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**MAR 22 2018**  
Department of Insurance  
State of Idaho

*Attorneys for the Department of Insurance*

**BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE**

**STATE OF IDAHO**

In the Matter of:

EVEREST PREMIER INSURANCE  
COMPANY,

Certificate of Authority No. 4406  
NAIC No. 16045

Docket No. 18-3470-18

**ORDER PERMITTING DEVIATION  
FROM 2018 WORKERS'  
COMPENSATION RATES**

On or about December 1, 2017, the Idaho Department of Insurance (“Department”) received from EVEREST PREMIER INSURANCE COMPANY (“EVEREST PREMIER”), a Delaware-domiciled insurer licensed to transact workers’ compensation insurance in the state of Idaho pursuant to Certificate of Authority No. 4406, 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 2018 by a uniform percentage decrease of fifteen percent (-15%) effective April 15, 2018.

EVEREST PREMIER and the NCCI have each waived their right to a hearing on the deviation request.

The Department's Director (Director), having reviewed and being fully apprised of EVEREST PREMIER's request to deviate from the Idaho workers' compensation premium rates filed by the NCCI for 2018, 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 EVEREST PREMIER's request to deviate by a uniform percentage decrease of fifteen percent (-15%) from the workers' compensation rates filed by the NCCI for 2018, exclusive of terrorism and catastrophe rating values, is GRANTED. This deviation from the Idaho workers' compensation premium rates filed by the NCCI for 2018 shall take effect on April 15, 2018, and shall remain in effect for one year from that date unless terminated sooner with the approval of the Director.

DATED this 20<sup>th</sup> day of March, 2018.

STATE OF IDAHO  
DEPARTMENT OF INSURANCE



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DEAN L. CAMERON  
Director

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that, on this 22<sup>nd</sup> day of March, 2018, I caused a true and correct copy of the foregoing ORDER PERMITTING DEVIATION FROM 2018 WORKERS' COMPENSATION RATES to be served upon the following by the designated means:

Everest Premier Insurance Company  
477 Martinsville Road  
P.O. Box 8380  
Liberty Corner, NJ 07938

- first class mail
- certified mail
- hand delivery
- via facsimile

National Council on Compensation Insurance, Inc.  
Todd Johnson, State Relations Executive  
901 Peninsula Corporate Circle  
Boca Raton, FL 33487-1362

- first class mail
- certified mail
- hand delivery
- via facsimile

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Pamela Murray