

SERFF Tracking Number: AGNY-126561049 State: District of Columbia
Filing Company: National Union Fire Insurance Company of Pittsburgh, Pa. State Tracking Number:
Company Tracking Number: CHS-10-EO-11
TOI: 11.0 Medical Malpractice - Claims Sub-TOI: 11.0026 Psychiatry
Made/Occurrence
Product Name: Psychiatrists Professional Liability Program 18300000750
Project Name/Number: Psychiatrists Professional Liability Program/CHS-10-EO-11

Filing at a Glance

Company: National Union Fire Insurance Company of Pittsburgh, Pa.

Product Name: Psychiatrists Professional Liability Program 18300000750 SERFF Tr Num: AGNY-126561049 State: District of Columbia

TOI: 11.0 Medical Malpractice - Claims SERFF Status: Closed-APPROVED State Tr Num:
Made/Occurrence

Sub-TOI: 11.0026 Psychiatry

Co Tr Num: CHS-10-EO-11

State Status:

Filing Type: Rule

Reviewer(s): Robert Nkojo

Author: Myron Harry

Disposition Date: 10/19/2010

Date Submitted: 03/31/2010

Disposition Status: APPROVED

Effective Date Requested (New): 05/01/2010

Effective Date (New):

Effective Date Requested (Renewal): 05/01/2010

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Psychiatrists Professional Liability Program

Status of Filing in Domicile:

Project Number: CHS-10-EO-11

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 10/19/2010

State Status Changed:

Deemer Date:

Created By: Myron Harry

Submitted By: Myron Harry

Corresponding Filing Tracking Number:

Filing Description:

National Union Fire Insurance Company of Pittsburgh, Pa. (the "Company") submits for your review and approval revised Manual Rules to be used with its Psychiatrists Professional Liability Insurance Program (the "Program") on file with your Department. Please be advised that these Manual Rules will replace those currently on file with your Department.

Please refer to the attached Manual Rules and side-by-side comparison for information about the revisions included in this submission.

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We wish to make this filing effective for all policies effective on or after May 1, 2010, or the earliest date permitted by your Department.

Your favorable consideration and approval are respectfully requested.

Company and Contact

Filing Contact Information

Myron Harry, myron.harry@aig.com
 175 Water Street - 17th Floor 212-458-7057 [Phone]
 New York, NY 10038 212-458-7077 [FAX]

Filing Company Information

National Union Fire Insurance Company of Pittsburgh, Pa. CoCode: 19445 State of Domicile: Pennsylvania
 175 Water Street Group Code: Company Type:
 New York, NY 10038 Group Name: State ID Number:
 (212) 770-7000 ext. [Phone] FEIN Number: 25-0687550

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
National Union Fire Insurance Company of Pittsburgh, Pa.	\$0.00		

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Robert Nkojo	10/19/2010	10/19/2010

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Psychiatrists Professional Liability Program - CHS-10-EO-11	Note To Reviewer	Myron Harry	10/14/2010	10/14/2010
Psychiatrists Professional Liability Program - CHS-10-EO-11	Note To Reviewer	Myron Harry	09/22/2010	09/22/2010
Psychiatrists Professional Liability Program - CHS-10-EO-11	Note To Reviewer	Myron Harry	08/30/2010	08/30/2010
Psychiatrists Professional Liability Program - CHS-10-EO-11	Note To Reviewer	Myron Harry	07/19/2010	07/19/2010
Psychiatrists Professional Liability Program - CHS-10-EO-11	Note To Reviewer	Myron Harry	06/09/2010	06/09/2010

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Disposition

Disposition Date: 10/19/2010

Effective Date (New):

Effective Date (Renewal):

Status: APPROVED

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter All Filings		Yes
Supporting Document	Consulting Authorization		Yes
Supporting Document	Actuarial Certification (P&C)		Yes
Supporting Document	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		Yes
Supporting Document	District of Columbia and Countrywide Loss Ratio Analysis (P&C)		Yes
Supporting Document	Side-by-side comparison		Yes
Rate	Manual Rules (Ed. 3/10)		Yes

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Project Name/Number: Psychiatrists Professional Liability Program/CHS-10-EO-11

Note To Reviewer

Created By:

Myron Harry on 10/14/2010 02:34 PM

Last Edited By:

Myron Harry

Submitted On:

10/14/2010 02:34 PM

Subject:

Psychiatrists Professional Liability Program - CHS-10-EO-11

Comments:

Mr. Robert Nkojo,

Could we please have an acknowledgment to our deemer letter dated September 22, 2010?

Thank you.

Myron Harry

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Note To Reviewer

Created By:

Myron Harry on 09/22/2010 01:35 PM

Last Edited By:

Myron Harry

Submitted On:

09/22/2010 01:50 PM

Subject:

Psychiatrists Professional Liability Program - CHS-10-EO-11

Comments:

Mr. Robert Nkojo,

On March 31, 2010 National Union Fire Insurance Company of Pittsburgh, Pa. submitted for your review and approval revised Manual Rules (Ed. 3/10) to be used with their Psychiatrists Professional Liability Program. To date we have not received notification regarding the status of this filing. Therefore, pursuant to sections 31.2502.27 and 31.2703 we are deeming these Manual Rules approved.

Acknowledgement upon receipt is respectfully requested.

Myron Harry

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Note To Reviewer

Created By:

Myron Harry on 08/30/2010 04:12 PM

Last Edited By:

Myron Harry

Submitted On:

08/30/2010 04:13 PM

Subject:

Psychiatrists Professional Liability Program - CHS-10-EO-11

Comments:

TO: Examiner,

Could we please have the status of the above-referenced filing. Thank you.

Myron Harry

SERFF Tracking Number: *AGNY-126561049* *State:* *District of Columbia*
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Pittsburgh, Pa.
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Note To Reviewer

Created By:

Myron Harry on 07/19/2010 06:31 PM

Last Edited By:

Myron Harry

Submitted On:

07/19/2010 06:32 PM

Subject:

Psychiatrists Professional Liability Program - CHS-10-EO-11

Comments:

TO: Reviewer,

Could we please have the status of the above-referenced filing. Thank you.

Myron Harry

SERFF Tracking Number: AGNY-126561049 State: District of Columbia
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Product Name: Psychiatrists Professional Liability Program 18300000750
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Note To Reviewer

Created By:

Myron Harry on 06/09/2010 08:59 AM

Last Edited By:

Myron Harry

Submitted On:

06/09/2010 08:59 AM

Subject:

Psychiatrists Professional Liability Program - CHS-10-EO-11

Comments:

TO: Reviewer,

Could we please have the status of the above-referenced filing.

Thank you.

Myron Harry

Rate/Rule Schedule

Schedule Item	Exhibit Name:	Rule # or Page	Rate Action	Previous State Filing Attachments
Status:		#:		Number:
	Manual Rules (Ed. 3/10)	Pages 1-11	Replacement	DC Manual Rules (3-10).pdf

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
PSYCHIATRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
WASHINGTON, DC MANUAL RULES**

Rule 1.	Rating Profile Items
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A member may receive the FYIP, SYIP, TYIP (&/or MILITARY) only once. The discount applies to the first (second or third) year immediately following the completion of residency or fellowship, regardless of interruption of time.

A member may receive the MIT discount more than once. The requirement is that the member is eligible for the MIT so long as the APA has reclassified his/her membership status accordingly.

If both an active part-time credit and an active F,S, TYIP credit are among the rating profile items, the higher credit of the two shall apply.

MIT credit cannot be combined with a part-time credit.

The current listing of Rating Profile Items (Program discounts, surcharges, credits & debits), is as follows:

Neurology	2x Psychiatrist Base Premium
Neurology with Special Procedures	4x Psychiatrist Base Premium
American Psychiatric Association Membership	5% Credit
Child & Adolescent Psychiatry (C&AP)	15% Premium Discount
Early Career Psychiatrists (includes military) Occurrence, Modified Occurrence and Claims-made Pre-Paid Tail Policies only	FYIP 60% Credit
	SYIP 40% Credit
	TYIP 35% Credit
Early Career Psychiatrists (includes military) Claims-Made Policies only	FYIP 50% Credit
	SYIP 25% Credit
	TYIP 25% Credit
Member in Training (MIT)	50% Credit
Part-Time Practice	1-10 Hours 50% Credit
	11-15Hours 40% Credit
	16-20Hours 30% Credit
Experience & Schedule Rating Program	See separate sections
Psychoanalytic Certification	5% Credit
Risk Management Seminar	5% Credit

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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Rule 2.	Vicarious Liability
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The additional premium for vicarious liability coverage is determined as follows:

**VICARIOUS LIABILITY
Additional Premium for Separate Limit
(Policy Coverage B)**

No. of Employees/Independent Contractors	Percent of final individual modified premium
0-3	10%
4-10	25%
11-25	50%
Over 25	100%

**VICARIOUS LIABILITY
Additional Premium for Shared Limit
(Policy Coverage A)**

No. of Employees/Independent Contractors	Percent of final individual modified premium
1-3	5%
4-10	15%
11-25	25%
Over 25	100%

Rule 3.	Premium Rounding
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All premiums shall be rounded to the nearest whole dollar. Amounts that are less than 50 cents shall be dropped. Increase amounts that are 50 cents or more to the next whole dollar.

Rounding procedures to be followed are taken from the Insurance Service Office, Inc. rules.

RATES: Round rates, factors and multipliers after the final calculation to three decimal places. Five-tenths or more of a mill shall be considered one mill, e.g., .1245 = .125

PREMIUM: Round the premium for each coverage for which a separate premium is calculated to the nearest whole dollar. Round a premium involving \$.50 or over the next higher whole dollar.

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Rule 4.	Maximum 50% Credit
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Maximum 50% credit (discount) applies subject to the following **exclusions:**

First Year in Practice (FYIP is 60%)
Experience factor is not included
Schedule factor is not included
Psychoanalytic Cert. factor is not included
Risk Management Seminar factor is not included
Child and Adolescent (C & AP) is not included

Rule 5.	Prior Acts Endorsement
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The following rating is used when a member converts the claims-made policy to occurrence and does not purchase extended reporting endorsement from the prior carrier. Prior Acts Endorsement will be effective the inception date of the occurrence policy and cover claims reported after the cancellation date which occurred between the retroactive date and cancellation date of the claims-made policy.

This rating will be used in situations where the member's most recent previous carrier was The Psychiatrists' Program and for some reason the member allowed occurrence policy to lapse. The lapsed period cannot exceed one year and must meet acceptable underwriting criteria.

1 st year in CLAIMS MADE Coverage	70% of Occurrence Premium
2 nd year in CLAIMS MADE Coverage	110% of Occurrence Premium
3 rd year in CLAIMS MADE Coverage	135% of Occurrence Premium
4 th year in CLAIMS MADE Coverage	145% of Occurrence Premium
5 th year and after in CLAIMS MADE Coverage	160% of Occurrence Premium

Rule 6.	Tail Coverage (Extended Reporting Period)
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Tail premium calculation process is **EXACTLY** the same process as for Primary Coverage regarding the application of all discounts, surcharges, credits, & debits, including short rate and prorata factors.

Tail pricing is based off of the Numbers of Years written under a Claims Made contract.

FREE TAIL COVERAGE

- Claims-Made Contract.** Tail coverage is free in the event of DEATH or PERMANENT DISABILITY, or when a member reaches age 55 or older and has been insured under a Psychiatrists' Program Claims-Made contract for at least 5 consecutive years immediately prior to permanent retirement. It is also free when a member has been insured with the Psychiatrists' Program under a claims-made contract for 10 consecutive or more years provided at the time of

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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Rule 6. Tail Coverage (Extended Reporting Period) (cont'd)

cancellation, the annual premium has **not been** experience rated anytime during the ten year period and the insured requested the cancellation of coverage.

2. **Modified Occurrence Contract.** Tail coverage is included at no additional cost upon termination or non-renewal, for any reason.
3. **Claims-Made with Prepaid Tail Contract.** Same as Modified Occurrence Contract.

Rule 7. Experience Rating Guidelines

The following Experience Rating Guidelines applies:

Severity

(Use last five-year experience period prior to renewal application)

Indemnity payment \$30,000 to \$50,000	10% per claim
Indemnity payment \$50,001 to \$99,999	20% per claim
Open or closed claim with Indemnity payment or reserve \$100,000 or more	30% per claim plus 10% each \$50,000 increment above \$100,000

Frequency (Open and Closed claims with incurred and/or reserved indemnity and expenses totaling \$10,000 and above).

Two claims reported within any 12-month period in last three years.	25% each claim
Three claims reported within last five years.	50% each claim

Liability (Open and closed claims within last 5 years)

a. Deviation from standard of care	50%-non-renewal
b. Non-cooperation with policy conditions	50%-non-renewal
c. Undue familiarity	
Insured admission	non-renewal
Settlement by carrier and/or insured	non-renewal

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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Rule 8.	Schedule Rating Plan – Individual Program
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The following schedule rating criteria can be used to establish the adjusted annual premium per participant.

Refer to the following, which discusses the underwriting intention for considering risk characteristics not otherwise contemplated in the base rate.

The rating schedule is intended to create an overall risk profile of the insured. Multiple characteristics should be weighted and evaluated based on measurable statistics, (i.e. practice time, number of patients, length of training or experience or lack thereof, etc)

This program is mandatory and to be administered consistently with each insured or prospective insured.

Schedule rating characteristics

A maximum adjustment to base rate of +/- 25% requires management approval except where indicated below.

A. PRACTICE SETTING:

Detention Facilities: This includes jails, juvenile centers, detention centers and prisons. Risks associated with this exposure are generally related to frequency rather than severity. Individuals kept in these facilities are typically litigious who spend significant time reviewing case law and figuring out ways to file suits. (Jail House Lawyers). In most **federal** facilities, the employees enjoy sovereign immunity, which means they cannot be sued. Therefore, our physician which is usually a contractor is left as the “deep pocket” and the only person available for potential recovery of alleged damages.

All other type of government or community facilities may or may not have statutes protecting the employees against liability. It will vary by state and county. There may also be protection for these individuals through the facility’s professional liability insurance carrier. Hold harmless indemnification clauses are standard in these contractual relationships. Therefore, it is important to understand the working arrangement between the insured and the facility to measure the degree of increased liability for our participant. **5% debit**

Patient recruitment practices: The probability of increased liability is common for those practices utilizing techniques for patient recruitment considered entrepreneurial and absent of credible medical necessity. For example, advertisements made outside of the practice area, bonuses given for patient referrals or profits generated by the care the physicians and other treating professionals rendered to their patients are some examples of techniques that could cause litigation.

The Underwriter should review the entire profile of the participant to determine the extent of increased liability if they are involved in a practice location or facility that engages in this activity. As a result of increased media concentration on these practices, many facilities have taken measures to terminate these

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Rule 8.	Schedule Rating Plan – Individual Program (cont’d.)
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practices. However, the amount of time the participant has been associated with this activity should be considered. **25% debit or convert the insured to a claims-made policy form.**

Home based practice: An insured working from the home is not uncommon in the practice of psychiatry. Many part-time women, who also are raising a family and want to continue practicing, conduct a small practice from their home. It is however, also understood that these individuals, maintain relationships with the community and medical mental health professionals for continued education and referral capabilities.

The liability for a participant is considered increased when an individual has chosen to work from the home because they cannot obtain clinical or hospital affiliations. The ongoing mentoring of colleagues is not present and the psychiatrist has no peer review of his/her practice activities. This practice profile may require intervention and additional interviewing by PRMS risk management to ascertain the degree of adverse risk. **10% debit**

Facility has been subject to license or accreditation disciplinary action or federal investigation or prosecution, mass tort litigation or investigative reporting. If an insured is affiliated with a facility that has recently been subject to any of these issues it is probable that the insured may have an increased liability. The effect of patient knowledge of these actions and media attention could place our insured in a position to be “guilty by association”.

The underwriter should utilize all reference information relative to this facility and determine the degree of involvement of our insured directly related to the facility’s adverse risk characteristics. **25% debit**

Clinical teaching activities exceed 50% of total practice time: Although the insured involved in this activity is competent to teach other medical professionals, the increase of patient volume related to this activity is considered an additional liability exposure. **10% debit**

B. NATURE AND SCOPE OF PRACTICE

Treatment of Borderline Personalities and Multiple Personality disorders: Incidental treatments of these disorders are contemplated in the base rates. However, the underwriter should consider the number of patients and time devoted by the participant to these treatments. In addition, treatment modality must be questioned by the underwriter and discussed with PRMS risk management for unconventional activities by the insured. **25% debit**

Treatment of pain management: Patients seeking psychiatric services for the management of pain are almost always associated with other medical treatments or illnesses. For this reason, treatment of pain management can increase the liability where our insured would be involved in a claim along with other treating physicians. The underwriter should discuss the volume of patients and practice time devoted to this activity. In addition, the treatment modalities should be discussed with PRMS risk management to

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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Rule 8.	Schedule Rating Plan – Individual Program (cont'd.)
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determine standard of care. Psychiatrists utilizing anesthesia for pain management is to be referred to management for consideration of continued insurability. **25% debit**

Use of abreaction, rage; sodium amytal, sex and recovered memory therapies: The base rate does not contemplate treatment by use of these types of therapies. Any insured utilizing these therapies should be discussed with PRMS risk management after the underwriter has secured information from the participant regarding the patient volume and practice time affiliated with these therapies. All insured members utilizing these therapies should be referred to management for consideration of continued insurability. **25% debit**

Supervision of/Consultation with professionals in 2, 3 and 4 above: Although the insured may not directly treat patients or use these therapies, they incur vicarious liability for the supervision of professionals who do. In addition, consultation is defined as professional services rendered and does not decrease the insured liability. Therefore, the premium should be increased as a result of this exposure. **25% debit**

Above average daily patient volume: An average daily patient volume of 25 is contemplated in the base rates. Any practice where the patient volume is greater should be considered as an increased risk and priced accordingly. **25% debit**

Adverse risk not contemplated in the base rate: This category should be used when the underwriter determines that the participant's exposure generates a risk not-otherwise discussed in the above criteria and was not contemplated in the usual and customary definition of psychiatric professional services but meets underwriting approval for coverage. Use of this category requires management approval in all cases.

Rule 9.	Group Accounts
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Eligibility

The medical groups that will be considered for Coverage B of the policy will be professional corporations, partnerships, or associations operated by behavioral healthcare professionals. The entity will also have psychiatrist affiliation.

Rates

Each Psychiatrist Insured will be rated in accordance with the individual program rules and rates.

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Rule 9. Group Accounts (cont'd)
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Individual coverage for other behavioral healthcare professionals will be rated as a percentage of the psychiatrist rate for that rating area.

- Psychologists: .20
- Social Workers .03
- Therapists: .03
- Nurses: .05
- Nurse Practitioner .30

Vicarious liability coverage for the medical group for employed or contracted behavioral healthcare providers not insured under the policy will be priced at 10% of the otherwise applicable premium rate (including discounts).

Medical group premium will be priced based on the following:

<u>Number of Insured employees/contractors.</u>	<u>Percentage of Insured Psychiatrist Base Rate</u>
2-5	10%
6-10	15%
11-20	20%
over 20	25%

The sum of the individuals, medical group and vicarious liability premium will determine the total premium of the medical group.

Non-psychiatrist insureds can share the limit of liability of the medical group.

The base rate for each insured sharing the limit with the group entity will be reduced by 10% when the total number of insured psychiatrists in the group exceeds 5 on an annual basis.

The base rate for each insured sharing the limit with the group entity will be reduced by 5% when the total number of insured psychiatrists in the group is 5 or less on an annual basis.

A schedule rating credit/debit can then be applied to the total premium of the medical group in accordance with the Schedule Rating Group Rules, (see attached).

Limits of Liability

Refer to policy Limits of Liability Section, Coverage A and Coverage B for application of limits for individual insureds, medical corporations, partnerships, and associations. Refer to the rate schedule for the applicable limits for each state.

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Rule 9.	Group Accounts (cont'd)
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Claims-Made

The retroactive date can be advanced only at the request or with the written acknowledgment of the insured.

Group Vicarious Liability Surcharge Endorsement

If a scheduled insured under the group policy terminates coverage and does not elect to purchase the extended reporting endorsement, the group premium will be surcharged 10% of the quoted ERP premium. The surcharge is applicable as a result of the vicarious liability exposure to the group for the professional services rendered by the insured while working on behalf of the group. The surcharge will be waived if the cancelled insured provides proof of prior acts coverage from the new carrier for the period insured under the group policy.

Other Physician Coverage

The Program will consider coverage for individual physicians affiliated with the medical group who are not psychiatrists (i.e. internists, pediatricians, family/general practice). The rate for these physicians will be calculated in accordance with the **filed** class relativity differential (psychiatry to other specialty) of the major medical professional liability insurance carrier in that state. The calculated relativity will then be applied to the base psychiatry rate used in this Program's individual rates.

Outside Medical Group Practice Activity

Coverage will be considered for an insured who has a medical practice outside the scope of his/her affiliation with the medical group. The outside practice is subject to underwriting and if accepted will be rated in accordance with the medical specialty rate and total practice hours applicable to all practice activities for which coverage has been provided.

Rule 10.	Schedule Rating Plan – Group Accounts
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The following modifications may be applied to recognize special characteristics that are not fully recognized in the basic rate(s) or premium. The maximum credit/debit shall not exceed +/-5. The schedule rating program is mandatory and to be administered consistently for each insured or prospective insured.

Management (+/- 5)

Management has demonstrated adequate control and monitoring of the risks and exposures of the organization. The financial condition of the Medical Group is favorable. An example of a Medical Group which would receive a credit would employ a dedicated risk manager and have favorable financial ratios.

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Rule 9.	Group Accounts (cont'd)
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Employees (+/-5)

The applicant has established a continuing professional education program for its employees and encourages certification in their respective specialties. There must be a statement in the employee handbook advocating continuing education. The Medical Group agrees to pay all or some of the tuition fees and/or related educational expenses. Further, the composition of the Medical Group will be 50% or greater of the employee population having board certification or similar advanced degrees for a maximum credit to be granted. If the percentage is lower, but still substantial, and the other criteria described above are met, a lesser credit may be granted. If none of the above, a debit will be made.

Risk Management (+/-5)

The applicant has an established and working risk management program to minimize the frequency and severity of claims. A Medical Group which has an incident reporting system, occurrence screening, and other mechanisms to address potential and actual claims would receive a maximum credit. If none of these mechanisms are in place, a debit will be made.

Medical Records/Informed Consent (+/-5)

The applicant has a system in effect for concurrent and retrospective review of medical records and informed consent documents. If the Medical Group has a medical records system only or an informed consent system only, no debit or credit is available. If both systems are in effect, a credit is available. If neither system is in effect, a debit will be made.

Performance of experimental procedures (+/-5)

If the medical group practice includes procedures that are considered experimental, but that are performed within the prescribed guidelines, controlled studies, or : “protocol” established by the manufacturer or similar entity, there will be no debit or credit, however if the experimental procedures are not subject to the protocol, a debit of up to 10% will be applied. Since the underlying program’s rates reflect the assumption that insureds will not be performing experimental procedures, no credit will be given under any circumstances and under this category i.e. there will be no credit if experimental procedures are not utilized.

Rule 11.	Locum Tenens
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A Locum Tenens (“hold the place of”) works in place of a Named Insured or Additional Named Insured, never at the same time. The Locum Tenens doctor must be underwritten in the same specialty classification as the Named Insured or Additional Named Insured. The program will allow Locum Tenens coverage for a maximum total of 45 days each policy year.

There is no charge for this coverage.

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
PSYCHIATRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
WASHINGTON, DC MANUAL RULES**

Rule 12.	Suspension of Insurance
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An insured may request suspension of insurance, due to disability or to accommodate a sabbatical leave of training. The insured will not be covered for claims or suits which arise based on an occurrence within the period of suspension. The insured is entitled to report claims during the period of suspension which arise from occurrences when the policy was in force and not on suspense.

Suspension may be secured for a minimum period of 90 consecutive days and for a maximum of one year. This option is allowed only once every four years except for reason of disability.

Billing for the current quarter(s) is suppressed, and a refund for the quarter(s) or remainder of quarter(s) affected is made to the insured.

Charge 25% of the claims-made rate.

Rule 13.	Policy Minimum Premium
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A minimum annual premium of \$1000.00 for any one policy with limits of \$1,000,000/\$3,000,000 or lower will be applied.

A minimum annual premium of \$2000.00 for any one policy with limits of \$2,000,000/\$6,000,000 will be applied.

SERFF Tracking Number: AGNY-126561049 State: District of Columbia
 Filing Company: National Union Fire Insurance Company of Pittsburgh, Pa. State Tracking Number:
 Company Tracking Number: CHS-10-EO-11
 TOI: 11.0 Medical Malpractice - Claims Sub-TOI: 11.0026 Psychiatry
 Made/Occurrence
 Product Name: Psychiatrists Professional Liability Program 18300000750
 Project Name/Number: Psychiatrists Professional Liability Program/CHS-10-EO-11

Supporting Document Schedules

	Item Status:	Status Date:
<p>Satisfied - Item: Cover Letter All Filings Comments: Attached please find a Cover Letter. Attachment: Cover Letter - DC 3-10 .pdf</p>		

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

	Item Status:	Status Date:
<p>Bypassed - Item: Actuarial Certification (P&C) Bypass Reason: N/A Comments:</p>		

	Item Status:	Status Date:
<p>Bypassed - Item: District of Columbia and Countrywide Experience for the Last 5 Years (P&C) Bypass Reason: N/A Comments:</p>		

	Item Status:	Status Date:

SERFF Tracking Number: AGNY-126561049 State: District of Columbia
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Product Name: Psychiatrists Professional Liability Program 18300000750
Project Name/Number: Psychiatrists Professional Liability Program/CHS-10-EO-11
Bypassed - Item: District of Columbia and
Countrywide Loss Ratio Analysis
(P&C)
Bypass Reason: N/A
Comments:

Item Status:

**Status
Date:**

Satisfied - Item: Side-by-side comparison

Comments:

Attached please find a side-by-side comparison.

Attachment:

DC Side-by-Side (6-04 vs 3-10).pdf

Myron Harry
Analyst
State Filings Division
212 458 7057 Telephone
212 458 7077 Facsimile

myron.harry@chartisinsurance.com



March 31, 2010

Honorable Thomas E. Hampton
Commissioner of Insurance
Dept. of Insurance, Securities and Banking (DISB)
810 First Street, NE – Suite 701
Washington, D.C. 20002-4227
Attn: Mr. Clark Simcock, Chief
(Rate & Rules Filings)

RE: NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.
NAIC #012-19445 FEIN #25-0687550

Psychiatrists Professional Liability Insurance Program
Our File Number: CHS-10-EO-11

Dear Mr. Simcock:

National Union Fire Insurance Company of Pittsburgh, Pa. (the "Company") submits for your review and approval revised Manual Rules to be used with its Psychiatrists Professional Liability Insurance Program (the "Program") on file with your Department. Please be advised that these Manual Rules will replace those currently on file with your Department.

Please refer to the attached Manual Rules and side-by-side comparison for information about the revisions included in this submission.

We wish to make this filing effective for all policies effective on or after May 1, 2010, or the earliest date permitted by your Department.

Your favorable consideration and approval are respectfully requested.

Sincerely,

Myron Harry
Myron Harry

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
 PSYCHIATRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
 SIDE-BY-SIDE COMPARISON OF MANUAL RULES
 DISTRICT OF COLUMBIA**

RULES VERSION 6-04

RULES VERSION 3-10

<p>RULE 1. RATING PROFILE ITEMS</p> <p>1. N/A</p>	<p>1. Added “American Psychiatric Association Membership.....5% Credit”</p>
<p>RULE 2. VICARIOUS LIABILITY</p> <p>1. Policy Coverage A shows as: No. of Employees/Independent Contractors: 0-3</p>	<p>1. Policy Coverage A has been corrected to: 1-3</p>
<p>RULE 9. GROUP ACCOUNTS</p> <p>1. Eligibility...”The entity will also have psychiatric affiliation with at least 50% of the psychiatrists being members in good standing with the American Psychiatric Association.”</p>	<p>1. Deleted “...with at least 50% of the psychiatrists being members in good standing with the American Psychiatric Association.”</p>