connection with the above filing item distributed May 31, 2006 as Circular Letter No. 06-1483. It has come to the attention of MWCIA staff that one of the exhibits distributed as part of the above filing for Minnesota contains an error.

**EXHIBIT VI —**

Page Two of Exhibit VI for Item U-1396 misidentifies the section being revised on the second page of the exhibit as Section One, Part XII.12 of the ***Minnesota Unit Statistical Plan Manual*** instead of Appendix A. Inasmuch as the change to Appendix A is already illustrated as part of Exhibit X, MWCIA staff have deleted Page Two of Exhibit VI for NCCI Item U-1396 in Minnesota.

To correct everyone's records, we are distributing a revised copy of Exhibit VI showing Page Two with a large red 'X' to indicate that this page has been eliminated from the Minnesota exhibits previously distributed in connection with MWCIA's filing of Item U-1396.

**Please Note:** This correction is a 'housekeeping' item only and the error has no impact on the approval of Item U-1396 in Minnesota. This circular is being released to correct your records by replacing Exhibit VI with a revised copy of Exhibit VI that eliminates the redundant material on Page Two.

Please direct any questions you may have regarding filing Item U-1396 to Pamela Flaten, Data Collection & Reporting Manager, at 952.897.6417 or by email at [pam.flaten@mwcia.org](mailto:pam.flaten@mwcia.org).

**A NOTICE TO MEMBERSHIP:**

The Minnesota Department of Commerce requests that MWCIA remind its members that the above filing only applies automatically to insurance companies who have filed a Limited Power of Attorney agreement with our Commerce Department. A properly executed Limited Power of Attorney authorizes MWCIA to make filings on behalf of individual insurance companies. Any insurance company who has not filed a Limited Power of Attorney must independently submit the changes represented in each filing item to the Minnesota Department of Commerce for their approval.

## MINNESOTA UNIT STATISTICAL PLAN MANUAL

Effective July 1, 2006

CURRENT MN MANUAL LANGUAGE	PROPOSED MN MANUAL LANGUAGE	COMMENTS
SECTION ONE — REPORTING OF INDIVIDUAL EMPLOYER EXPERIENCE	SECTION ONE — REPORTING OF INDIVIDUAL EMPLOYER EXPERIENCE	
PART IV — REPORTING INSTRUCTIONS—LOSSES	PART IV — REPORTING INSTRUCTIONS—LOSSES	
9. Loss Conditions	9. Loss Conditions	
Report the 2-digit code for each loss condition.	Report the 2-digit code for each loss condition.	
<b>PART</b> <b>DESCRIPTION</b>	<b>PART</b> <b>DESCRIPTION</b>	
<i>Type of Coverage</i> Workers' Compensation Only Employers' Liability Only Workers' Compensation & Employers' Liability Liability Over	<i>Type of <u>Claim</u></i> Workers' Compensation Only Employers' Liability Only Workers' Compensation & Employers' Liability Liability Over	NAME CHANGE INTENDED TO ALLEVIATE ANY MISUNDERSTANDING THAT THIS FIELD IS INTENDED FOR REPORTING THE 'TYPE OF CLAIM' & NOT THE TYPE OF COVERAGE THE POLICY IN QUESTION IS PROVIDING.
PART VII -- DATA VALUES AND STATISTICAL CODES	PART VII -- DATA VALUES AND STATISTICAL CODES	
<i>Loss Information Codes</i>	<i>Loss Information Codes</i>	
3. Loss Conditions	3. Loss Conditions	
Report the 2-digit code for each loss condition.	Report the 2-digit code for each loss condition.	
Type of Coverage	Type of <u>Claim</u>	NAME CHANGE INTENDED TO ALLEVIATE ANY MISUNDERSTANDING THAT THIS FIELD IS INTENDED FOR REPORTING THE 'TYPE OF CLAIM' & NOT THE TYPE OF COVERAGE THE POLICY IN QUESTION IS PROVIDING.
<b>DESCRIPTION</b> <b>CODE</b>	<b>DESCRIPTION</b> <b>CODE</b>	
Workers' Compensation Only              01	Workers' Compensation Only              01	
Employers' Liability Only              02	Employers' Liability Only              02	
Workers' Comp. & Employers' Liability      03	Workers' Comp. & Employers' Liability      03	
Liability Over              04	Liability Over              04	

## MINNESOTA UNIT STATISTICAL PLAN MANUAL

**Effective July 1, 2006**

CURRENT MN MANUAL LANGUAGE	PROPOSED MN MANUAL LANGUAGE	COMMENTS
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<b>PART XII – MAGNETIC TAPE SPECIFICATIONS</b>	<b>PART XII – MAGNETIC TAPE SPECIFICATIONS</b>	
<b>12. Submission Control Record. Record Type 9</b>	<b>12. Submission Control Record. Record Type 9</b>	
Report the 2-digit code for each loss condition.	Report the 2-digit code for each loss condition.	
Type of Coverage	Type of Claim	NAME CHANGE INTENDED TO ALLEVIATE ANY MISUNDERSTANDING THAT THIS IS A 'TYPE OF "CLAIM" REPORTING FIELD.
01 Workers' Compensation Only	01 Workers' Compensation Only	
02 Employers' Liability Only	02 Employers' Liability Only	
03 Workers' Comp. & Employers' Liability	03 Workers' Comp. & Employers' Liability	
04 Liability Over	04 Liability Over	