

LOUISIANA PATIENT'S COMPENSATION FUND

Tail Rates
Effective 9/2/2010

CLASS	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
Class 1A	3,752	5,345	5,942	6,186	6,186
Class 1	5,196	7,399	8,227	8,571	8,571
Class 2A	6,010	8,557	9,515	9,913	9,913
Class 2	7,875	11,202	12,448	12,969	12,969
Class 3	10,844	15,421	17,145	17,862	17,862
Class 4*	16,789	23,882	26,537	27,658	27,658
Class 5*	15,177	21,597	24,008	25,014	25,014
Class 6	20,321	28,921	31,039	33,502	33,502
Class 7	28,998	41,267	45,878	47,794	47,794
Class 8A	38,504	54,805	60,918	63,482	63,482
Class 8	44,198	62,899	69,916	72,859	72,859

Dentist	372	566	664	717	717
Oral Surgeon	2,403	3,655	4,292	4,630	4,630
Phy Assistant	1,818	2,590	2,880	3,001	3,001
Sur Assistant	1,818	2,590	2,880	3,001	3,001
Clinical Nurse Specialist	1,039	1,480	1,645	1,714	1,714
Nurse Practitioner	1,039	1,480	1,645	1,714	1,714
Nurse Midwife	3,897	5,549	6,170	6,428	6,428
Chiropractor	2,078	2,959	3,291	3,428	3,428
Pharmacist	779	1,110	1,234	1,286	1,286
Optometrist	650	925	1,028	1,071	1,071

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
CRNA	4,547	6,470	7,197	7,499	7,499

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
HOSPITALS**	2,236	3,187	3,532	3,679	3,679

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

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
NURSING HOMES					
SNF	497	707	784	817	817
INTERMEDIATE	310	442	490	511	511
OTHER	247	353	392	408	408

	CLAIMS-MADE MATURITY YEAR				
	1	2	3	4	5
SURGICAL CENTER	249	353	394	410	410
DIALYSIS CENTER	53	76	84	87	87
(Both per 100 procedures)					
BLOOD BANK (per draw)	0.34	0.46	0.51	0.54	0.54

ALL OTHER PROVIDERS: 0.93 of basic limits coverage premiums (\$250 minimum)

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