

State:Massachusetts
TOI/Sub-TOI:09.0 Inland Marine/09.0004 Pet Insurance Plans
Product Name:Pet Insurance
Project Name/Number:/

Filing Company:Lemonade Insurance Company

Disposition

Disposition Date: 09/09/2025
Effective Date (New):
Effective Date (Renewal):
Status: Withdrawn

Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Lemonade Insurance Company	0.000%	0.000%	\$0	17,154	\$11,444,265	0.000%	%

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate	Pet Insurance Manual		Yes
Supporting Document	Certification of Compliance		Yes
Supporting Document	Annotated Comparison		Yes
Supporting Document	Base Checklist(s) - Property and Casualty Insurance		Yes
Supporting Document	Actuarial Memorandum and Abstract Form - Property and Casualty Insurance		Yes
Supporting Document	Letter of Authorization		Yes