

SERFF Tracking Number: PPIC-126954632 State: District of Columbia
Filing Company: Preferred Professional Insurance Company State Tracking Number:
Company Tracking Number: DC-PS-10-01
TOI: 11.2 Med Mal-Claims Made Only Sub-TOI: 11.2000 Med Mal Sub-TOI Combinations
Product Name: Physicians & Surgeons Professional Liability
Project Name/Number: Rule Manual Revision/

Filing at a Glance

Company: Preferred Professional Insurance Company

Product Name: Physicians & Surgeons Professional Liability SERFF Tr Num: PPIC-126954632 State: District of Columbia

TOI: 11.2 Med Mal-Claims Made Only SERFF Status: Closed-APPROVED State Tr Num: WITHDRAWL

Sub-TOI: 11.2000 Med Mal Sub-TOI Combinations Co Tr Num: DC-PS-10-01 State Status:

Filing Type: Rule

Reviewer(s):

Authors: Kristyn Atchley, Denise Hill, Suni Snyder

Disposition Date: 12/21/2010

Date Submitted: 12/20/2010

Disposition Status: APPROVED WITHDRAWL

Effective Date Requested (New): 01/01/2011

Effective Date (New):

Effective Date Requested (Renewal): 01/01/2011

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Rule Manual Revision

Project Number:

Status of Filing in Domicile: Authorized

Domicile Status Comments: Approved by Nebraska effective 8/20/2010.

Reference Organization: N/A

Reference Number: N/A

Reference Title: N/A

Advisory Org. Circular: N/A

Filing Status Changed: 12/21/2010

State Status Changed:

Deemer Date:

Created By: Suni Snyder

Submitted By: Suni Snyder

Corresponding Filing Tracking Number:

Filing Description:

This filing is being submitted by Preferred Professional Insurance Company® (PPIC®) to be effective January 1, 2011 for new and renewal business. PPIC is filing a revised rule, "Extended Reporting Period Endorsement (Tail Coverage)", of our rule manual entitled "General Rates and Rules-Preferred Professional Insurance Company." A highlighted side-by-side comparison has been included in the supporting documentation section of this filing. If you should have any questions or require additional information, you may contact Suni Snyder via telephone (800) 441-7742, Ext. 3233 or at the following email address: ssnyder@ppicins.com. Thank you for your consideration of our filing.

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Company and Contact

Filing Contact Information

Suni Snyder, ssnyder@ppicins.com
 11605 Miracle Hills Drive 402-392-1566 [Phone] 3233 [Ext]
 Suite 200 402-392-2673 [FAX]
 Omaha, NE 68154

Filing Company Information

Preferred Professional Insurance Company CoCode: 36234 State of Domicile: Nebraska
 11605 Miracle Hills Drive Group Code: Company Type: P & C
 Suite 200 Group Name: State ID Number:
 Omaha, NE 68154-4467 FEIN Number: 47-0580977
 (800) 441-7742 ext. 240[Phone]

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Preferred Professional Insurance Company	\$0.00		

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Robert Nkojo	12/21/2010	12/21/2010

WITHDRAWL

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Withdrawl Request	Note To Reviewer	Suni Snyder	12/21/2010	12/21/2010

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Disposition

Disposition Date: 12/21/2010

Effective Date (New):

Effective Date (Renewal):

Status: APPROVED WITHDRAWL

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
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 for Rates and Rules-Preferred Professional Insurance Company Pages 4 & 5		Yes
Rate	Rates and Rules-Preferred Professional Insurance Company		Yes

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Note To Reviewer

Created By:

Suni Snyder on 12/21/2010 10:03 AM

Last Edited By:

Suni Snyder

Submitted On:

12/21/2010 10:03 AM

Subject:

Withdrawal Request

Comments:

Preferred Professional Insurance Company would like to withdraw this filing. If you should have any questions or concerns, please contact me. Thank you for your consideration.

Suni Snyder
(800)441-7742, ext. 3233
ssnyder@ppicins.com

Rate/Rule Schedule

Schedule Item	Exhibit Name:	Rule # or Page	Rate Action	Previous State Filing Attachments
Status:		#:		Number:
	Rates and Rules- Preferred Professional Insurance Company	Rule #IX/Section Replacement #5, Pages #4 & 5		Rule Revision Pages 4 & 5.pdf

7. Audit

The Company may audit the policy premium at policy expiration and make appropriate adjustment to the exposures and premium charged an account.

8. Claims-Made Factors

Determine the appropriate factor by measuring the time (in annual periods) from the physician or surgeons retroactive date to the policy effective date. Apply the appropriately interpolated factor to the base rates.

9. Extended Reporting Period Factors

Determine the appropriate factor by measuring the time (in annual periods) from the physician or surgeons retroactive date to the policy cancellation/termination date. Apply the appropriately interpolated factor to the base rates.

10. Interpolation

Where appropriate actuarially interpolated factors will be determined for those not indicated in the Appendices.

11. Multiple State/Territory Rating

Accounts having locations in multiple states or multiple territories will be rated based on the extent of the practice and exposure in each state/territory. Policy issuance will be based on the rates, rules and forms in the state of domicile for the physician and/or corporation.

IX. Physicians and Surgeons Liability General Rules – (12/15/2010)

1. Locum Tenens Coverage

Locum tenens coverage is extended under the terms of the insured physician's policy to a replacement or substitute physician subject to underwriting review. Coverage should not normally be provided for a period exceeding 30 days. The Locum Tenens physician will share in limits of the insured physician.

2. Part Time Physician Discount

Physicians who work less than 40 hours per week may be eligible for a premium discount. Part time premiums are adjusted according to the number of hours worked per week. Physicians whose clinical medical practice time does not exceed an average of 25 hours per week shall receive a premium discount:

Less than 10 hours per week – 35% discount
Less than 25 hours per week – 25% discount

3. Teaching Discount / Department Heads

Any physician, other than part time or FTE, may be given a discount factor to reflect time limited time with patients.

Time involved in Patient Contact	Department Heads with Limited Clinical Duties % applied to Physician or Surgeon Rate
Less than 25%	50%
25% to 30%	55%
30% to 35%	60%
35% to 40%	65%
40% to 45%	70%
Over 45%	75%

4. Full Time Equivalency (FTE)

In the MP policy coverage may be written on an FTE slot basis if an account is staffed by two or more part-time physicians or surgeons performing essentially equivalent professional services within a single physician or surgeon specialty. A common example is physicians who staff a hospital emergency department. Premium is computed by applying the rates applicable to an individual physician for each FTE position. FTE units are calculated based on cumulative hours worked per week divided by 50.

5. Extended Reporting Period Endorsement (Tail Coverage)

Physicians and their professional corporations choosing not to continue a claims-made contract with the Company shall be given an opportunity to purchase extended reporting period coverage.

Once an Extended Reporting Endorsement is purchased a supplemental aggregate limit will be provided. The supplemental aggregate limit of liability provided is equal to the limit of liability provided by the policy that the extended reporting endorsement is attached to.

Once in effect, an extended reporting period cannot be cancelled. The premium is fully earned upon receipt.

Unless otherwise specified, miscellaneous professional employee's share in the limits purchased for the corporation, if any. No additional charge is made for miscellaneous professional employees.

Should an individual named insured terminate association with a partnership or corporation, extended reporting period coverage can be provided to the partnership or corporation if the following criteria is met:

The partnership or corporation is insured with PPIC.

The individual named insured has purchased extended reporting period coverage on their individual policy or has purchased prior acts coverage with the new carrier (proof of coverage is required).

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Consulting Authorization		
Bypass Reason: Not applicable.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Actuarial Certification (P&C)		
Bypass Reason: Not applicable.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		
Bypass Reason: Not applicable.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: District of Columbia and Countrywide Loss Ratio Analysis (P&C)		
Bypass Reason: Not applicable.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: Side-by-Side Comparision for Rates and Rules-Preferred Professional		

Previous Version

RATES AND RULES – PREFERRED PROFESSIONAL INSURANCE COMPANY

7. Audit

The Company may audit the policy premium at policy expiration and make appropriate adjustment to the exposures and premium charged an account.

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Any physician, other than part time or FTE, may be given a discount factor to reflect time limited time with patients.

New Version

RATES AND RULES – PREFERRED PROFESSIONAL INSURANCE COMPANY

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Once in effect, an extended reporting period cannot be cancelled. The premium is fully earned upon receipt.

Unless otherwise specified, miscellaneous professional employee's share in the limits purchased for the corporation, if any. No additional charge is made for miscellaneous professional employees.

~~Any credit or debit applied to the policy premium will also apply to the extended reporting period premium.~~

Should an individual named insured terminate association with a partnership or corporation, extended reporting period coverage can be provided to the partnership or corporation if the following criteria is met:

The partnership or corporation is insured with PPIC.

The individual named insured has purchased extended reporting period coverage on their individual policy or has purchased prior acts coverage with the new carrier (proof of coverage is required).

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