

SERFF Tracking Number: PHAR-125833359 State: District of Columbia
Filing Company: Pharmacists Mutual Insurance Company State Tracking Number:
Company Tracking Number: DC-PHL/CSP-01-09-R
TOI: 11.2 Medical Malpractice - Occurrence Only Sub-TOI: 11.2021 Pharmacy
Product Name: Individual Pharmacist Professional Liability
Project Name/Number: DC-PHL/CSP-01-09-R/DC-PHL/CSP-01-09-R

Filing at a Glance

Company: Pharmacists Mutual Insurance Company

Product Name: Individual Pharmacist Professional Liability SERFF Tr Num: PHAR-125833359 State: District of Columbia

TOI: 11.2 Medical Malpractice - Occurrence Only SERFF Status: Closed-APPROVED State Tr Num:

Sub-TOI: 11.2021 Pharmacy

Co Tr Num: DC-PHL/CSP-01-09-R State Status:

Filing Type: Rule

Reviewer(s): Robert Nkojo

Authors: Heidi Allen, Karleen Wittkopf, Jen Swift

Disposition Date: 12/01/2008

Date Submitted: 09/30/2008

Disposition Status: APPROVED

Effective Date Requested (New): 01/01/2009

Effective Date (New):

Effective Date Requested (Renewal): 01/01/2009

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: DC-PHL/CSP-01-09-R

Status of Filing in Domicile: Pending

Project Number: DC-PHL/CSP-01-09-R

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 12/01/2008

State Status Changed:

Deemer Date:

Created By: Karleen Wittkopf

Submitted By: Jen Swift

Corresponding Filing Tracking Number: DC-PHL/CSP-01-09-F

Filing Description:

Pharmacists Mutual Insurance Company (PMIC) is filing a revision to their Individual Pharmacists Professional Liability and Pharmacy Student Professional Liability programs. Please see Filing Memorandum for details.

Pharmacists Mutual is requesting that this filing become effective for all policies effective on and after January 1, 2009.

Company and Contact

Filing Contact Information

Jen Swift, Forms Analyst

jennifer.swift@phmic.com

PO BOX 370

515-395-7461 [Phone]

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 Algona, IA 50511 515-295-9306 [FAX]

Filing Company Information

Pharmacists Mutual Insurance Company	CoCode: 13714	State of Domicile: Iowa
808 Highway 18 West	Group Code: 775	Company Type: Mutual
P.O. Box 370	Group Name:	State ID Number:
Algona, IA 50511	FEIN Number: 42-0223390	
(800) 247-5930 ext. [Phone]		

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Pharmacists Mutual Insurance Company	\$0.00		

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Robert Nkojo	12/01/2008	12/01/2008

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Filing Memorandum	Jen Swift	09/30/2008	09/30/2008

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
STATUS OF FILING	Note To Reviewer	Jen Swift	11/25/2008	11/25/2008
State Status	Note To Reviewer	Jen Swift	11/18/2008	11/18/2008

SERFF Tracking Number: PHAR-125833359 *State:* District of Columbia
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Disposition

Disposition Date: 12/01/2008

Effective Date (New):

Effective Date (Renewal):

Status: APPROVED

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PHAR-125833359 State: District of Columbia
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter All Filings		No
Supporting Document	Consulting Authorization		No
Supporting Document	Actuarial Certification (P&C)		No
Supporting Document	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		No
Supporting Document	District of Columbia and Countrywide Loss Ratio Analysis (P&C)		No
Supporting Document	Filing Memorandum		No
Rate	PHL RATES-RULES 01-09		No

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Note To Reviewer

Created By:

Jen Swift on 11/25/2008 11:47 AM

Last Edited By:

Jen Swift

Submitted On:

11/25/2008 11:47 AM

Subject:

STATUS OF FILING

Comments:

Just checking again on the status of this filing as the effective date of 1/1/2009 is soon approaching. Thank you.

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Note To Reviewer

Created By:

Jen Swift on 11/18/2008 03:46 PM

Last Edited By:

Jen Swift

Submitted On:

11/18/2008 03:46 PM

Subject:

State Status

Comments:

Just checking on the status of this filing as the effective date of 1/1/2009 is soon approaching. Thank you.

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Amendment Letter

Submitted Date: 09/30/2008

Comments:

I am attaching the Filing Memorandum as it was originally omitted. Thank you.

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Filing Memorandum

Comment:

Rule Filing Memorandum.pdf

Rate/Rule Schedule

Schedule Item	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Status:	PHL RATES-RULES 01-09	ENTIRE MANUAL	Replacement	STAMPED APPROVED 12/3/01 PHL RATES-RULES -01-09.pdf PHL-RR-02-02

PHARMACISTS MUTUAL INSURANCE COMPANY
Individual Pharmacist Professional Liability
Insurance Policy Program

I. Program Description

The Individual Pharmacist Professional Liability Insurance Policy provides coverage on an excess basis for damages which an insured is legally obligated to pay because of an occurrence. The occurrence must result in bodily injury, property damage, or personal and advertising injury arising out of the rendering or failure to render pharmacy services.

The following are also included in the Individual Pharmacist Professional Liability Insurance Policy:

- a. Limited Pharmacist's License Defense Reimbursement provides reimbursement for legal fees incurred, arising out of an insured's rendering or failure to render pharmacy services. Reimbursement is subject to the conditions as set forth in the policy and applies in excess of a \$500 deductible per incident; and
- b. Certified CPR Coverage provides coverage on an excess basis for damages which an insured becomes legally obligated to pay due to bodily injury or property damage arising out of performing cardio-pulmonary resuscitation (CPR), but only if certified for CPR.

II. Eligibility

An Individual Pharmacist Professional Liability Insurance Policy may be issued to an individual who:

- a. holds a valid license to practice pharmacy; or
- b. is an undergraduate pharmacy student or graduate who does not hold a valid license to practice pharmacy.

III. College Student Group Billing Program

An Individual Pharmacist Professional Liability Insurance Policy may be issued under the College Student Group Billing Program providing coverage to students of an accredited school of pharmacy at a discounted group rate.

To qualify for the College Student Group Billing Program:

- a. a minimum of 35 Individual Pharmacist Professional Liability Insurance Policies must be issued to undergraduate pharmacy students within the accredited school of pharmacy; and
- b. all Individual Pharmacist Professional Liability Insurance Policies are issued with a common anniversary date; and
- c. the school agrees to:
 - 1) provide a completed enrollment form for all undergraduate pharmacy students requesting coverage; and
 - 2) remit the insurance premium for each undergraduate pharmacy student to Company upon receipt of the Group Bill.

The College Student Group Billing Program is not available to a licensed pharmacist who is attending a school of pharmacy.

PHARMACISTS MUTUAL INSURANCE COMPANY
Individual Pharmacist Professional Liability
Insurance Policy Program

IV. Term of Policy

An Individual Pharmacist Professional Liability Insurance Policy can be written for a term not to exceed one year. The Policy may be continued for successive terms by payment of the required premiums.

V. Limits of Liability

<u>Coverage</u>	<u>Per Occurrence</u>	<u>Aggregate</u>
Professional Liability	\$1,000,000	\$3,000,000
Limited Pharmacist's License Defense Reimbursement	\$ 10,000	\$ 10,000
Certified CPR	\$ 50,000	\$ 50,000

VI. Minimum Premium

The Individual Pharmacist Professional Liability Insurance Policy is subject to a minimum premium, regardless of the policy term. The minimum premium is not subject to reduction in the event of cancellation.

Individual Pharmacist Professional Liability Insurance Policy	\$ 25.00
College Student Group Billing Program	\$ 16.00

NOTE: The \$25.00 minimum premium does not apply when the policy term is changed to coordinate with the renewal date of another Pharmacists Mutual Insurance policy.

VII. Cancellation

The Individual Pharmacist Professional Liability Insurance Policy, canceled by either the insured or the company, must be canceled in accordance with the terms of the cancellation provisions that apply. The return premium, if any, is computed on a pro rata basis, subject to the minimum premium.

VIII. Rating Classifications

To be eligible for a rating classification, the applicant must meet the qualifications for the Classification.

A volunteer pharmacist working without pay does not affect the Rating Classification.

1 - Employed Pharmacist

- a. provides pharmacy services for a pharmacy operation;
- b. receives an IRS Form W-2 Wage and Tax Statement for wages earned;
- c. is not an owner or partner of a pharmacy or pharmacy-related business;
- d. works less than 10 hours per week as a self-employed pharmacist; and
- e. may work as a volunteer pharmacist without pay.

Refer to Self-employed Pharmacist classification for an Employed Pharmacist who works 10 hours or more per week as a self-employed pharmacist.

PHARMACISTS MUTUAL INSURANCE COMPANY
Individual Pharmacist Professional Liability
Insurance Policy Program

- 2 - Self-employed Pharmacist - includes relief (independent contractor) or consultant RPh**
- a. provides pharmacy services for a pharmacy operation;
 - b. receives an IRS Form 1099-MISC for pharmacy services provided; and
 - c. is not an owner or partner of a pharmacy or pharmacy-related business other than a sole-proprietor of a relief (independent contractor) or consultant pharmacist business.

- 3 - Owner or Partner**
- a. provides pharmacy services for a pharmacy operation; and
 - b. is also an owner or partner of a pharmacy or pharmacy-related business other than a sole-proprietor of a relief (independent contractor) or consultant pharmacist business.

- 4 - Instructor**
- a. works as an instructor at an accredited school of pharmacy or pharmacy educational facility; and
 - b. works less than 10 hours per week outside the classroom as an employed or self-employed pharmacist.

Refer to Employed Pharmacist or Self-employed Pharmacist classification for an Instructor who works 10 hours or more per week outside the classroom.

- 5 - Pharmacy Student or Intern**
- a. a non-licensed pharmacist working on a pharmacy degree; or
 - b. a graduate from a school of pharmacy who has not yet received a pharmacy license.

Refer to Employed Pharmacist or Self-employed Pharmacist classification for a licensed pharmacist who is attending a school of pharmacy for an advanced pharmacy degree.

IX. ANNUAL PREMIUMS

Rating Classifications	Premium
1 - Employed Pharmacist	\$ 144.00
First year graduate discount	50%
2 - Self-employed Pharmacist	\$ 375.00
First year graduate discount	50%
3 - Owner or Partner	
Business Insurance provided by PhMIC	\$ 144.00
First year graduate discount	50%
4 - Instructor	\$ 75.00
5 - Pharmacy Student or Intern	
Individual Billing	\$ 32.00
College Student Group Billing	\$ 16.00

A first year graduate discount applies in the year following graduation. This is a one-time discount available to the following Rating Classifications: Employed Pharmacist, Self-employed Pharmacist, and Owner or Partner.

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Cover Letter All Filings		
Comments:		
Attachments:		
Cover Letter.pdf		
SIDE BY SIDE RATES-RULES 01-09 V 08-97.pdf		

	Item Status:	Status Date:
Bypassed - Item: Consulting Authorization		
Bypass Reason: N/A		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Actuarial Certification (P&C)		
Bypass Reason: N/A No Rate change		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		
Comments:		
Attachment:		
5 Year Expense History - PHL DC.pdf		

	Item Status:	Status Date:
Bypassed - Item: District of Columbia and		

SERFF Tracking Number: PHAR-125833359 State: District of Columbia
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Product Name: Individual Pharmacist Professional Liability
Project Name/Number: DC-PHL/CSP-01-09-R/DC-PHL/CSP-01-09-R
Countrywide Loss Ratio Analysis
(P&C)
Bypass Reason: N/A No Rate change
Comments:

Item Status:

**Status
Date:**

Satisfied - Item: Filing Memorandum

Comments:

Attachment:

Rule Filing Memorandum.pdf

Pharmacists Mutual[®] Companies

- Pharmacists Mutual Insurance Company
- Pharmacists Life Insurance Company
- Pharmacists National Insurance Corporation
- Pro Advantage Services, Inc.
- PMC Quality Commitment, Inc.

September 30, 2008

RE: PHARMACISTS MUTUAL INSURANCE COMPANY
NAIC #13714 NAIC GROUP #0775 FEIN: 42-0223390
Pharmacists Professional Liability Rule Filing DC-PHL-01-09-R

Ladies and Gentlemen:

Pharmacists Mutual Insurance Company (PHMIC) is filing a revision to their Individual Pharmacists professional Liability and Pharmacy Student Professional Liability programs. Please see Filing Memorandum for details.

Coverage rates have not changed, however the \$2MM/\$6MM limit option has been eliminated. In addition, we have clarified our program rules to more clearly define eligibility under our five rating classifications: employed pharmacist, self-employed pharmacist, owner or partner, instructor and pharmacy student or intern.

Additionally, the Pharmacy Student Professional Liability program allows for group billing to a college while providing an individual professional liability policy for each student. Whereas this was filed as a separate "program" in the past, the student program is now simply a billing option under our Individual Pharmacists Professional Liability program, more accurately referred to as the "College Student Group Billing Program." Pharmacy Student Professional Liability coverage form PM PHL 292 is being withdrawn. We will now use our filed and approved coverage form PM PHL 196, Individual Pharmacists Professional Liability, for all individual pharmacists professional liability policies. Under form PM PHL 196, students will no longer be provided violent assault protection coverage, nor will professional liability coverage be extended to a faculty member or the School of Pharmacy as an additional insured. The 15% additional insured charge previously included for each policy issued will be eliminated.

Rates under the student program have not changed, however, the rule and rate pages have been modified to more clearly address the College Student Group Billing option as follows:

- The \$16.00 policy charge is our minimum premium per student and will be the amount billed, regardless of the policy term.
- All student policies under a college group billing program will be issued with a common anniversary date.
- All students will be charged \$16.00 for professional liability coverage under the college group billing option. There is no longer a distinction between intern/extern students and other pharmacy students.

The rule revision will not have a premium impact on DC policyholders. Pharmacists Mutual is requesting that this filing become effective for all policies effective on and after January 1, 2009.

If you have any questions, please contact me at any of the numbers listed below.

Sincerely,



Jennifer Swift
Forms Research & Development Analyst

808 Highway 18 West ● P.O. Box 370, Algona, Iowa 50511 ● Phone: (515) 295-2461 or 800-247-5930
E-mail: info@phmic.com ● Website: www.phmic.com

PHARMACISTS MUTUAL INSURANCE COMPANY
Individual Pharmacist Professional Liability
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I. Program Description

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- a. Limited Pharmacist's License Defense Reimbursement provides reimbursement for legal fees incurred, arising out of an insured's rendering or failure to render pharmacy services. Reimbursement is subject to the conditions as set forth in the policy and applies in excess of a \$500 deductible per incident; and
- b. Certified CPR Coverage provides coverage on an excess basis for damages which an insured becomes legally obligated to pay due to bodily injury or property damage arising out of performing cardio-pulmonary resuscitation (CPR), but only if certified for CPR.

II. Eligibility

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- a. holds a valid license to practice pharmacy; or
- b. is an undergraduate pharmacy student or graduate who does not hold a valid license to practice pharmacy.

III. College Student Group Billing Program

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To qualify for the College Student Group Billing Program:

- a. a minimum of 35 Individual Pharmacist Professional Liability Insurance Policies must be issued to undergraduate pharmacy students within the accredited school of pharmacy; and
- b. all Individual Pharmacist Professional Liability Insurance Policies are issued with a common anniversary date; and
- c. the school agrees to:
 - 1) provide a completed enrollment form for all undergraduate pharmacy students requesting coverage; and
 - 2) remit the insurance premium for each undergraduate pharmacy student to Company upon receipt of the Group Bill.

The College Student Group Billing Program is not available to a licensed pharmacist who is attending a school of pharmacy.

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Deleted: ¶
 ¶
Limits of Liability¶
 \$1,000,000 per occurrence . . . or . \$2,000,000 per occurrence¶
 \$3,000,000 aggregate \$6,000,000 aggregate¶
 ¶
ANNUAL PREMIUMS¶
 1/3 . . . 2/6¶
 Employed Pharmacists and Interns \$14 4.00* \$176.00*¶
 Self employed/consultant Pharmacist (0 to 9 hours per week) \$144.00* \$176.00*¶
 Self employed/consultant Pharmacist (10 to 20 hours per week) . . \$375.00* \$458.00*¶
 Pharmacy Undergraduate Students \$32.00 \$40.00¶
 Owner, partner, corporate officer with primary insurance or¶
 other registered pharmacist with evidence of business¶
 professional liability insurance or other unusual situations \$375.00 \$458.00*¶
 Instructors or staff pharmacists at an accredited college of¶
 pharmacy or pharmacy educational facility who is not ¶
 employed as a full time pharmacist elsewhere \$75.00 \$92.00¶
 Minimum premium \$25.00 \$25.00¶
 *Any applicant applying for

Deleted: in the first year following date of graduation may qualify for a 50% discount.

Deleted: ¶
 ¶
 Pharmacy Student

Deleted: Master

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 1/3 . . . 2/6¶
 Per enrolled Pharmacy student \$16.00 \$20.00¶
 All other "non-intern/extern" students - per student \$10.00 \$12.00¶
 ¶
 College of Pharmacy will be added . . . [1]

Deleted: PMIC . RATES-1 . 8/1/97

PHARMACISTS MUTUAL INSURANCE COMPANY
Individual Pharmacist Professional Liability
Insurance Policy Program

IV. Term of Policy

An Individual Pharmacist Professional Liability Insurance Policy can be written for a term not to exceed one year. The Policy may be continued for successive terms by payment of the required premiums.

V. Limits of Liability

<u>Coverage</u>	<u>Per Occurrence</u>	<u>Aggregate</u>
<u>Professional Liability</u>	<u>\$1,000,000</u>	<u>\$3,000,000</u>
<u>Limited Pharmacist's License</u>		
<u>Defense Reimbursement</u>	<u>\$ 10,000</u>	<u>\$ 10,000</u>
<u>Certified CPR</u>	<u>\$ 50,000</u>	<u>\$ 50,000</u>

VI. Minimum Premium

The Individual Pharmacist Professional Liability Insurance Policy is subject to a minimum premium, regardless of the policy term. The minimum premium is not subject to reduction in the event of cancellation.

<u>Individual Pharmacist Professional Liability Insurance Policy</u>	<u>\$ 25.00</u>
<u>College Student Group Billing Program</u>	<u>\$ 16.00</u>

NOTE: The \$25.00 minimum premium does not apply when the policy term is changed to coordinate with the renewal date of another Pharmacists Mutual Insurance policy.

VII. Cancellation

The Individual Pharmacist Professional Liability Insurance Policy, canceled by either the insured or the company, must be canceled in accordance with the terms of the cancellation provisions that apply. The return premium, if any, is computed on a pro rata basis, subject to the minimum premium.

VIII. Rating Classifications

To be eligible for a rating classification, the applicant must meet the qualifications for the Classification.

A volunteer pharmacist working without pay does not affect the Rating Classification.

1 - Employed Pharmacist

- a. provides pharmacy services for a pharmacy operation;
- b. receives an IRS Form W-2 Wage and Tax Statement for wages earned;
- c. is not an owner or partner of a pharmacy or pharmacy-related business;
- d. works less than 10 hours per week as a self-employed pharmacist; and
- e. may work as a volunteer pharmacist without pay.

Refer to Self-employed Pharmacist classification for an Employed Pharmacist who works 10 hours or more per week as a self-employed pharmacist.

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PHARMACISTS MUTUAL INSURANCE COMPANY
Individual Pharmacist Professional Liability
Insurance Policy Program

2 - Self-employed Pharmacist - includes relief (independent contractor) or consultant RPh

- a. provides pharmacy services for a pharmacy operation;
- b. receives an IRS Form 1099-MISC for pharmacy services provided; and
- c. is not an owner or partner of a pharmacy or pharmacy-related business other than a sole-proprietor of a relief (independent contractor) or consultant pharmacist business.

3 - Owner or Partner

- a. provides pharmacy services for a pharmacy operation; and
- b. is also an owner or partner of a pharmacy or pharmacy-related business other than a sole-proprietor of a relief (independent contractor) or consultant pharmacist business.

4 - Instructor

- a. works as an instructor at an accredited school of pharmacy or pharmacy educational facility; and
- b. works less than 10 hours per week outside the classroom as an employed or self-employed pharmacist.

Refer to Employed Pharmacist or Self-employed Pharmacist classification for an Instructor who works 10 hours or more per week outside the classroom.

5 - Pharmacy Student or Intern

- a. a non-licensed pharmacist working on a pharmacy degree; or
- b. a graduate from a school of pharmacy who has not yet received a pharmacy license.

Refer to Employed Pharmacist or Self-employed Pharmacist classification for a licensed pharmacist who is attending a school of pharmacy for an advanced pharmacy degree.

IX. ANNUAL PREMIUMS

Rating Classifications	Premium
1 - Employed Pharmacist	\$ 144.00
First year graduate discount	50%
2 - Self-employed Pharmacist	\$ 375.00
First year graduate discount	50%
3 - Owner or Partner	
Business Insurance provided by PhMIC	\$ 144.00
First year graduate discount	50%
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Individual Billing	\$ 32.00
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A first year graduate discount applies in the year following graduation. This is a one-time discount available to the following Rating Classifications: Employed Pharmacist, Self-employed Pharmacist, and Owner or Partner.

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	1/3	2/6
Per enrolled Pharmacy student.....	\$16.00	\$20.00
All other "non-intern/extern" students - per student.....	\$10.00	\$12.00

College of Pharmacy will be added as additional insured for 15% of total student premium (not an optional charge)

The Master policy can be written for any number of students subject to \$500 annual minimum premium.

DISTRICT of COLUMBIA/COUNTRYWIDE 5 YEAR EXPERIENCE & EXPENSE EXHIBIT

EXPERIENCE FOR Line 11.0 - Medical Malpractice

(Statistics are identical to Page 15 (Statutory Page 14 Data) of the Annual Statement, Insurance Expense Exhibit)

District of Columbia	2003		2004		2005		2006		2007		All Years	
	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%
1. Direct Premiums Earned	\$0	100.00%	\$156	100.00%	\$353	100.00%	\$409	100.00%	\$652	100.00%	\$1,570	100.00%
2. Direct Losses Incurred	\$0	0%	\$40	26%	\$50	14%	\$10	2%	\$80	12%	\$180	11%
3. Direct Defense Cost Containment Expenses Incurred	\$0	0%	\$10	6%	\$10	3%	\$0	0%	\$50	8%	\$70	4%
4. Direct Loss & Loss Expenses Incurred (2 & 3)	\$0	0%	\$50	32%	\$60	17%	\$10	2%	\$130	20%	\$250	16%
5. Direct Premiums Written	\$0	100.00%	\$283	100.00%	\$454	100.00%	\$368	100.00%	\$765	100.00%	\$1,870	100.00%
6. Direct Commission & Brokerage Incurred	\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$0	0%
7. Direct Other Acquisition, Field Supervision & Collection Expenses Incurred	\$0	15%	\$42	15%	\$67	15%	\$55	15%	\$114	15%	\$279	15%
8. Direct General Expenses Incurred	\$0	4%	\$12	4%	\$21	5%	\$21	6%	\$50	7%	\$104	5%
9. Direct Taxes, Licenses & Fees Incurred	\$0	0%	\$56	20%	\$114	25%	\$72	20%	\$421	55%	\$663	35%
10. Total Expenses Incurred (6, 7, 8, 9)	\$0	19%	\$110	39%	\$202	45%	\$148	40%	\$585	76%	\$1,045	56%
COUNTRYWIDE (in 000's)	2003		2004		2005		2006		2007		All Years	
1. Direct Premiums Earned	\$5,147	100.00%	\$5,421	100.00%	\$5,719	100.00%	\$6,115	100.00%	\$6,349	100.00%	\$28,751	100.00%
2. Direct Losses Incurred	\$650	13%	\$1,545	29%	\$70	1%	\$514	8%	\$693	11%	\$3,472	12%
3. Direct Defense Cost Containment Expenses Incurred	\$186	4%	\$880	16%	\$145	3%	\$183	3%	\$493	8%	\$1,887	7%
4. Direct Loss & Loss Expenses Incurred (2 & 3)	\$836	16%	\$2,425	45%	\$215	4%	\$697	11%	\$1,186	19%	\$5,359	19%
5. Direct Premiums Written	\$5,204	100%	\$5,618	100%	\$5,951	100%	\$6,132	100%	\$6,567	100%	\$29,472	100%
6. Direct Commission & Brokerage Incurred	\$21	0%	\$8	0%	\$1	0%	\$1	0%	\$2	0%	\$33	0%
7. Direct Other Acquisition, Field Supervision & Collection Expenses Incurred	\$796	15%	\$841	15%	\$880	15%	\$921	15%	\$977	15%	\$4,415	15%
8. Direct General Expenses Incurred	\$214	4%	\$229	4%	\$279	5%	\$344	6%	\$431	7%	\$1,497	5%
9. Direct Taxes, Licenses & Fees Incurred	\$148	3%	\$141	3%	\$150	3%	\$131	2%	\$149	2%	\$719	2%
10. Total Expenses Incurred (6, 7, 8, 9)	\$1,179	23%	\$1,219	22%	\$1,310	22%	\$1,397	23%	\$1,559	24%	\$6,664	23%

Notes: % of Lines 2, 3, & 4 to Line 1 - % of Lines 6, 7, 8, 9 & 10 to Line 5

PHARMACISTS MUTUAL INSURANCE COMPANY

Individual Pharmacists Professional Liability (PHL)

Pharmacy Student Professional Liability (CSP)

Countrywide

Rule Filing Memorandum

Pharmacists Mutual Insurance Company (PMIC) is filing a revision to their Individual Pharmacists Professional Liability and Pharmacy Student Professional Liability programs.

Coverage rates have not changed, however the \$2MM/\$6MM limit option has been eliminated. In addition, we have clarified our program rules to more clearly define eligibility under our five rating classifications: employed pharmacist, self-employed pharmacist, owner or partner, instructor and pharmacy student or intern.

Additionally, the Pharmacy Student Professional Liability program allows for group billing to a college while providing an individual professional liability policy for each student. Whereas this was filed as a separate “program” in the past, the student program is now simply a billing option under our Individual Pharmacists Professional Liability program, more accurately referred to as the “College Student Group Billing Program.” Pharmacy Student Professional Liability coverage form PM PHL 292 is being withdrawn. We will now use our filed and approved coverage form PM PHL 196, Individual Pharmacists Professional Liability, for all individual pharmacists professional liability policies. Under form PM PHL 196, students will no longer be provided violent assault protection coverage, nor will professional liability coverage be extended to a faculty member or the School of Pharmacy as an additional insured. The 15% additional insured charge previously included for each policy issued will be eliminated.

Rates under the student program have not changed, however, the rule and rate pages have been modified to more clearly address the College Student Group Billing option as follows:

- The \$16.00 policy charge is our minimum premium per student and will be the amount billed, regardless of the policy term.
- All student policies under a college group billing program will be issued with a common anniversary date.
- All students will be charged \$16.00 for professional liability coverage under the college group billing option. There is no longer a distinction between intern/extern students and other pharmacy students.