

**COAL MINE COMPENSATION RATING BUREAU
OF PENNSYLVANIA**

COMMERCE BUILDING – SUITE 501
300 NORTH SECOND STREET
HARRISBURG, PENNSYLVANIA 17101

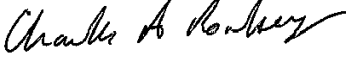
CHARLES A. ROMBERGER
EXECUTIVE DIRECTOR

TELEPHONE
717-238-5020

December 14, 2021

COMPENSATION CIRCULAR CM-492

To: All Coal Mine Compensation Insurance Carriers

From: Charles A. Romberger, Executive Director 

RE: Effective April 1, 2022 – Form Revisions

- 1) Premium Discount Endorsement – WC 00 04 06 A
- 2) Confidential Request for Ownership Information – ERM-14
- 3) Workers Compensation Experience Rating for Self-Insureds – ERM-6

Concerning the Premium Discount Endorsement, the CMCRB has filed and the Insurance Department has approved revisions to this endorsement. The CMCRB made these revisions to maintain consistency on policy forms with the PCRB (see PCRB Filing No. 328) and other state jurisdictions. A copy of this endorsement is included as an attachment to this circular and will be incorporated into our Manual at a later time to be effective April 1, 2022.

Also, the CMCRB understands that the PCRB recently filed and received approval of new versions of the ERM-14 and ERM-6 forms. The CMCRB does not intend to file either of these forms at this time. Concerning ERM-14, the CMCRB understands that its members may use this non-policy form at their discretion and option without further action by CMCRB. Concerning ERM-6, the CMCRB does not believe that this form is appropriate for matters related to CMCRB and that the forms included in the CMCRB's filed and approved Statistical Plan continue be appropriate for these purposes, if needed.

Updated manual pages will be available on our website at a later time at:
<http://www.cmcrbpa.com/Manual.html>

Any questions should be directed to the CMCRB.

CAR:car

Attachment(s)

PREMIUM DISCOUNT ENDORSEMENT

The premium for this policy and the policies, if any, listed in item 3 of the Schedule may be eligible for a discount. This endorsement shows your estimated discount in item 1 or 2 of the Schedule. The Final calculation of premium discount will be determined by our manuals and your premium basis as determined by audit. Premium subject to retrospective rating is not subject to premium discount.

Schedule

| | | | | |
|-----------------|-----------------------------------|-----------|-------------|---------|
| 1. State | Estimated Eligible Premium | | | |
| | First | Next | Next | _____ |
| | \$10,000 | \$190,000 | \$1,550,000 | Balance |

2. Average percent discount: _____ %

3. Other policies:

4. If there are no entries in items 1, 2 and 3 of the Schedule see the Premium Discount Endorsement attached to your policy number:

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective
Insured

Policy No.

Endorsement No.
Premium

Insurance Company

Countersigned by _____