



# Illinois Department of Insurance

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JB Pritzker  
Governor

Dana Popish Severinghaus  
Director

June 23, 2022

Mr. Scott R. Jean, President  
Employers Mutual Insurance Group  
717 Mulberry Street  
Des Moines, IA. 50309

**Re: Employers Mutual Casualty Company, NAIC 21415  
Illinois EMCASCO Insurance Company, NAIC 32808  
*Market Conduct Examination Verified Report***

Dear Mr. Jean,

A Market Conduct Examination of your companies was conducted by an authorized examiner designated by the Director of the Illinois Department of Insurance (“Department”) pursuant to Illinois Insurance Code (“Code”) Sections 132, 132.5(f), 404(1)(a) and 404(1)(c). This examination covered the period of January 1, 2019, through March 31, 2022. Enclosed with this letter is a copy of the verified examination report.

The examination report is a public document under the Freedom of Information Act (“FOIA”) [5 ILCS 140/1 *et seq.*] and will be posted on the Department’s website. To the extent that the examination report contains information that your Company deems private, personal, or trade secret pursuant to Sections 7(1)(b), (c), or (g) of FOIA [5 ILCS 140/7(b), (c), and (g)], your Company may request that the Department redact such information from the report prior to making it public. In making a request for confidentiality, your Company must provide a factual basis for its assertion of confidentiality. The Department will consider the request and determine whether such information is exempt from disclosure under Section 7 of FOIA.

No company, corporation, or individual shall use this report or any statement, excerpt, portion, or section thereof for any advertising, marketing or solicitation purpose. Any company, corporation or individual action contrary to the above shall be deemed a violation of Section 149 of the Illinois Insurance Code (215 ILCS 5/149).

Please contact me if you have any questions.

Sincerely,

Erica Weyhenmeyer  
Chief Market Conduct Examiner  
Illinois Department of Insurance  
320 West Washington St., 5th Floor  
Springfield, IL 62767  
Phone: 217-782-1790  
Erica.Weyhenmeyer@Illinois.gov

Company Name: Employers Mutual Casualty Company	CoCode: 21415	Group Code: 062										
<b>Private Passenger Auto Liability</b>	Accident Quarter											
Statewide data (Illinois only) as of 3/31/2022	Q1 - 2019	Q2 -2019	Q3 - 2019	Q4 - 2019	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020	Q1 - 2021	Q2 - 2021	Q3 - 2021	Q4 - 2021
(2) All expenses other than loss adjustment expenses, excluding amounts from item 5 below	0	0	0	0	0	0	0	0	0	0	0	0
(3) Net Earned Premium Before Application of any COVID-19 Related Premium Credit/Refund/Dividend	451,232	382,357	250,236	128,841	40,476	159	0	0	0	0	0	0
(4) The Amount of any COVID-19 Related Premium Credit/Refund/Dividend accounted for as premium	0	0	0	0	0	0	0	0	0	0	0	0
(5) The Amount of any COVID-19 Related Credit/Refund/Dividend accounted for as expense	0	0	0	0	0	0	0	0	0	0	0	0
(6) Net Ultimate Incurred Losses and Defense and Cost Containment Expenses	416,517	250,648	396,322	89,370	26,507	0	0	0	0	0	0	0
(7) Net Ultimate Adjusting & Other	802	997	1,347	1,134	330	0	0	0	0	0	0	0
(8) Ultimate Reported Claim Counts (excluding Claims Closed without Payment)	48	38	21	13	2	0	0	0	0	0	0	0
(9) Open Claim Counts	0	1	0	0	0	0	0	0	0	0	0	0
Post-refund combined ratio (6+7+2+5)/(3-4)	92.5%	65.8%	158.9%	70.2%	66.3%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Pre-refund combined ratio (6+7+2)/(3)	92.5%	65.8%	158.9%	70.2%	66.3%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Claims severity (6)/(8)	8,677	6,596	18,872	6,875	13,253	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Notes: It was determined that we did not have a reasonable method of obtaining calendar quarter data for Earned Exposures. Per the FAQ document, we put the full Earned Exposures in the 4th Quarter Cell for each year.

Data from row (1) will be made available on an all company weighted average frequency basis. Data will not be publicly released on an individual company basis.

All data provided in rows (2)-(9) will be considered public.

"Net" refers to net of reinsurance and salvage & subrogation.

Claim counts should be reported net of quota share reinsurance.

Company Name: Employers Mutual Casualty Company	CoCode: 21415	Group Code: 062										
<b>Private Passenger Auto Physical Damage</b>	Accident Quarter											
Statewide data (Illinois only) as of 3/31/2022	Q1 - 2019	Q2 - 2019	Q3 - 2019	Q4 - 2019	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020	Q1 - 2021	Q2 - 2021	Q3 - 2021	Q4 - 2021
(2) All expenses other than loss adjustment expenses, excluding amounts from item 5 below	0	0	0	0	0	0	0	0	0	0	0	0
(3) Net Earned Premium Before Application of any COVID-19 Related Premium Credit/Refund/Dividend	387,512	336,461	219,970	110,873	37,228	150	0	0	0	0	0	0
(4) The Amount of any COVID-19 Related Premium Credit/Refund/Dividend accounted for as premium	0	0	0	0	0	0	0	0	0	0	0	0
(5) The Amount of any COVID-19 Related Credit/Refund/Dividend accounted for as expense	0	0	0	0	0	0	0	0	0	0	0	0
(6) Net Ultimate Incurred Losses and Defense and Cost Containment Expenses	333,848	197,533	192,144	61,041	11,287	0	0	0	0	0	0	0
(7) Net Ultimate Adjusting & Other	13,681	1,908	530	153	0	0	0	0	0	0	0	0
(8) Ultimate Reported Claim Counts (excluding Claims Closed without Payment)	93	87	45	21	5	0	0	0	0	0	0	0
(9) Open Claim Counts	0	1	0	0	0	0	0	0	0	0	0	0
Post-refund combined ratio (6+7+2+5)/(3-4)	89.7%	59.3%	87.6%	55.2%	30.3%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Pre-refund combined ratio (6+7+2)/(3)	89.7%	59.3%	87.6%	55.2%	30.3%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Claims severity (6)/(8)	3,590	2,270	4,270	2,907	2,257	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Claim counts should be reported net of quota share reinsurance.

Company Name: Illinois EMCASCO Insurance Company	CoCode:	32808	Group Code:	62								
<b>Private Passenger Auto Liability</b>	Accident Quarter											
Statewide data (Illinois only) as of 3/31/2022	Q1 - 2019	Q2 -2019	Q3 - 2019	Q4 - 2019	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020	Q1 - 2021	Q2 - 2021	Q3 - 2021	Q4 - 2021
(2) All expenses other than loss adjustment expenses, excluding amounts from item 5 below												
(3) Net Earned Premium Before Application of any COVID-19 Related Premium Credit/Refund/Dividend	2,245	1,556	660	271	133	0	0	0	0	0	0	0
(4) The Amount of any COVID-19 Related Premium Credit/Refund/Dividend accounted for as premium	0	0	0	0	0	0	0	0	0	0	0	0
(5) The Amount of any COVID-19 Related Credit/Refund/Dividend accounted for as expense	0	0	0	0	0	0	0	0	0	0	0	0
(6) Net Ultimate Incurred Losses and Defense and Cost Containment Expenses	0	0	0	0	0	0	0	0	0	0	0	0
(7) Net Ultimate Adjusting & Other	0	0	0	0	0	0	0	0	0	0	0	0
(8) Ultimate Reported Claim Counts (excluding Claims Closed without Payment)	0	0	0	0	0	0	0	0	0	0	0	0
(9) Open Claim Counts	0	0	0	0	0	0	0	0	0	0	0	0
Post-refund combined ratio (6+7+2+5)/(3-4)	0.0%	0.0%	0.0%	0.0%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Pre-refund combined ratio (6+7+2)/(3)	0.0%	0.0%	0.0%	0.0%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Claims severity (6)/(8)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Claim counts should be reported net of quota share reinsurance.

Company Name: Illinois EMCASCO Insurance Company	CoCode:	32808	Group Code:	62								
<b>Private Passenger Auto Physical Damage</b>	Accident Quarter											
Statewide data (Illinois only) as of 3/31/2022	Q1 - 2019	Q2 -2019	Q3 - 2019	Q4 - 2019	Q1 - 2020	Q2 - 2020	Q3 - 2020	Q4 - 2020	Q1 - 2021	Q2 - 2021	Q3 - 2021	Q4 - 2021
(2) All expenses other than loss adjustment expenses, excluding amounts from item 5 below	0	0	0	0	0	0	0	0	0	0	0	0
(3) Net Earned Premium Before Application of any COVID-19 Related Premium Credit/Refund/Dividend	1,664	1,056	415	223	102	0	0	0	0	0	0	0
(4) The Amount of any COVID-19 Related Premium Credit/Refund/Dividend accounted for as premium	0	0	0	0	0	0	0	0	0	0	0	0
(5) The Amount of any COVID-19 Related Credit/Refund/Dividend accounted for as expense	0	0	0	0	0	0	0	0	0	0	0	0
(6) Net Ultimate Incurred Losses and Defense and Cost Containment Expenses	0	0	0	0	0	0	0	0	0	0	0	0
(7) Net Ultimate Adjusting & Other	0	0	0	0	0	0	0	0	0	0	0	0
(8) Ultimate Reported Claim Counts (excluding Claims Closed without Payment)	0	0	0	0	0	0	0	0	0	0	0	0
(9) Open Claim Counts	0	0	0	0	0	0	0	0	0	0	0	0
Post-refund combined ratio (6+7+2+5)/(3-4)	0.0%	0.0%	0.0%	0.0%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Pre-refund combined ratio (6+7+2)/(3)	0.0%	0.0%	0.0%	0.0%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Claims severity (6)/(8)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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