

PATIENT'S COMPENSATION FUND  
**Surcharge Rates effective January 1, 2008**

CLASS	CLAIMS-MADE MATURITY YEAR					OCCURRENCE	SELF INSURED
	1	2	3	4	5		
Class 1A	2,418	4,034	4,733	5,106	5,373	5,845	5,845
Class 1	3,267	5,443	6,389	6,896	7,254	7,888	7,888
Class 2A	3,685	6,213	7,208	7,781	8,183	8,898	8,898
Class 2	4,946	8,242	9,666	10,432	10,987	11,939	11,939
Class 3	6,644	11,066	12,987	14,016	14,760	16,041	16,041
Class 4*	10,288	17,139	20,098	21,703	22,849	24,827	24,827
Class 5*	9,536	15,887	18,643	20,122	21,186	23,022	23,022
Class 6	12,766	21,268	24,958	26,952	28,370	30,841	30,841
Class 7	18,218	30,358	35,626	38,449	40,477	43,996	43,996
Class 8A	24,812	41,360	48,525	52,386	55,147	59,931	59,931
Class 8	27,765	46,273	54,291	58,612	61,712	67,060	67,060

Dentist	266	405	476	514	541	587	587
Oral Surgeon	1,749	2,664	3,128	3,376	3,552	3,861	3,861

\* see notes for special "per patient visit" rates for ER physicians

	CLAIMS-MADE MATURITY YEAR					OCCURRENCE	SELF INSURED
	1	2	3	4	5		
CRNA	2,931	4,882	5,734	6,188	6,509	7,079	7,079

	CLAIMS-MADE MATURITY YEAR					OCCURRENCE	SELF INSURED
	1	2	3	4	5		
HOSPITALS**	1,284	2,142	2,508	2,701	2,849	3,096	3,096

	CLAIMS-MADE MATURITY YEAR					OCCURRENCE	SELF INSURED
	1	2	3	4	5		
NURSING HOMES							
SKILLED BED	256	428	501	541	570	620	620
INTERMEDIATE	179	299	351	379	399	432	432
OTHER	130	216	250	269	286	310	310

	CLAIMS-MADE MATURITY YEAR					OCCURRENCE	SELF INSURED
	1	2	3	4	5		
SURGICAL CENTER	127	211	247	266	281	306	306
DIALYSIS CENTER	27	45	53	56	60	65	65

(Both per 100 procedures)

BLOOD BANK (per draw)	0.17	0.28	0.33	0.35	0.37	0.40	0.40
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ALL OTHER PROVIDERS: .87 of basic limits coverage premiums (\$250 minimum)

\*\* HOSPITAL EXPOSURE BASE  $\frac{\text{Outpatients Visits}}{4000.00}$  plus # occupied beds=EXPOSURE

**ADVANCED PRACTICE REGISTERED NURSES**

**SURCHARGE RATES EFF JANUARY 1, 2008**

	CLAIMS MADE MATURITY YEAR					OCC	S.I.
	1	2	3	4	5		
PHY ASSISTANT	1,143	1,905	2,237	2,414	2,538	2,760	2,760
SUR ASSISTANT	1,143	1,905	2,237	2,414	2,538	2,760	2,760
CLINICAL NURSE SPEC	653	1,089	1,278	1,379	1,451	1,578	1,578
NURSE PRACTITIONER	653	1,089	1,278	1,379	1,451	1,578	1,578
NURSE MIDWIFE	2,450	4,083	4,791	5,172	5,440	5,916	5,916

PATIENT'S COMPENSATION FUND  
Tail Rates effective January 1, 2008

CLASS	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
Class 1A	4,304	6,131	6,816	7,095	7,095
Class 1	5,810	8,273	9,199	9,584	9,584
Class 2A	6,555	9,333	10,379	10,813	10,813
Class 2	8,806	12,527	13,919	14,502	14,502
Class 3	11,829	16,821	18,702	19,484	19,484
Class 4*	18,313	26,050	28,946	30,169	30,169
Class 5*	16,971	24,150	26,846	27,970	27,970
Class 6	22,723	32,340	34,709	37,462	37,462
Class 7	32,426	46,145	51,301	53,444	53,444
Class 8A	44,167	62,865	69,876	72,817	72,817
Class 8	49,423	70,334	78,181	81,471	81,471
Dentist	416	633	743	802	802
Oral Surgeon	2,688	4,088	4,799	5,177	5,177

\* see notes for special "per patient visit" rates for ER physicians

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
CRNA	5,216	7,422	8,255	8,602	8,602

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
HOSPITALS**	2,284	3,255	3,608	3,758	3,758

NURSING HOMES	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
SNF	457	650	721	751	751
INTERMEDIATE	320	454	505	525	525
OTHER	228	325	361	375	375

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
SURGICAL CENTER	226	320	357	371	371
DIALYSIS CENTER	48	69	76	79	79

(Both per 100 procedures)

BLOOD BANK (per draw)	0.30	0.42	0.47	0.49	0.49
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ALL OTHER PROVIDERS: .87 of basic limits coverage premiums (\$250 minimum)

\*\* HOSPITAL EXPOSURE BASE  $\frac{\text{Outpatients Visits}}{4000.00}$  plus # occupied beds=EXPOSURE

**ADVANCED PRACTICE REGISTERED NURSES**

**TAIL COVERAGE RATES EFF JANUARY 1, 2008**

CLASS	CLAIMS MADE MATURITY YEAR				
	1	2	3	4	5
PHY ASSISTANT	2,033	2,896	3,220	3,355	3,355
SUR ASSISTANT	2,033	2,896	3,220	3,355	3,355
CLIIICAL NURSE SPEC	1,162	1,655	1,840	1,917	1,917
NURSE PRACTITIONER	1,162	1,655	1,840	1,917	1,917
NURSE MIDWIFE	4,358	6,205	6,899	7,188	7,188