LAWRENCE G. WASDEN Attorney General

RICHARD B. BURLEIGH, ISB No. 4032 Deputy Attorney General State of Idaho Department of Insurance 700 W. State Street, 3rd Floor P.O. Box 83720 Boise, Idaho 83720-0043

Telephone: (208) 334-4219 Facsimile: (208) 334-4298 richard.burleigh@doi.idaho.gov

Attorneys for the Department of Insurance

FILED

NOV 0 6 2015 W

Department of Insurance State of Idaho

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

In the Matter of:

NEW HAMPSHIRE INSURANCE COMPANY,

Certificate of Authority No. 333 NAIC No. 23841

Docket No. 18-3111-15

ORDER PERMITTING DEVIATION FROM 2016 WORKERS' COMPENSATION RATES

On October 21, 2015, the Idaho Department of Insurance (Department) received from NEW HAMPSHIRE INSURANCE COMPANY (NHIC), a Pennsylvania-domiciled insurer licensed to transact workers' compensation insurance in the state of Idaho pursuant to Certificate of Authority No. 333, and a member of the National Council on Compensation Insurance, Inc. (NCCI), a request for permission to deviate from the workers' compensation rates filed by the NCCI for 2016 by a uniform percentage decrease of fifteen percent (15%).

NHIC and the NCCI have each indicated in writing that they do not request a hearing on the deviation request.

The Department's Director (Director), having reviewed and being fully apprised of NHIC's request to deviate from the Idaho workers' compensation premium rates filed by the NCCI for 2016, and the requirements of Idaho Code § 41-1614, has determined that the requested rate deviation is justified.

NOW, THEREFORE, IT IS HEREBY ORDERED, pursuant to Idaho Code § 41-1614, that NHIC's request to deviate by a uniform percentage <u>decrease</u> of fifteen percent (15%) from the workers' compensation rates filed by the NCCI for 2016, exclusive of terrorism rates, is GRANTED. This deviation from the Idaho workers' compensation premium rates filed by the NCCI for 2016 shall take effect on January 1, 2016, and shall remain in effect for one year from that date unless terminated sooner with the approval of the Director.

DATED this ______day of November, 2015.

STATE OF IDAHO DEPARTMENT OF INSURANCE

DEAN L. CAMERON

Director

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that, on this $\underline{\hspace{0.1in}}$ day of November, 2015, I caused a true and correct copy of the foregoing ORDER PERMITTING DEVIATION FROM 2016 WORKERS' COMPENSATION RATES to be served upon the following by the designated means:

New Hampshire Insurance Company Attn: Walter Murphy, Filings Analyst 12 Metrotech, 27 th Floor State Filings Dept. Brooklyn, NY 11201	☐ first class mail☐ certified mail☐ hand delivery☐ via facsimile
New Hampshire Insurance Company 175 Water Street, 18 th Floor New York, NY 10038	first class mail certified mail hand delivery via facsimile
National Council on Compensation Insurance, Inc. Michael Taylor, State Relations Executive One Lincoln Center 10300 SW Greenburg Road, Suite 550 Portland, OR 97223	first class mail certified mail hand delivery via facsimile
Richard B. Burleigh Deputy Attorney General Idaho Department of Insurance 700 W. State Street, 3 rd Floor P.O. Box 83720 Boise, ID 83720-0043	first class mail certified mail hand delivery via facsimile