Introduction

The West Virginia Offices of the Insurance Commissioner has prepared this report on Medical Professional Liability Insurance to fulfill the requirements and intent of West Virginia Regulations §114CSR22, §114CSR23, West Virginia Code §33-20B-6, and §33-20B-7. The information used in the preparation of this report encompasses the experience found in the statutorily required “filed information” of those insurers with a 5% or greater written premium market share, the rate filings of those companies, National Association of Insurance Commissioners (NAIC) supplementary information, Insurance Services Office (ISO) loss cost filings and other ISO reports, A. M. Best reports, data collected in accordance with §33-20B-8, and data from the West Virginia Board of Medicine.

A “claim for medical malpractice”\(^1\) means a claim arising out of the rendering of, or the failure to render, medical care services. An “action of medical malpractice” is a tort or breach of contract claim for damages due to the death, injury, or monetary loss to any person arising out of any medical, dental, or surgical diagnosis, treatment, or care by any provider of healthcare.

In any action for the recovery of damages based upon medical malpractice, a claimant has the burden of proving the alleged actions of the healthcare provider represented a breach of, or failure to meet, the prevailing standard of care for that type of healthcare provider. The prevailing professional standard of care for a given healthcare provider is the level of care, skill and treatment which, in light of all relevant surrounding circumstances, is recognized as acceptable and appropriate by reasonably prudent similar healthcare providers.

\(^1\) 2003 University of Central Florida Governor’s Select Task Force on Healthcare Professional Liability Insurance
The medical malpractice insurance market has gone through three crisis periods or “hard” markets during the past thirty years. The first medical malpractice crisis occurred in the mid-to–late 1970s. The second medical malpractice crisis occurred in the mid-1980s. The most recent medical malpractice crisis began in early 2001. This hard insurance market was driven by a number of factors:2

- Rising loss trends;
- Higher and more volatile jury awards;
- Adverse reserve development on prior accident/report year reserves;
- Reduced carrier capacities;
- Rising cost and availability of reinsurance;
- Varying success of tort reform packages in multiple states (e.g., constitutionality, ability to pass reforms); and
- Declining investment returns.

As this report will show, West Virginia’s medical malpractice insurance results have displayed continuous improvement compared to that of the years subsequent to the recent “hard” market period. Rate level changes which have been approved over the last few years, the passage of H.B. 601 and H.B. 2122 creating the policyholder owned West Virginia Mutual Insurance Company have all contributed to the change in the Medical Malpractice Liability results in West Virginia. In 2011, we continued to experience an overall general stabilization in rates (i.e. little to no change) from the major admitted writers in West Virginia.

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2 July/August 2004 Contingencies Magazine (www.contingencies.org), The Medical Malpractice Market: From National Dominance to Regional Focus, Kevin Bingham.
This year’s report covers the following medical malpractice insurance areas:

- **Section I:** An overview of the Industry’s *by-line* insurance results in 2011 together with a *comparison* of Industry results and West Virginia results for the Medical Malpractice Insurance line.

- **Section II:** A review of §33-20B-8 closed claim data and the West Virginia Board of Medicine paid claim data covering 1994–2011.

- **Section III:** A *fulfillment of the legislative requirements* examining market positions, rating plans and rules, and a comparison of filed information to rate filings and financial statement information. This section includes a commentary concerning Joint Underwriting Associations pursuant to §33-20B-7. A review of rate filings and investment returns is also provided, as well as a sample comparison of currently approved physician’s and surgeon’s rates in West Virginia.

- **Section IV:** A review of Medical Liability Fund data, Board of Medicine licensure data, and other claim data gathered from Company financial statements.

- **Section V:** Summary observations

The overall goal of this report is to provide the reader with insight into the current Medical Malpractice Insurance market in the State of West Virginia.
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2011 to 2000 Paid and Reserved Physicians Claims by Year
2011 West Virginia Population by County
Section I

Overview
I. Overview of Countrywide P&C Insurance Industry Results for 2011

Experience for the combined all lines property and casualty insurance industry deteriorated slightly during 2011, yet maintained profitability. The results continue to be somewhat influenced by the general recession and further remain above the particularly favorable levels which were realized around 2006 and 2007.

The combined all lines property and casualty insurance industry operating ratio for 2011 was 99.8%. This net operating ratio reflects the results after paying/reserving for all claims and claim expenses; paying underwriting expenses and dividends; paying and collecting on reinsurance agreements; and accounting for investment gains/losses.
The 2011 net operating experience of the P&C Industry as compared to some of its key element lines were as follows:
Several points can be noted from the industry results for 2011:

- The highly adverse impact of the national financial crisis upon the Financial and Mortgage Guaranty lines, having begun in 2008, is shown to have continued during this time.

- Reinsurance industry results, which often influence future outcomes for other lines of business, remained marginally favorable (at 95.1%) as its net operating ratio had been 234.3% in 2005.

- Results for Medical Malpractice remain very encouraging.

**I-A: Medical Malpractice Insurance Results for the Industry**

Medical Malpractice, which was the poorest performing line of insurance shortly after the millennium, has continued to show improvement since the adverse level which occurred in 2001, and is now performing well below the total combined industry results. The graph below displays industry net operating ratios occurring since 1997:
This chart displays the combined ratio contribution by component excluding investment income:

$LAE = \text{Loss Adjustment Expense, also known as Direct Cost Containment Expense (DCCE)}$ which are those expenses such as outside attorney costs and necessary court fees that can be directly tied to a specific claim. Refer to the Glossary for more information.

**Source:** A. M. Best
**Profitability** for medical malpractice writers can be examined in the following table. Profitability can be volatile from year to year, thus *it is important to look at a number of years*:

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net Income ($M)</strong></td>
<td>$523</td>
<td>($263)</td>
<td>($782)</td>
<td>($544)</td>
<td>$77</td>
<td>$652</td>
<td>$1,615</td>
<td>$1,844</td>
<td>$1,272</td>
<td>$1,696</td>
<td>$2,061</td>
<td>$2,040</td>
</tr>
<tr>
<td><strong>Surplus ($M)</strong></td>
<td>$7,102</td>
<td>$6,678</td>
<td>$5,786</td>
<td>$6,150</td>
<td>$6,638</td>
<td>$7,195</td>
<td>$7,958</td>
<td>$10,790</td>
<td>$10,772</td>
<td>$12,326</td>
<td>$13,375</td>
<td>$14,470</td>
</tr>
<tr>
<td><strong>Return on Surplus</strong></td>
<td>7.4%</td>
<td>-3.9%</td>
<td>-12.5%</td>
<td>-9.1%</td>
<td>12.0%</td>
<td>9.4%</td>
<td>21.3%</td>
<td>18.4%</td>
<td>11.8%</td>
<td>14.7%</td>
<td>16.0%</td>
<td>14.7%</td>
</tr>
</tbody>
</table>

*Source: A. M. Best*

Over the past twelve years, the 247 medical malpractice organizations above have amassed a fairly substantial policyholder surplus. Note that whereas earlier reports had indicated an overall loss of net income in hundreds of millions of dollars, the 2011 results demonstrate the just opposite with a 14.7% return. Note also that the diminishing return on surplus beginning in 2007, and stemming from the U.S. financial market crisis, did not continue into 2011.

**I-B: Medical Malpractice: Industry vs. West Virginia Comparison**

The following exhibits provide a comparison of Medical Malpractice results for the Industry along with results for West Virginia specifically over the past thirteen years. In reviewing this exhibit, a few key areas of difference (*apart from the premium totals*) are noted. A general decline in total West Virginia premiums since 2004; greater volatility in direct West Virginia loss ratios and loss adjustment expenses (*due to our relatively small market size*), and a quicker return to overall profitability than that which was experienced on a countrywide basis.
## Industry vs. West Virginia Medical Malpractice Results (000's)

### INDUSTRY (Best's Aggregates & Averages)

<table>
<thead>
<tr>
<th>Year</th>
<th>Direct Written Premium</th>
<th>Direct Earned Premium</th>
<th>Direct Loss Ratio</th>
<th>Loss Adjustment Expense</th>
<th>Underwriting Expense</th>
<th>Direct Combined Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>$6,027,964</td>
<td>$6,013,442</td>
<td>74.60%</td>
<td>32.10%</td>
<td>20.10%</td>
<td>126.80%</td>
</tr>
<tr>
<td>2000</td>
<td>$6,376,040</td>
<td>$6,329,556</td>
<td>81.00%</td>
<td>32.10%</td>
<td>19.20%</td>
<td>132.30%</td>
</tr>
<tr>
<td>2001</td>
<td>$7,457,325</td>
<td>$6,928,413</td>
<td>99.60%</td>
<td>34.30%</td>
<td>18.50%</td>
<td>152.40%</td>
</tr>
<tr>
<td>2002</td>
<td>$9,308,354</td>
<td>$8,796,700</td>
<td>92.10%</td>
<td>31.70%</td>
<td>17.40%</td>
<td>141.20%</td>
</tr>
<tr>
<td>2003</td>
<td>$10,755,416</td>
<td>$10,268,287</td>
<td>94.50%</td>
<td>31.00%</td>
<td>15.00%</td>
<td>127.80%</td>
</tr>
<tr>
<td>2004</td>
<td>$10,665,495</td>
<td>$10,330,639</td>
<td>64.50%</td>
<td>27.50%</td>
<td>14.20%</td>
<td>106.20%</td>
</tr>
<tr>
<td>2005</td>
<td>$10,988,548</td>
<td>$10,795,144</td>
<td>51.10%</td>
<td>27.80%</td>
<td>15.40%</td>
<td>94.30%</td>
</tr>
<tr>
<td>2006</td>
<td>$11,875,752</td>
<td>$11,757,946</td>
<td>43.60%</td>
<td>26.70%</td>
<td>15.90%</td>
<td>86.20%</td>
</tr>
<tr>
<td>2007</td>
<td>$11,138,991</td>
<td>$11,231,987</td>
<td>40.90%</td>
<td>23.20%</td>
<td>17.40%</td>
<td>81.50%</td>
</tr>
<tr>
<td>2008</td>
<td>$10,820,311</td>
<td>$10,997,245</td>
<td>34.10%</td>
<td>23.20%</td>
<td>17.90%</td>
<td>75.20%</td>
</tr>
<tr>
<td>2009</td>
<td>$10,357,743</td>
<td>$10,428,668</td>
<td>35.00%</td>
<td>23.40%</td>
<td>19.50%</td>
<td>77.90%</td>
</tr>
<tr>
<td>2010</td>
<td>$10,105,847</td>
<td>$10,077,342</td>
<td>31.80%</td>
<td>22.20%</td>
<td>20.10%</td>
<td>74.10%</td>
</tr>
<tr>
<td>2011</td>
<td>$9,765,193</td>
<td>$9,799,084</td>
<td>33.20%</td>
<td>23.90%</td>
<td>21.20%</td>
<td>78.30%</td>
</tr>
<tr>
<td>Total</td>
<td>$125,642,979</td>
<td>$123,754,453</td>
<td>58.70%</td>
<td>27.62%</td>
<td>17.85%</td>
<td>104.17%</td>
</tr>
</tbody>
</table>

### WEST VIRGINIA (NAIC Annual Statement Data)

<table>
<thead>
<tr>
<th>Year</th>
<th>Direct Written Premium</th>
<th>Direct Earned Premium</th>
<th>Direct Loss Ratio</th>
<th>Loss Adjustment Expense</th>
<th>Underwriting Expense</th>
<th>Direct Combined Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>$44,387</td>
<td>$42,565</td>
<td>93.82%</td>
<td>69.48%</td>
<td>15.23%</td>
<td>178.53%</td>
</tr>
<tr>
<td>2000</td>
<td>$67,635</td>
<td>$57,081</td>
<td>76.51%</td>
<td>59.91%</td>
<td>13.54%</td>
<td>149.96%</td>
</tr>
<tr>
<td>2001</td>
<td>$67,248</td>
<td>$67,451</td>
<td>89.68%</td>
<td>51.23%</td>
<td>13.61%</td>
<td>154.51%</td>
</tr>
<tr>
<td>2002</td>
<td>$71,909</td>
<td>$86,550</td>
<td>97.76%</td>
<td>22.56%</td>
<td>9.41%</td>
<td>129.73%</td>
</tr>
<tr>
<td>2003</td>
<td>$50,312</td>
<td>$52,792</td>
<td>70.17%</td>
<td>18.27%</td>
<td>9.01%</td>
<td>97.44%</td>
</tr>
<tr>
<td>2004</td>
<td>$113,237</td>
<td>$94,994</td>
<td>38.23%</td>
<td>20.99%</td>
<td>8.00%</td>
<td>67.22%</td>
</tr>
<tr>
<td>2005</td>
<td>$83,680</td>
<td>$79,774</td>
<td>26.59%</td>
<td>1.25%</td>
<td>14.21%</td>
<td>42.05%</td>
</tr>
<tr>
<td>2006</td>
<td>$78,739</td>
<td>$77,969</td>
<td>15.72%</td>
<td>11.86%</td>
<td>14.00%</td>
<td>41.58%</td>
</tr>
<tr>
<td>2007</td>
<td>$60,323</td>
<td>$60,264</td>
<td>59.39%</td>
<td>50.76%</td>
<td>14.32%</td>
<td>124.47%</td>
</tr>
<tr>
<td>2008</td>
<td>$53,272</td>
<td>$54,743</td>
<td>-3.35%</td>
<td>39.42%</td>
<td>11.88%</td>
<td>42.96%</td>
</tr>
<tr>
<td>2009</td>
<td>$51,721</td>
<td>$52,199</td>
<td>36.55%</td>
<td>16.67%</td>
<td>11.13%</td>
<td>64.35%</td>
</tr>
<tr>
<td>2010</td>
<td>$47,827</td>
<td>$51,315</td>
<td>22.52%</td>
<td>23.14%</td>
<td>11.47%</td>
<td>57.13%</td>
</tr>
<tr>
<td>2011</td>
<td>$58,400</td>
<td>$60,694</td>
<td>61.62%</td>
<td>19.72%</td>
<td>10.39%</td>
<td>91.73%</td>
</tr>
<tr>
<td>Total</td>
<td>$848,690</td>
<td>$838,391</td>
<td>52.32%</td>
<td>31.17%</td>
<td>12.01%</td>
<td>95.51%</td>
</tr>
</tbody>
</table>
As indicated in earlier reports, note that the 2007 West Virginia results on the preceding page appear to be somewhat of an anomaly, and upon detailed review were shown to be largely driven by the exit of just two companies from our market during that year. Specifically, **Health Care Indemnity Incorporated** *(a hospital policy writer, included in the 2006 report with 5.26% market share)* did not renew their single hospital policy for 2007 and posted a Direct Defense Cost Containment and Expense incurred figure of $19.3M for the year. Note that this amount ($19.3M) is 4.7 times larger than their entire earned premium for that same exposure in 2006 ($4.1M), and that the same heavily influenced the LAE ratio noted above as it was more than half of all incurred LAE ($30.6M).

Secondly, **NCRIC, Inc.** *(the 9th largest admitted writer in West Virginia by market share in 2006, and 4th largest in 2004)* fully exited the West Virginia market during 2007, posting negative earned premium figures for 2007 and a direct incurred DCCE figure ($1.7M) that were more than 50% of their last positive earned premium ($3.3M) amounts for 2006. Were it not for the two companies mentioned above leaving our market during 2007, the State-wide results would have been significantly different.

Visually, a comparison of Industry results with West Virginia results for Medical Malpractice utilizing data from the preceding table can be seen in the three graphs which follow:
A review of the Direct Operating Ratio (which further reflects Dividends Paid and Investment Gain/Loss) produces the results which follow:

<table>
<thead>
<tr>
<th>INDUSTRY (Best's Aggregates &amp; Averages)</th>
<th>Direct Combined Ratio</th>
<th>Dividend</th>
<th>Combined Ratio (after Dividend)</th>
<th>Investment Gain</th>
<th>Direct Operating Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
<td>2000</td>
<td>126.80%</td>
<td>3.70%</td>
<td>130.50%</td>
<td>7.40%</td>
</tr>
<tr>
<td></td>
<td>2001</td>
<td>132.30%</td>
<td>2.70%</td>
<td>135.00%</td>
<td>-3.90%</td>
</tr>
<tr>
<td></td>
<td>2002</td>
<td>141.20%</td>
<td>1.60%</td>
<td>142.80%</td>
<td>-12.50%</td>
</tr>
<tr>
<td></td>
<td>2003</td>
<td>127.80%</td>
<td>0.40%</td>
<td>128.20%</td>
<td>-9.10%</td>
</tr>
<tr>
<td></td>
<td>2004</td>
<td>106.20%</td>
<td>0.50%</td>
<td>106.70%</td>
<td>12.00%</td>
</tr>
<tr>
<td></td>
<td>2005</td>
<td>94.30%</td>
<td>0.60%</td>
<td>94.90%</td>
<td>9.40%</td>
</tr>
<tr>
<td></td>
<td>2006</td>
<td>86.20%</td>
<td>0.70%</td>
<td>86.90%</td>
<td>21.30%</td>
</tr>
<tr>
<td></td>
<td>2007</td>
<td>81.50%</td>
<td>2.20%</td>
<td>83.70%</td>
<td>18.40%</td>
</tr>
<tr>
<td></td>
<td>2008</td>
<td>75.20%</td>
<td>2.20%</td>
<td>77.40%</td>
<td>11.80%</td>
</tr>
<tr>
<td></td>
<td>2009</td>
<td>77.90%</td>
<td>2.30%</td>
<td>80.20%</td>
<td>14.70%</td>
</tr>
<tr>
<td></td>
<td>2010</td>
<td>74.10%</td>
<td>2.90%</td>
<td>77.00%</td>
<td>16.00%</td>
</tr>
<tr>
<td></td>
<td>2011</td>
<td>78.30%</td>
<td>3.20%</td>
<td>81.50%</td>
<td>14.70%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100.15%</td>
<td>1.92%</td>
<td>102.07%</td>
<td>8.35%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WEST VIRGINIA (NAIC Annual Statement Data)</th>
<th>Direct Combined Ratio</th>
<th>Dividend</th>
<th>Combined Ratio (after Dividend)</th>
<th>Investment Gain</th>
<th>Direct Operating Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
<td>2000</td>
<td>149.96%</td>
<td>0.06%</td>
<td>150.01%</td>
<td>7.40%</td>
</tr>
<tr>
<td></td>
<td>2001</td>
<td>154.51%</td>
<td>0.05%</td>
<td>154.57%</td>
<td>-3.90%</td>
</tr>
<tr>
<td></td>
<td>2002</td>
<td>129.73%</td>
<td>0.05%</td>
<td>129.78%</td>
<td>-12.50%</td>
</tr>
<tr>
<td></td>
<td>2003</td>
<td>97.44%</td>
<td>0.05%</td>
<td>97.49%</td>
<td>-9.10%</td>
</tr>
<tr>
<td></td>
<td>2004</td>
<td>67.22%</td>
<td>0.02%</td>
<td>67.24%</td>
<td>12.00%</td>
</tr>
<tr>
<td></td>
<td>2005</td>
<td>42.05%</td>
<td>0.04%</td>
<td>42.08%</td>
<td>9.40%</td>
</tr>
<tr>
<td></td>
<td>2006</td>
<td>41.58%</td>
<td>0.06%</td>
<td>41.64%</td>
<td>21.30%</td>
</tr>
<tr>
<td></td>
<td>2007</td>
<td>124.47%</td>
<td>0.11%</td>
<td>124.58%</td>
<td>18.40%</td>
</tr>
<tr>
<td></td>
<td>2008</td>
<td>42.96%</td>
<td>0.19%</td>
<td>43.15%</td>
<td>11.80%</td>
</tr>
<tr>
<td></td>
<td>2009</td>
<td>64.35%</td>
<td>0.15%</td>
<td>64.50%</td>
<td>14.70%</td>
</tr>
<tr>
<td></td>
<td>2010</td>
<td>57.13%</td>
<td>0.24%</td>
<td>57.37%</td>
<td>16.00%</td>
</tr>
<tr>
<td></td>
<td>2011</td>
<td>91.73%</td>
<td>0.21%</td>
<td>91.94%</td>
<td>14.70%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>88.59%</td>
<td>0.10%</td>
<td>88.70%</td>
<td>8.35%</td>
</tr>
</tbody>
</table>

- The figures above demonstrate that after accounting for dividends and investment gain, medical malpractice produced an operating profit in West Virginia from 2004 to 2006 and again in 2008 through 2011, and that it remains profitable, and notably more profitable overall than that of the countrywide average over the period shown above.
I-C: Key Drivers of West Virginia Medical Malpractice Insurance Results

Negative Factors

- Volatile Loss Ratio
- Volatile Loss Adjustment Expenses

Positive Factors

- General overall decline in Loss Ratio since 2002
- Relatively stable Underwriting Expense
- Recently favorable Investment income (offset)

Overall, the graph above visually demonstrates a marked and continued improvement over the experience of earlier years for the West Virginia Medical Malpractice market.
I-D: Loss and Defense Costs Incurred vs. Premiums Earned

The charts below compare losses and defense costs for the Industry (countrywide basis) against the comparable figures for West Virginia alone. They clearly show that results for loss and defense cost in West Virginia had far exceeded premiums until the turnaround reported for 2003, and afterward have remained favorable overall, yet somewhat volatile. Note that each graph is on a per thousand basis.

[Charts showing trends in premiums earned and incurred loss and DCCE for Industry and West Virginia Medical Malpractice from 1999 to 2011.]
I-E: A Cautionary Note

Recent loss ratio experience in West Virginia for Medical Malpractice clearly remains as an improvement over that experienced as recently as 2002. However, as the graph below (comparing West Virginia Loss Ratios with those countrywide) suggests, West Virginia Medical Malpractice loss ratios have not been stable historically. This is likely the result of the limited volume of business written in our State, and the potential for significant variance will likely increase if overall premium volumes continue their decline. Accordingly, rate changes (or stabilization provided by a lack thereof) will likely play an increasingly crucial role for future results.
Section II

A Review of Paid / Closed Claim Data
II: Analysis of Paid Claim Information

Cautionary note: The Board of Medicine information is not insurance data; rather it is information provided to the West Virginia Board of Medicine about Medical Malpractice claims after their disposition, and as such, it has not been audited for accuracy. “Disposition” in this case means claims which have been dismissed, settled, or adjudicated. These data represent indemnity payments only, thus, loss adjustment expense amounts are necessarily excluded. While not strictly matching insurance data, this information is useful in attempting to identifying trends. It should also be noted that the data does not include hospitals or doctors working within corporate structures. Even with nineteen years of data, the number of claims and loss dollars are still small enough to limit the credibility of the information. Additionally note that this information does include BRIM claim payments.

Advisory: The sections below which review both Judgments and Settlements with payment where the data is noted to have been capped at $1,000,000 differs from that included in reports prior to 2007 due to the application of the $1,000,000 cap. Specifically, the 2004 report only considered Judgments and Settlements under $1,000,000 (excluding all those above that amount), the 2005-2006 reports continued to provide the data in this manner, but noted it as having been capped at $1,000,000 (i.e. all individual payment amounts greater than $1M only count only as $1M each) as a smoothing procedure. However, only the 2007 and later reports, including this report, actually apply the noted capping methodologies in order to limit large swings in the data from year to year, yet also fully consider indemnity amounts over $1,000,000 (counted as capped at $1M) in order to attempt to identify any notable trend in payments. This creates some disparity between the figures provided within this report and that of earlier reports.
II-A: How Malpractice Claims are disposed in West Virginia

The exhibit below displays paid claim count information for 1993 – 2011.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Dismissals</th>
<th>% of Total</th>
<th>Number of Judgments</th>
<th>% of Total</th>
<th>Number of Settlements</th>
<th>% of Total</th>
<th>All Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1993</td>
<td>79</td>
<td>28%</td>
<td>8</td>
<td>6%</td>
<td>186</td>
<td>66%</td>
<td>284</td>
</tr>
<tr>
<td>1994</td>
<td>74</td>
<td>23%</td>
<td>10</td>
<td>11%</td>
<td>203</td>
<td>65%</td>
<td>318</td>
</tr>
<tr>
<td>1995</td>
<td>103</td>
<td>31%</td>
<td>14</td>
<td>11%</td>
<td>187</td>
<td>57%</td>
<td>331</td>
</tr>
<tr>
<td>1996</td>
<td>81</td>
<td>27%</td>
<td>5</td>
<td>7%</td>
<td>191</td>
<td>66%</td>
<td>295</td>
</tr>
<tr>
<td>1997</td>
<td>114</td>
<td>27%</td>
<td>9</td>
<td>7%</td>
<td>286</td>
<td>67%</td>
<td>428</td>
</tr>
<tr>
<td>1998</td>
<td>53</td>
<td>22%</td>
<td>9</td>
<td>11%</td>
<td>153</td>
<td>66%</td>
<td>236</td>
</tr>
<tr>
<td>1999</td>
<td>99</td>
<td>30%</td>
<td>15</td>
<td>8%</td>
<td>203</td>
<td>62%</td>
<td>333</td>
</tr>
<tr>
<td>2000</td>
<td>104</td>
<td>30%</td>
<td>7</td>
<td>11%</td>
<td>199</td>
<td>59%</td>
<td>344</td>
</tr>
<tr>
<td>2001</td>
<td>112</td>
<td>30%</td>
<td>9</td>
<td>10%</td>
<td>225</td>
<td>60%</td>
<td>375</td>
</tr>
<tr>
<td>2002</td>
<td>122</td>
<td>39%</td>
<td>7</td>
<td>8%</td>
<td>164</td>
<td>53%</td>
<td>312</td>
</tr>
<tr>
<td>2003</td>
<td>108</td>
<td>42%</td>
<td>4</td>
<td>9%</td>
<td>125</td>
<td>49%</td>
<td>258</td>
</tr>
<tr>
<td>2004</td>
<td>87</td>
<td>39%</td>
<td>6</td>
<td>11%</td>
<td>113</td>
<td>50%</td>
<td>224</td>
</tr>
<tr>
<td>2005</td>
<td>77</td>
<td>44%</td>
<td>5</td>
<td>9%</td>
<td>81</td>
<td>47%</td>
<td>174</td>
</tr>
<tr>
<td>2006</td>
<td>72</td>
<td>35%</td>
<td>3</td>
<td>6%</td>
<td>120</td>
<td>59%</td>
<td>204</td>
</tr>
<tr>
<td>2007</td>
<td>40</td>
<td>24%</td>
<td>1</td>
<td>9%</td>
<td>104</td>
<td>66%</td>
<td>164</td>
</tr>
<tr>
<td>2008</td>
<td>73</td>
<td>37%</td>
<td>8</td>
<td>7%</td>
<td>105</td>
<td>55%</td>
<td>195</td>
</tr>
<tr>
<td>2009</td>
<td>71</td>
<td>41%</td>
<td>5</td>
<td>8%</td>
<td>86</td>
<td>51%</td>
<td>174</td>
</tr>
<tr>
<td>2010</td>
<td>23</td>
<td>12%</td>
<td>1</td>
<td>4%</td>
<td>158</td>
<td>84%</td>
<td>188</td>
</tr>
<tr>
<td>2011</td>
<td>21</td>
<td>11%</td>
<td>3</td>
<td>4%</td>
<td>162</td>
<td>85%</td>
<td>191</td>
</tr>
<tr>
<td>Total</td>
<td>1,513</td>
<td>30%</td>
<td>129</td>
<td>8%</td>
<td>3,051</td>
<td>61%</td>
<td>5,028</td>
</tr>
</tbody>
</table>

- West Virginia now averages 265 malpractice claims per year (down from 269 in 2010, and from a high of 327 in 2001). Over the past nineteen years, 30% of malpractice claims have been dismissed (31 in 2010). In 2001, H.B. 601 was passed. One of its key elements was §55-7B-6, requiring that a “certificate of merit” be obtained prior to the filing of a medical professional liability action against a health care provider. Specifically, “[t]he certificate of merit shall be executed under oath by a health care provider qualified as an expert under the West Virginia rules of evidence and shall state with particularity: (1) the expert’s familiarity with the applicable standard of care in issue; (2) the expert’s qualifications; (3) the expert’s opinion as to how the breach of the applicable standard of care resulted in injury or death.” (Emphasis Added) We believe that this new screening process explains in part the increase in the percentage of dismissals seen beginning in 2002.
In general, the number of claims filed has dropped significantly since the passage of the **2001 legislation**. Specifically, the 2011 claim count was about 51% of the 2001 total.

On average, only about 8% of malpractice claims go to court. Of the claims that do go to court, roughly 77% receive a judgment of $0. In other words, only about 23% of the claims that are adjudicated actually receive a judgment with any payment.

On average, **61% of malpractice claims are settled** without court involvement.

Graphically, note the downward linear trend *(red line)* in the number of paid claims since 1997:

This is consistent with previous reports which have noted a general decline in Medical Malpractice claims countrywide.
II-B: Historical Judgments

Capping large awards at $1,000,000 (as a smoothing procedure) leads to the following:

<table>
<thead>
<tr>
<th>West Virginia Board of Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Judgments</strong> with payments capped at $1,000,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>#</th>
<th>Amount</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>1993</td>
<td>6</td>
<td>$785,547</td>
<td>$130,925</td>
</tr>
<tr>
<td>1994</td>
<td>10</td>
<td>$3,946,419</td>
<td>$394,642</td>
</tr>
<tr>
<td>1995</td>
<td>14</td>
<td>$4,055,745</td>
<td>$289,696</td>
</tr>
<tr>
<td>1996</td>
<td>5</td>
<td>$2,585,837</td>
<td>$517,167</td>
</tr>
<tr>
<td>1997</td>
<td>9</td>
<td>$3,951,907</td>
<td>$439,101</td>
</tr>
<tr>
<td>1998</td>
<td>9</td>
<td>$5,409,154</td>
<td>$601,017</td>
</tr>
<tr>
<td>1999</td>
<td>15</td>
<td>$6,566,669</td>
<td>$437,778</td>
</tr>
<tr>
<td>2000</td>
<td>7</td>
<td>$4,767,554</td>
<td>$681,079</td>
</tr>
<tr>
<td>2001</td>
<td>9</td>
<td>$3,179,290</td>
<td>$353,254</td>
</tr>
<tr>
<td>2002</td>
<td>7</td>
<td>$2,855,223</td>
<td>$407,889</td>
</tr>
<tr>
<td>2003</td>
<td>4</td>
<td>$1,355,000</td>
<td>$338,750</td>
</tr>
<tr>
<td>2004</td>
<td>6</td>
<td>$3,456,244</td>
<td>$576,041</td>
</tr>
<tr>
<td>2005</td>
<td>5</td>
<td>$3,524,909</td>
<td>$704,982</td>
</tr>
<tr>
<td>2006</td>
<td>3</td>
<td>$1,830,989</td>
<td>$610,330</td>
</tr>
<tr>
<td>2007</td>
<td>1</td>
<td>$1,000,000</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>2008</td>
<td>8</td>
<td>$4,325,596</td>
<td>$540,700</td>
</tr>
<tr>
<td>2009</td>
<td>5</td>
<td>$1,475,000</td>
<td>$295,000</td>
</tr>
<tr>
<td>2010</td>
<td>7</td>
<td>$250,000</td>
<td>$35,714</td>
</tr>
<tr>
<td>2011</td>
<td>8</td>
<td>$390,879</td>
<td>$48,860</td>
</tr>
</tbody>
</table>

| 19 Years | 138 | $55,711,962 | $403,709.87 |

- This table shows that even after limiting large awards to reduce volatility, there is no clear pattern of either an increasing number of judgments or a consistent increase in total paid judgments. Rather, the small number of judgments restricts credible inferences.

- A general historical decline in the number of judgments with payment over the period reviewed above can be observed.

- A general historical increase in the average annual amount of judgments with payment until 2007 can also be observed.
Graphical linear representations of the preceding tabled data:
- It should be noted that the number of judgments in each year is very small and that actual paid amounts can vary significantly from year to year. For example, the Average Annual Amount of Judgments with payment graphic above appears to indicate a significant increase in this average for 2007. Yet, note in the tabled data that the number of non-zero judgments for 2007 was only 1.

The next exhibit displays Paid Judgments by size of payment.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>26</td>
<td>24</td>
<td>15</td>
<td>19</td>
<td>18</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$100K</td>
<td>0</td>
<td>7</td>
<td>1</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>5</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Total Judgments</td>
<td>36</td>
<td>38</td>
<td>20</td>
<td>28</td>
<td>27</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>10</td>
<td>14</td>
<td>5</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interval</th>
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<th>2000</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>13</td>
<td>30</td>
<td>28</td>
<td>18</td>
<td>19</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$100K</td>
<td>6</td>
<td>0</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>4</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
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<tr>
<td>$1M&lt;loss</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Total Judgments</td>
<td>28</td>
<td>37</td>
<td>37</td>
<td>25</td>
<td>23</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>15</td>
<td>7</td>
<td>9</td>
<td>7</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interval</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>18</td>
<td>10</td>
<td>9</td>
<td>14</td>
<td>6</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$100K</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Total Judgments</td>
<td>24</td>
<td>15</td>
<td>12</td>
<td>15</td>
<td>14</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>1</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interval</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>9</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$100K</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total Judgments</td>
<td>14</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>5</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

*The second Total excludes claims which resulted in no indemnity payment and caps individual claims greater than $1M at a $1M value.

- Over the last 18 years, there have been a total of 23 judgments in excess of $1,000,000; or an average of 1.28 per year.
II-C: Historical Settlements

In a manner similar to judgments, we now look at settlements.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>5 $0</td>
<td>3 $0</td>
<td>3 $0</td>
<td>3 $0</td>
<td>3 $0</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$50K</td>
<td>78 $1,704,102</td>
<td>79 $1,811,405</td>
<td>75 $1,718,264</td>
<td>177 $1,756,801</td>
<td>67 $1,152,744</td>
</tr>
<tr>
<td>$50K&lt;loss&lt;=$100K</td>
<td>40 $3,199,200</td>
<td>23 $1,892,250</td>
<td>33 $2,642,584</td>
<td>24 $2,040,933</td>
<td>19 $1,612,092</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>38 $6,665,678</td>
<td>44 $8,410,952</td>
<td>37 $6,766,025</td>
<td>33 $5,987,500</td>
<td>28 $4,700,000</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>32 $11,998,951</td>
<td>26 $10,015,000</td>
<td>33 $11,947,319</td>
<td>39 $14,664,111</td>
<td>21 $7,188,000</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>15 $11,694,010</td>
<td>15 $11,940,000</td>
<td>13 $8,560,000</td>
<td>13 $9,425,000</td>
<td>18 $13,660,000</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>5 $9,175,000</td>
<td>3 $7,650,000</td>
<td>3 $4,159,000</td>
<td>3 $6,550,000</td>
<td>3 $5,468,431</td>
</tr>
<tr>
<td>Total Settlements</td>
<td>213 $44,418,941</td>
<td>193 $41,719,607</td>
<td>197 $35,813,192</td>
<td>292 $40,424,345</td>
<td>159 $33,781,267</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>208 $40,243,941</td>
<td>190 $37,069,607</td>
<td>194 $34,654,192</td>
<td>289 $36,874,345</td>
<td>156 $31,312,836</td>
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</tbody>
</table>

<table>
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<th>2001</th>
<th>2002</th>
<th>2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>3 $0</td>
<td>4 $0</td>
<td>1 $0</td>
<td>1 $0</td>
<td>2 $0</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$50K</td>
<td>87 $1,488,737</td>
<td>65 $1,633,255</td>
<td>84 $1,806,781</td>
<td>57 $1,229,665</td>
<td>26 $625,434</td>
</tr>
<tr>
<td>$50K&lt;loss&lt;=$100K</td>
<td>28 $2,278,500</td>
<td>36 $2,892,600</td>
<td>48 $3,850,814</td>
<td>49 $8,500,031</td>
<td>35 $6,725,418</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>34 $5,936,000</td>
<td>45 $8,124,710</td>
<td>48 $8,350,814</td>
<td>15 $1,214,000</td>
<td>15 $1,252,000</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>42 $13,884,542</td>
<td>34 $12,753,796</td>
<td>29 $10,671,417</td>
<td>26 $10,065,000</td>
<td>29 $11,363,125</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>12 $9,615,000</td>
<td>19 $16,152,535</td>
<td>27 $21,817,833</td>
<td>18 $13,255,516</td>
<td>16 $13,878,750</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>3 $10,995,605</td>
<td>4 $5,675,000</td>
<td>1 $1,250,000</td>
<td>0 $0</td>
<td>6 $14,438,368</td>
</tr>
<tr>
<td>Total Settlements</td>
<td>209 $44,198,384</td>
<td>207 $47,231,896</td>
<td>227 $46,831,246</td>
<td>166 $34,264,212</td>
<td>129 $48,283,095</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>206 $36,202,779</td>
<td>203 $47,231,896</td>
<td>226 $46,581,246</td>
<td>165 $34,264,212</td>
<td>127 $39,844,727</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interval</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>0 $0</td>
<td>1 $0</td>
<td>0 $0</td>
<td>0 $0</td>
<td>3 $0</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$50K</td>
<td>40 $861,532</td>
<td>29 $803,164</td>
<td>47 $1,352,631</td>
<td>27 $605,014</td>
<td>36 $982,998</td>
</tr>
<tr>
<td>$50K&lt;loss&lt;=$100K</td>
<td>16 $1,362,500</td>
<td>8 $660,000</td>
<td>19 $1,452,250</td>
<td>11 $705,800</td>
<td>16 $1,261,000</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>21 $4,016,403</td>
<td>19 $3,198,750</td>
<td>26 $4,812,500</td>
<td>29 $4,486,666</td>
<td>27 $4,543,528</td>
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<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>24 $9,529,000</td>
<td>16 $5,752,500</td>
<td>18 $6,393,000</td>
<td>17 $6,062,500</td>
<td>15 $5,127,500</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>5 $3,350,000</td>
<td>8 $5,731,250</td>
<td>7 $5,400,000</td>
<td>13 $9,288,182</td>
<td>12 $9,900,000</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>7 $11,500,000</td>
<td>2 $3,250,000</td>
<td>3 $6,350,000</td>
<td>7 $8,896,822</td>
<td>1 $9,100,000</td>
</tr>
<tr>
<td>Total Settlements</td>
<td>113 $30,819,435</td>
<td>83 $19,395,664</td>
<td>120 $25,760,381</td>
<td>109 $30,044,984</td>
<td>108 $23,715,026</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>113 $26,319,435</td>
<td>82 $18,451,664</td>
<td>122 $24,410,381</td>
<td>104 $28,148,162</td>
<td>105 $22,815,026</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interval</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss=$0</td>
<td>3 $0</td>
<td>0 $0</td>
<td>0 $0</td>
</tr>
<tr>
<td>$0&lt;loss&lt;=$50K</td>
<td>23 $697,523</td>
<td>93 $1,052,198</td>
<td>53 $755,525</td>
</tr>
<tr>
<td>$50K&lt;loss&lt;=$100K</td>
<td>18 $1,397,458</td>
<td>16 $1,261,125</td>
<td>51 $4,148,383</td>
</tr>
<tr>
<td>$100K&lt;loss&lt;=$250K</td>
<td>23 $4,327,625</td>
<td>24 $4,393,999</td>
<td>24 $3,505,165</td>
</tr>
<tr>
<td>$250K&lt;loss&lt;=$500K</td>
<td>16 $5,999,490</td>
<td>14 $4,911,250</td>
<td>14 $4,775,000</td>
</tr>
<tr>
<td>$500K&lt;loss&lt;=$1M</td>
<td>6 $4,900,000</td>
<td>9 $6,875,000</td>
<td>13 $8,432,236</td>
</tr>
<tr>
<td>$1M&lt;loss</td>
<td>0 $0</td>
<td>2 $2,750,000</td>
<td>7 $7,900,000</td>
</tr>
<tr>
<td>Total Settlements</td>
<td>89 $17,322,096</td>
<td>158 $21,243,572</td>
<td>162 $29,516,764</td>
</tr>
<tr>
<td>Total Non-Zero*</td>
<td>86 $17,322,096</td>
<td>158 $20,493,572</td>
<td>162 $28,616,764</td>
</tr>
</tbody>
</table>

*The second Total excludes claims which resulted in no indemnity payment and caps individual claims greater than $1M at a $1M value.

- Settlements comprise the most common resolution for claim payments. Over the last 18 years, 60 settlements have exceeded $1,000,000, or about 3.33 per year on average.
- For this entire period, the average settlement over $1M is $1,798,470. The average for 2006 and all prior years was slightly more than $2,000,000.
As was done for judgments, we will cap claims at $1,000,000 and look for trends:

<table>
<thead>
<tr>
<th>Year</th>
<th>#</th>
<th>Amount</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>1993</td>
<td>180</td>
<td>$29,789,721</td>
<td>$165,498</td>
</tr>
<tr>
<td>1994</td>
<td>208</td>
<td>$40,243,941</td>
<td>$198,246</td>
</tr>
<tr>
<td>1995</td>
<td>190</td>
<td>$37,069,607</td>
<td>$198,233</td>
</tr>
<tr>
<td>1996</td>
<td>194</td>
<td>$34,654,192</td>
<td>$181,436</td>
</tr>
<tr>
<td>1997</td>
<td>289</td>
<td>$36,874,345</td>
<td>$128,931</td>
</tr>
<tr>
<td>1998</td>
<td>156</td>
<td>$31,312,836</td>
<td>$204,659</td>
</tr>
<tr>
<td>1999</td>
<td>206</td>
<td>$36,202,779</td>
<td>$178,339</td>
</tr>
<tr>
<td>2000</td>
<td>203</td>
<td>$47,231,896</td>
<td>$237,346</td>
</tr>
<tr>
<td>2001</td>
<td>226</td>
<td>$46,581,246</td>
<td>$207,028</td>
</tr>
<tr>
<td>2002</td>
<td>165</td>
<td>$34,264,212</td>
<td>$208,928</td>
</tr>
<tr>
<td>2003</td>
<td>127</td>
<td>$39,844,727</td>
<td>$318,758</td>
</tr>
<tr>
<td>2004</td>
<td>113</td>
<td>$26,319,435</td>
<td>$232,915</td>
</tr>
<tr>
<td>2005</td>
<td>52</td>
<td>$18,145,664</td>
<td>$224,021</td>
</tr>
<tr>
<td>2006</td>
<td>120</td>
<td>$22,410,381</td>
<td>$186,753</td>
</tr>
<tr>
<td>2007</td>
<td>104</td>
<td>$28,148,162</td>
<td>$284,325</td>
</tr>
<tr>
<td>2008</td>
<td>105</td>
<td>$22,815,026</td>
<td>$217,286</td>
</tr>
<tr>
<td>2009</td>
<td>86</td>
<td>$17,322,096</td>
<td>$201,420</td>
</tr>
<tr>
<td>2010</td>
<td>158</td>
<td>$20,493,572</td>
<td>$129,706</td>
</tr>
<tr>
<td>2011</td>
<td>162</td>
<td>$28,616,764</td>
<td>$176,647</td>
</tr>
</tbody>
</table>

19 Years 3,044 $598,340,602 $196,564

- From the above data, which limits claims to $1,000,000, a general escalation in the average settlement paid can be observed until 2003. For example, in the years 1993-2001 combined the average paid settlement was $183,564. For 2001-2011 combined, the average paid settlement was $216,762.

- As with judgments, the small number of settlements restricts the credibility of the data. The actual number of settlements occurring since 2001 indicates a general decline in the frequency of paid settlements.
Again, graphical linear representations of the Settlement data:
II-D: Closed Claim (20B-8) Data

In accordance with §33-20B-8, enhanced closed/paid medical malpractice information has been collected from insurers. This information includes the physician’s primary specialty, the ‘cause of loss’, amount paid on defense costs for each filed claim and the split of the indemnity payment between economic and non-economic damages. In review of this data, and examining only physician and surgeon claims, the following general financial overview can be found on an accident year basis.

<table>
<thead>
<tr>
<th>D.O.I.</th>
<th>Claims</th>
<th>Indem Pd</th>
<th>Economic Damages Pd</th>
<th>Non-Econc Damages Pd</th>
<th>Punitive Dam Pd</th>
<th>Non-LAE Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>pre-1996</td>
<td>24</td>
<td>$937,000.00</td>
<td>$195,162.38</td>
<td>$271,500.00</td>
<td>$0.00</td>
<td>$1,403,662.38</td>
</tr>
<tr>
<td>1996</td>
<td>16</td>
<td>$12,130,821.92</td>
<td>$9,047,000.00</td>
<td>$1,678,000.00</td>
<td>$0.00</td>
<td>$22,855,821.92</td>
</tr>
<tr>
<td>1997</td>
<td>30</td>
<td>$1,368,000.00</td>
<td>$50,000.00</td>
<td>$488,000.00</td>
<td>$126,423.00</td>
<td>$2,032,423.00</td>
</tr>
<tr>
<td>1998</td>
<td>27</td>
<td>$956,784.76</td>
<td>$0.00</td>
<td>$475,000.00</td>
<td>$0.00</td>
<td>$1,431,784.76</td>
</tr>
<tr>
<td>1999</td>
<td>46</td>
<td>$17,129,428.75</td>
<td>$10,593,267.00</td>
<td>$562,823.00</td>
<td>$0.00</td>
<td>$28,285,518.75</td>
</tr>
<tr>
<td>2000</td>
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<td>$7,973,147.71</td>
<td>$1,527,241.00</td>
<td>$2,299,901.00</td>
<td>$0.00</td>
<td>$11,800,289.71</td>
</tr>
<tr>
<td>2001</td>
<td>58</td>
<td>$6,489,737.88</td>
<td>$11,448,093.23</td>
<td>$3,586,906.77</td>
<td>$0.00</td>
<td>$21,524,737.88</td>
</tr>
<tr>
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<td>$10,900,580.65</td>
<td>$3,270,368.76</td>
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<td>$0.00</td>
<td>$15,360,745.00</td>
</tr>
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<td>$11,306,279.90</td>
<td>$5,968,738.99</td>
<td>$0.00</td>
<td>$138,209,373.40</td>
</tr>
<tr>
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<td>$13,633,174.58</td>
<td>$8,476,589.67</td>
<td>$4,723,153.60</td>
<td>$42,179.99</td>
<td>$26,875,097.84</td>
</tr>
<tr>
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<td>203</td>
<td>$12,104,813.11</td>
<td>$5,855,166.41</td>
<td>$5,758,726.65</td>
<td>$139,500.00</td>
<td>$24,678,048.67</td>
</tr>
<tr>
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<td>$6,423,389.37</td>
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<td>$0.00</td>
<td>$15,198,495.18</td>
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<tr>
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<td>$4,489,737.88</td>
<td>$11,448,093.23</td>
<td>$3,586,906.77</td>
<td>$0.00</td>
<td>$19,524,737.88</td>
</tr>
<tr>
<td>2008</td>
<td>200</td>
<td>$9,500,000.00</td>
<td>$5,888,098.74</td>
<td>$3,358,906.77</td>
<td>$0.00</td>
<td>$18,324,737.88</td>
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<tr>
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<td>201</td>
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<td>$5,888,098.74</td>
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<td>$0.00</td>
<td>$18,324,737.88</td>
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<tr>
<td>2010</td>
<td>202</td>
<td>$9,500,000.00</td>
<td>$5,888,098.74</td>
<td>$3,358,906.77</td>
<td>$0.00</td>
<td>$18,324,737.88</td>
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<tr>
<td>2011</td>
<td>203</td>
<td>$9,500,000.00</td>
<td>$5,888,098.74</td>
<td>$3,358,906.77</td>
<td>$0.00</td>
<td>$18,324,737.88</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D.O.I.</th>
<th>Non-LAE $0 Pd</th>
<th>Non-LAE Non $0 Avg</th>
<th>LAE Pd</th>
<th>Total Pd</th>
<th>Total Avg</th>
<th>$0 Paid</th>
<th>Non $0 Pd Avg</th>
</tr>
</thead>
<tbody>
<tr>
<td>pre-1996</td>
<td>14</td>
<td>$140,366.24</td>
<td>$2,465,134.41</td>
<td>$3,868,796.79</td>
<td>$161,199.87</td>
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<td>$175,854.40</td>
</tr>
<tr>
<td>1996</td>
<td>9</td>
<td>$3,265,117.42</td>
<td>$1,316,096.88</td>
<td>$2,414,114.30</td>
<td>$1,510,744.93</td>
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<td>$1,510,744.93</td>
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<tr>
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<td>$3,766,064.67</td>
<td>$139,596.42</td>
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<td>$198,002.47</td>
</tr>
<tr>
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<td>$733,217.85</td>
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</tr>
<tr>
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<td>$5,088,984.35</td>
<td>$16,889,274.06</td>
<td>$272,407.65</td>
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<td>$291,194.38</td>
</tr>
<tr>
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<td>$4,899,390.72</td>
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<td>$455,588.42</td>
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</tr>
<tr>
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<td>$451,786.62</td>
<td>$4,950,058.67</td>
<td>$20,310,803.67</td>
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<td>$312,474.30</td>
</tr>
<tr>
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<td>$5,494,351.81</td>
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<td>$1,376,455.18</td>
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<td>$1,529,394.64</td>
</tr>
<tr>
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<td>$395,222.03</td>
<td>$6,709,549.23</td>
<td>$33,598,667.07</td>
<td>$203,543.32</td>
<td>32</td>
<td>$252,516.14</td>
</tr>
<tr>
<td>2005</td>
<td>110</td>
<td>$485,100.31</td>
<td>$6,114,186.91</td>
<td>$40,071,203.67</td>
<td>$222,617.83</td>
<td>36</td>
<td>$278,272.28</td>
</tr>
<tr>
<td>2006</td>
<td>131</td>
<td>$311,684.34</td>
<td>$6,355,322.95</td>
<td>$26,424,128.60</td>
<td>$196,459.46</td>
<td>40</td>
<td>$278,272.28</td>
</tr>
<tr>
<td>2007</td>
<td>100</td>
<td>$1,480,279.70</td>
<td>$25,904,781.46</td>
<td>$95,477,927.19</td>
<td>$649,509.71</td>
<td>36</td>
<td>$860,161.51</td>
</tr>
<tr>
<td>2008</td>
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<td>$84,035.69</td>
<td>$122,088.32</td>
<td>$5,118,088.32</td>
<td>$182,788.87</td>
<td>9</td>
<td>$269,373.07</td>
</tr>
<tr>
<td>2009</td>
<td>20</td>
<td>$50,000.00</td>
<td>$14.26</td>
<td>$50,014.26</td>
<td>$7,144.89</td>
<td>4</td>
<td>$16,714.22</td>
</tr>
<tr>
<td>2010</td>
<td>6</td>
<td>$50,000.00</td>
<td>$14.26</td>
<td>$50,014.26</td>
<td>$7,144.89</td>
<td>4</td>
<td>$16,714.22</td>
</tr>
</tbody>
</table>
Accordingly, from this dataset the accident year claim incidence is as follows:

Note from the table and the preceding paragraph, that this incidence frequency does not exclude zero paid claims and again is comprised of closed claims only. Further, these claims are distributed on an accident year basis and not on a policy year basis.

Removing the zero paid claims results in the following substantially similar distribution (excepting the scale):
Utilizing the data from the table on page 30, we can now review the breakdown of payments between indemnity, economic damages, non-economic damages, punitive damages, and loss adjustment expenses over time, again on an accident year basis.
Then from the entire dataset, you can determine how each of the damage types and loss adjustment expenses are related.

As you may determine, actual punitive damages are shown to constitute a very small portion of total damages, but non-economic damages are shown to be somewhat substantial.
Now we will look at the averages.
The pre-1996-2003 average non-zero non-LAE payment is about $908K, and the 2004-2011 average non-zero non-LAE payment is about $466K. Similarly, the pre-1996-2003 average non-zero total payment was about $608K and the 2004-2011 average non-zero total payment was about $267K. Being that these data are on an accident year basis, and that medical malpractice is a relatively long tail line of insurance, it may be likely that the experience of later years will be subject to further adverse development. However, both of these measures indicate a general improvement in the line over time in West Virginia.

Similar to the Board of Medicine (BOM) data, we can also consider claim outcomes for those claims under which an outcome was listed.

<table>
<thead>
<tr>
<th>Closed year</th>
<th>Judgment</th>
<th>Settlement</th>
<th>Dismissal</th>
</tr>
</thead>
<tbody>
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<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2002</td>
<td>0</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2003</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2004</td>
<td>0</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>2005</td>
<td>1</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>2006</td>
<td>10</td>
<td>72</td>
<td>91</td>
</tr>
<tr>
<td>2007</td>
<td>19</td>
<td>116</td>
<td>117</td>
</tr>
<tr>
<td>2008</td>
<td>13</td>
<td>128</td>
<td>132</td>
</tr>
<tr>
<td>2009</td>
<td>13</td>
<td>99</td>
<td>140</td>
</tr>
<tr>
<td>2010</td>
<td>11</td>
<td>149</td>
<td>94</td>
</tr>
<tr>
<td>2011</td>
<td>7</td>
<td>157</td>
<td>124</td>
</tr>
<tr>
<td>2012 *</td>
<td>1</td>
<td>8</td>
<td>15</td>
</tr>
</tbody>
</table>

*Through August
Again we find that most claims are settled (48% vs. BOM 61% since 1993), dismissals constitute 47% (vs. BOM 30% since 1993) and that very few claims receive a judgment 5% (vs. BOM 8% since 1993.) These findings appear to be fairly consistent.

We may also consider costs based upon the outcome type. Specifically:

<table>
<thead>
<tr>
<th></th>
<th>Total Non LAE Pd</th>
<th>LAE PAID</th>
<th>Count</th>
<th>Avg Non LAE</th>
<th>Avg LAE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judgments</td>
<td>$444,082,101.38</td>
<td>$136,555,898.02</td>
<td>75</td>
<td>$5,921,094.69</td>
<td>$1,820,745.31</td>
</tr>
<tr>
<td>Settlements</td>
<td>$423,344,431.23</td>
<td>$107,206,939.04</td>
<td>734</td>
<td>$576,763.53</td>
<td>$146,058.50</td>
</tr>
<tr>
<td>Dismissals</td>
<td>$874,298.36</td>
<td>$15,943,543.15</td>
<td>721</td>
<td>$1,212.62</td>
<td>$22,113.10</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$0 Non LAE</th>
<th>$0 LAE</th>
<th>Avg Non $0 Non LAE</th>
<th>Avg Non $0 LAE</th>
<th>Total Non $0 Avg Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judgments</td>
<td>54</td>
<td>3</td>
<td>$21,146,766.73</td>
<td>$1,896,609.69</td>
<td>$23,043,376.43</td>
</tr>
<tr>
<td>Settlements</td>
<td>25</td>
<td>107</td>
<td>$597,100.75</td>
<td>$170,983.95</td>
<td>$768,084.70</td>
</tr>
<tr>
<td>Dismissals</td>
<td>717</td>
<td>203</td>
<td>$218,574.59</td>
<td>$30,779.04</td>
<td>$249,353.63</td>
</tr>
</tbody>
</table>

Not surprisingly, judgments are most expensive in terms of payouts, followed by settlements and dismissals.

We can also segregate the data between closures involving (or not involving) mediation. Accordingly, the data indicating mediation involvement provides:

<table>
<thead>
<tr>
<th></th>
<th>Total Non LAE Pd</th>
<th>LAE PAID</th>
<th>Count</th>
<th>Avg Non LAE</th>
<th>Avg LAE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judgments</td>
<td>$10,317,768.36</td>
<td>$5,320,911.87</td>
<td>28</td>
<td>$368,491.73</td>
<td>$190,032.57</td>
</tr>
<tr>
<td>Settlements</td>
<td>$222,499,593.81</td>
<td>$30,211,646.60</td>
<td>498</td>
<td>$446,786.33</td>
<td>$60,665.96</td>
</tr>
<tr>
<td>Dismissals</td>
<td>$764,298.36</td>
<td>$5,437,991.75</td>
<td>77</td>
<td>$9,925.95</td>
<td>$70,623.27</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$0 Non LAE</th>
<th>$0 LAE</th>
<th>Avg Non $0 Non LAE</th>
<th>Avg Non $0 LAE</th>
<th>Total Non $0 Avg Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judgments</td>
<td>17</td>
<td>1</td>
<td>$937,978.94</td>
<td>$197,070.81</td>
<td>$1,135,049.75</td>
</tr>
<tr>
<td>Settlements</td>
<td>9</td>
<td>12</td>
<td>$455,009.39</td>
<td>$62,163.88</td>
<td>$517,173.28</td>
</tr>
<tr>
<td>Dismissals</td>
<td>74</td>
<td>7</td>
<td>$254,766.12</td>
<td>$77,685.60</td>
<td>$332,451.72</td>
</tr>
</tbody>
</table>

Whereas costs are shown to be greater in the absence of mediation:

<table>
<thead>
<tr>
<th></th>
<th>Total Non LAE Pd</th>
<th>LAE PAID</th>
<th>Count</th>
<th>Avg Non LAE</th>
<th>Avg LAE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judgments</td>
<td>$7,842,868.02</td>
<td>$5,278,031.06</td>
<td>37</td>
<td>$211,969.41</td>
<td>$142,649.49</td>
</tr>
<tr>
<td>Settlements</td>
<td>$186,511,128.62</td>
<td>$75,465,473.41</td>
<td>181</td>
<td>$1,030,449.10</td>
<td>$416,936.32</td>
</tr>
<tr>
<td>Dismissals</td>
<td>$110,000.00</td>
<td>$8,211,180.71</td>
<td>538</td>
<td>$204.46</td>
<td>$15,262.42</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>$0 Non LAE</th>
<th>$0 LAE</th>
<th>Avg Non $0 Non LAE</th>
<th>Avg Non $0 LAE</th>
<th>Total Non $0 Avg Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judgments</td>
<td>29</td>
<td>2</td>
<td>$980,358.50</td>
<td>$150,800.89</td>
<td>$1,131,159.39</td>
</tr>
<tr>
<td>Settlements</td>
<td>9</td>
<td>75</td>
<td>$1,084,367.94</td>
<td>$711,938.43</td>
<td>$1,796,306.37</td>
</tr>
<tr>
<td>Dismissals</td>
<td>540</td>
<td>158</td>
<td>$(55,000.00)</td>
<td>$21,608.37</td>
<td>$(33,391.63)</td>
</tr>
</tbody>
</table>
Being that the specialty class code of the physician or surgeon was also included in the claims database, we can again test the rating assumption that physician rates should be lower than surgeon rates solely due to risk. (This particular test was introduced for the first time in the 2010 report). As per the demonstrated differences in rates from rating examples of Exhibit VII, we can segregate physician class claims from surgeon class claims to in order to provide a general litmus test as to whether or not, on average, physicians represent a lesser exposure than do surgeons.

Accordingly for physician classes and similar:

<table>
<thead>
<tr>
<th>Claims</th>
<th>Class Code</th>
<th>Physician Class Description</th>
<th>Total Claim Payments</th>
<th>Zero Pds</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>80254</td>
<td>Allergy-Immunology</td>
<td>$0.00</td>
<td>1</td>
</tr>
<tr>
<td>14</td>
<td>80255</td>
<td>Cardiovascular Dis/No Surg</td>
<td>$1,118,398.10</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>80256</td>
<td>Dermatology-No Surgery</td>
<td>$145,500.08</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>80238</td>
<td>Endocrinology-No Surgery</td>
<td>$1,725,550.63</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>80241</td>
<td>Gastroenterology/No Surgery</td>
<td>$892,144.34</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>80420</td>
<td>General Practicioners-No Surgery</td>
<td>$108,997.48</td>
<td>2</td>
</tr>
<tr>
<td>1</td>
<td>84420</td>
<td>General Practicioners-No Surgery (D.O.)</td>
<td>$1,503.64</td>
<td>0</td>
</tr>
<tr>
<td>12</td>
<td>80231</td>
<td>General Preventative Medicine</td>
<td>$3,128,565.73</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>80278</td>
<td>Hematology-Minor Surgery</td>
<td>$759,199.80</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>80245</td>
<td>Hematology-No Surgery</td>
<td>$1,063,247.47</td>
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<tr>
<td>6</td>
<td>80246</td>
<td>Infectious Diseases-No Surgery</td>
<td>$44,041.00</td>
<td>2</td>
</tr>
<tr>
<td>105</td>
<td>80257</td>
<td>Internal Medicine/No Surgery</td>
<td>$13,360,450.04</td>
<td>24</td>
</tr>
<tr>
<td>1</td>
<td>80259</td>
<td>Neoplastic Diseases-No Surgery</td>
<td>$0.00</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>80260</td>
<td>Nephrology</td>
<td>$1,684,611.95</td>
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</tr>
<tr>
<td>4</td>
<td>80262</td>
<td>Nuclear Medicine</td>
<td>$908,289.47</td>
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</tr>
<tr>
<td>2</td>
<td>80233</td>
<td>Occupational Medicine</td>
<td>$65,936.52</td>
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</tr>
<tr>
<td>1</td>
<td>80114</td>
<td>Pharmacology - Clinical</td>
<td>$143,031.61</td>
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<td>2</td>
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<td>Otolaryngology-Minor Surgery</td>
<td>$111,922.00</td>
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<tr>
<td>1</td>
<td>80264</td>
<td>Otolaryngology-No Surgery</td>
<td>$0.00</td>
<td>1</td>
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<tr>
<td>51</td>
<td>80265</td>
<td>Otorhinolaryngology/No Surgery</td>
<td>$8,890,106.41</td>
<td>4</td>
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<tr>
<td>8</td>
<td>80266</td>
<td>Pathology</td>
<td>$2,263,066.03</td>
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<tr>
<td>32</td>
<td>80267</td>
<td>Pediatrics-No Surgery</td>
<td>$11,367,982.66</td>
<td>6</td>
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<tr>
<td>1</td>
<td>80234</td>
<td>Pharmacology - Clinical</td>
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<tr>
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<td>80235</td>
<td>Physical Medicine &amp; Rehabilitation</td>
<td>$1,189,003.59</td>
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<tr>
<td>79</td>
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<td>Physiotherapists</td>
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<td>14</td>
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<td>Psychiatry</td>
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<td>3</td>
<td>80236</td>
<td>Public Health</td>
<td>$5,133.00</td>
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</tr>
<tr>
<td>18</td>
<td>80269</td>
<td>Pulmonary Diseases-No Surgery</td>
<td>$4,681,408.49</td>
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<tr>
<td>44</td>
<td>80253</td>
<td>Radiology-Diagnostic-No Surgery</td>
<td>$5,143,221.63</td>
<td>8</td>
</tr>
<tr>
<td>3</td>
<td>80252</td>
<td>Rheumatology-No Surgery</td>
<td>$489,694.83</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>80322</td>
<td>Teaching Physicians-Minor Surgery</td>
<td>$25,000.00</td>
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</tr>
<tr>
<td>2</td>
<td>80321</td>
<td>Teaching Physicians-No Surgery</td>
<td>$37,850.00</td>
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</tr>
</tbody>
</table>

**Claims per class code**: 13.55

**Average cost per claim**: $165,525.52

447

73,989,905.86
Secondly, for surgeon classes and surgery operations:

<table>
<thead>
<tr>
<th>Claims</th>
<th>Class Code</th>
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<th>Zero Pds</th>
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<td>Abdominal Surgery</td>
<td>$1,986,784.13</td>
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<tr>
<td>36</td>
<td>80151</td>
<td>Anesthesiology</td>
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<tr>
<td>1</td>
<td>80101</td>
<td>Broncho-Esophagology</td>
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<tr>
<td>16</td>
<td>80141</td>
<td>Cardiac Surgery</td>
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<tr>
<td>25</td>
<td>80281</td>
<td>Cardiovascular Disease-Minor Surgery</td>
<td>$9,228,052.66</td>
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<td>80150</td>
<td>Cardiovascular Surgery</td>
<td>$2,700,196.14</td>
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</tr>
<tr>
<td>9</td>
<td>80115</td>
<td>Colon &amp; Rectal Surgery</td>
<td>$1,691,128.14</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>80282</td>
<td>Dermatology-Minor Surgery</td>
<td>$570,562.87</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>80157</td>
<td>Emergency Med/Incl Surgery</td>
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<tr>
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<td>80102</td>
<td>Emergency Medicine-No Surgery</td>
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<tr>
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<td>80104</td>
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<tr>
<td>22</td>
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<td>General Practice-Major Surgery</td>
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</tr>
<tr>
<td>61</td>
<td>80421</td>
<td>General Practitioners/Minor Surg</td>
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<tr>
<td>106</td>
<td>80143</td>
<td>General Surgery</td>
<td>$25,578,891.37</td>
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</tr>
<tr>
<td>5</td>
<td>80276</td>
<td>Geriatrics-Minor Surgery</td>
<td>$250,132.76</td>
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</tr>
<tr>
<td>13</td>
<td>80167</td>
<td>Gynecology/Major Surgery</td>
<td>$2,949,867.70</td>
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<tr>
<td>9</td>
<td>80277</td>
<td>Gynecology/Minor Surgery</td>
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</tr>
<tr>
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<td>80284</td>
<td>Internal Medicine/Minor Surgery</td>
<td>$3,593,378.66</td>
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<td>80108</td>
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<tr>
<td>1</td>
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<td>1</td>
</tr>
<tr>
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<td>80152</td>
<td>Neurology/incl Child-Major Surgery</td>
<td>$11,084,147.83</td>
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<tr>
<td>122</td>
<td>80153</td>
<td>OBGYN-Major Surgery</td>
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<tr>
<td>5</td>
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<td>Obstetrics-Major Surgery</td>
<td>$2,066,564.75</td>
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<tr>
<td>85</td>
<td>80154</td>
<td>Orthopedic Surgery/Incl Spine</td>
<td>$20,945,295.28</td>
<td>11</td>
</tr>
<tr>
<td>7</td>
<td>80291</td>
<td>Otorhinolaryngology/Minor Surgery</td>
<td>$571,353.77</td>
<td>1</td>
</tr>
<tr>
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<td>80155</td>
<td>Otorhinolaryngology-Incl Plastic Surgery</td>
<td>$447,878.00</td>
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<td>80159</td>
<td>Otorhinolaryngology-Major Surgery</td>
<td>$4,171,239.09</td>
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<td>$1,823,280.51</td>
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<tr>
<td>102</td>
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<td>$3,961,637.30</td>
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</tr>
<tr>
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<td>80443</td>
<td>Physician/No Major Surgery/Incl Colon</td>
<td>$0.00</td>
<td>1</td>
</tr>
<tr>
<td>33</td>
<td>80156</td>
<td>Plastic Surgery</td>
<td>$1,706,852.96</td>
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</tr>
<tr>
<td>29</td>
<td>80280</td>
<td>Radiology-Diagnostic-Minor Surgery</td>
<td>$6,036,666.31</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>80324</td>
<td>Teaching Physicians-Major Surgery</td>
<td>$1,723,253.10</td>
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</tr>
<tr>
<td>9</td>
<td>80144</td>
<td>Thoracic Surgery</td>
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<td>2</td>
</tr>
<tr>
<td>4</td>
<td>80171</td>
<td>Traumatic Surgery</td>
<td>$1,872,096.00</td>
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</tr>
<tr>
<td>51</td>
<td>80145</td>
<td>Urological -Surgery</td>
<td>$9,260,522.03</td>
<td>4</td>
</tr>
<tr>
<td>8</td>
<td>80146</td>
<td>Vascular Surgery</td>
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</tr>
<tr>
<td>946</td>
<td></td>
<td></td>
<td>210,988,316.31</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Claims per class code</th>
<th>24.26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average cost per claim</td>
<td>$223,032.05</td>
</tr>
</tbody>
</table>

Accordingly, it can be shown that the rating differences between physician class exposures and surgeon class exposures is meritorious.
II-E: Paid Data Collection

As a further source of information, examining financial statement information provided by insurance companies provides some insight as to the total number of active paid and reserved claims by year. However, these counts do not tie the claims which are either paid or reserved in the reporting year to the year in which the claim initially occurred. For example, a claim payment by an insurer during 2006 may have been for a claim that was filed during 2006 or it may have just as easily been for a claim that was filed in any year prior to 2006.

In looking at the paid and open claim information provided by insurers since 2000 who write Malpractice insurance in West Virginia for Physicians and Surgeons, the following aggregated data is found.

<table>
<thead>
<tr>
<th>Year</th>
<th># of Paid Claims</th>
<th># of Unpaid Claims</th>
<th>Total Claims</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>127</td>
<td>2,297</td>
<td>2,424</td>
</tr>
<tr>
<td>2001</td>
<td>244</td>
<td>848</td>
<td>1,092</td>
</tr>
<tr>
<td>2002</td>
<td>177</td>
<td>758</td>
<td>935</td>
</tr>
<tr>
<td>2003</td>
<td>142</td>
<td>611</td>
<td>753</td>
</tr>
<tr>
<td>2004</td>
<td>194</td>
<td>578</td>
<td>772</td>
</tr>
<tr>
<td>2005</td>
<td>229</td>
<td>455</td>
<td>684</td>
</tr>
<tr>
<td>2006</td>
<td>157</td>
<td>375</td>
<td>532</td>
</tr>
<tr>
<td>2007</td>
<td>128</td>
<td>350</td>
<td>478</td>
</tr>
<tr>
<td>2008</td>
<td>133</td>
<td>416</td>
<td>549</td>
</tr>
<tr>
<td>2009</td>
<td>184</td>
<td>434</td>
<td>618</td>
</tr>
<tr>
<td>2010</td>
<td>159</td>
<td>473</td>
<td>632</td>
</tr>
<tr>
<td>2011</td>
<td>205</td>
<td>297</td>
<td>502</td>
</tr>
</tbody>
</table>

Again, graphical linear representations make the data a little easier to interpret:

The claims paid data shows little in the way of any historical pattern.
Looking at only the reserved (*unpaid*) claims by year since 2000 does reveal a general decline with the year 2000 appearing to be somewhat of an anomaly. Eliminating that outlier and rescaling demonstrates a continued favorable trend in the number of open claims by year for the Physicians and Surgeons line in West Virginia.
Section III

Review of 5% Market Share Companies
III Review of major West Virginia Medical Malpractice Writers

This section of the report reviews the medical malpractice rates and rules of those insurers with 5% or greater market share. Based on admitted Company written premiums for 2011, the West Virginia medical malpractice market currently looks like this:
In the table below, only 2 insurers are shown to have met the statutory 5% reporting requirement threshold for 2011 in the physicians and surgeons market; *West Virginia Mutual Insurance Company* and *Medicus Insurance Company*. The majority of premium written by *National Union Fire Insurance Company of Pittsburgh* is from their nurses program, and for *Mountaineer Freedom, RRG, Inc.* their premium arises out of a Hospital program. *(See also page 46).*

<table>
<thead>
<tr>
<th>Total Medical Malpractice</th>
<th>2011 West Virginia Licensed Companies</th>
</tr>
</thead>
<tbody>
<tr>
<td>(NAIC Database) Company</td>
<td>Direct Premiums Written</td>
</tr>
<tr>
<td>West Virginia Mut Ins Co</td>
<td>32,677,159</td>
</tr>
<tr>
<td>National Union Fire Ins Co Pitts</td>
<td>7,242,795</td>
</tr>
<tr>
<td>Mountaineer Freedom RRG Inc</td>
<td>6,080,042</td>
</tr>
<tr>
<td>Medicus Ins Co</td>
<td>5,984,271</td>
</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>1,311,122</td>
</tr>
<tr>
<td>American Cas Co Of Reading</td>
<td>943,168</td>
</tr>
<tr>
<td>Continental Cas Co</td>
<td>819,047</td>
</tr>
<tr>
<td>Doctors Co An Interins Exch</td>
<td>676,728</td>
</tr>
<tr>
<td>Medical Protective Co</td>
<td>566,516</td>
</tr>
<tr>
<td>Podiatry Ins Co Of Amer</td>
<td>538,805</td>
</tr>
<tr>
<td>Cincinnati Ins Co</td>
<td>362,337</td>
</tr>
<tr>
<td>Other (43) Companies</td>
<td>1,198,327</td>
</tr>
<tr>
<td>Total</td>
<td>$58,400,317</td>
</tr>
</tbody>
</table>

However, by looking at the entire market, which includes the Excess & Surplus writers *(i.e. non-admitted insurers including Risk Retention Groups [RRG’s])*), the following information is found:

<table>
<thead>
<tr>
<th>Total Medical Malpractice</th>
<th>2011 West Virginia Business Written</th>
</tr>
</thead>
<tbody>
<tr>
<td>(NAIC Database) Company</td>
<td>Direct Premiums Written</td>
</tr>
<tr>
<td>West Virginia Mut Ins Co</td>
<td>32,677,159</td>
</tr>
<tr>
<td>National Union Fire Ins Co Pitts</td>
<td>7,242,795</td>
</tr>
<tr>
<td>Mountaineer Freedom RRG Inc</td>
<td>6,080,042</td>
</tr>
<tr>
<td>Medicus Ins Co</td>
<td>5,984,271</td>
</tr>
<tr>
<td>Community Hospital RRG</td>
<td>4,819,885</td>
</tr>
<tr>
<td>Darwin Select Ins Co</td>
<td>1,606,156</td>
</tr>
<tr>
<td>Nautilus Ins Co</td>
<td>1,463,452</td>
</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>1,311,122</td>
</tr>
<tr>
<td>Health Care Ind. Liab Recip Ins</td>
<td>1,118,696</td>
</tr>
<tr>
<td>Lexington Ins Co</td>
<td>1,116,103</td>
</tr>
<tr>
<td>Liberty Surplus Ins Corp</td>
<td>1,115,133</td>
</tr>
<tr>
<td>American Cas Co Of Reading</td>
<td>943,168</td>
</tr>
<tr>
<td>Other (96) Companies</td>
<td>14,433,800</td>
</tr>
<tr>
<td>Total</td>
<td>$79,911,782</td>
</tr>
</tbody>
</table>

*Direct Loss Ratio does not include LAE or other expenses*
As you can see, the Excess & Surplus lines writers (*italicized above*) have a significant amount of penetration into our Malpractice market. However, considering historical premium volumes it can be found that this penetration has actually declined over recent years:

On a business written basis (*which includes E&S Companies and RRG’s*), the 12-year average market share for the top 10 writers (*by premium volume*) captures about 86% of the entire market. Taking this same metric for the most recent three years only captures just 80.5% of the entire market.
Below is a breakdown, by sub-line, for some of the key Malpractice writers in West Virginia including those writing on an Excess and Surplus basis:

<table>
<thead>
<tr>
<th>Company</th>
<th>Subline</th>
<th>2011 Written Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Virginia Mut Ins Co</td>
<td>Physicians &amp; Surgeons</td>
<td>$32,677,159</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$32,677,159</strong></td>
</tr>
<tr>
<td>Everest Ind Ins Co</td>
<td>Physicians &amp; Surgeons</td>
<td>$17,279,983</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>($14,165,279)</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>($3,114,704)</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$0</strong></td>
</tr>
<tr>
<td>National Union Fire Ins Co Of Pitts</td>
<td>Physicians &amp; Surgeons</td>
<td>$398,736</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$6,844,059</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$7,242,795</strong></td>
</tr>
<tr>
<td>Mountaineer Freedom RRG Inc</td>
<td>Physicians &amp; Surgeons</td>
<td>$25,190</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$6,054,852</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$6,080,042</strong></td>
</tr>
<tr>
<td>Medicus Ins Co</td>
<td>Physicians &amp; Surgeons</td>
<td>$5,984,271</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$5,984,271</strong></td>
</tr>
<tr>
<td>Community Hospital RRG</td>
<td>Physicians &amp; Surgeons</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$4,819,885</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$4,819,885</strong></td>
</tr>
<tr>
<td>Nautilus Ins Co</td>
<td>Physicians &amp; Surgeons</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$1,387,979</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$75,473</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$1,463,452</strong></td>
</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>Physicians &amp; Surgeons</td>
<td>$1,300,538</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$10,584</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$1,311,122</strong></td>
</tr>
<tr>
<td>Darwin Select Ins Co</td>
<td>Physicians &amp; Surgeons</td>
<td>$166,813</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$1,194,331</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$245,012</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$1,606,156</strong></td>
</tr>
<tr>
<td>Liberty Surplus Ins Corp</td>
<td>Physicians &amp; Surgeons</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Hospitals</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>$1,115,133</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$1,115,133</strong></td>
</tr>
</tbody>
</table>
III-A: Enabling Legislation

The reporting of experience for insurance carriers with 5% or more of the West Virginia Medical Malpractice direct written premium is required by:

- West Virginia Regulation §114CSR22
- West Virginia Regulation §114CSR23
- West Virginia Code §33-20B-6

The regulations and referenced statutes set forth the form in which certain information needs to be reported to the Commissioner. This section of the report is provided to assist the Commissioner in fulfilling obligations under the above regulations and code section and enhance our knowledgebase.

Pursuant to West Virginia Regulation §114CSR23-6, the Commissioner is required to “…evaluate the information reported pursuant to Section 5 of the rule in order to determine whether the filing insurers have fairly and accurately determined the loss experience and loss expense data in the filing.”

Per West Virginia Code §33-20B-6(a), the Commissioner is required to “…review annually the rules, rates and rating plans filed and in effect for each insurer providing five percent or more of the malpractice insurance coverage in this state in the proceeding calendar year to determine whether such filings continue to meet the requirements of this article and whether such filings are unfair or inappropriate given the loss experience in this state in the preceding year.”

In 1986, the legislature passed §33-20B-7 which required a study of the feasibility and desirability of creating a joint underwriting association or alternative pooling agreement to facilitate the issuance and underwriting of malpractice policies in West Virginia. As nothing in Chapter 33 (Insurance) of the Code of West Virginia would expressly prohibit the forming of any such JUA, it can only be assumed that desirability for the same has historically been absent and remains so to this day as no JUA has ever been formed in West Virginia for the purposes of issuing or underwriting policies of medical malpractice insurance.
West Virginia Mutual Insurance Company (WVMIC)

Since its inception in July 1, 2004, WVMIC has dominated the Physicians & Surgeons market in West Virginia. During the height of the most recent Medical Malpractice “hard market” in West Virginia, a very large number of West Virginia Physicians and Surgeons that were unable to procure coverage via the admitted market were ultimately insured by the State of West Virginia itself utilizing our Board of Risk and Insurance Management (BRIM—generally the insurer of State owned property and liability exposures).

As a long term solution to the availability of coverage for Physicians and Surgeons in West Virginia, §33-20F established WVMIC and all policies previously insured in the BRIM II program novated to the new Company upon inception. WVMIC has since added new business and has worked with the Offices of the West Virginia Insurance Commissioner to accommodate difficult situations while maintaining underwriting standards. The rate history of WVMIC since inception follows:

<table>
<thead>
<tr>
<th>2011 Market Share</th>
<th>Company</th>
<th>Eff date</th>
<th>% Req’d</th>
<th>Grnt’d</th>
<th>WV #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>55.95%</td>
<td>West Virginia Mutual Ins Co</td>
<td>1/1/2013</td>
<td>0%</td>
<td>0%</td>
<td>100016727</td>
</tr>
<tr>
<td></td>
<td>*fka W.V. Physicians Mutual Ins. Co.</td>
<td>1/1/2012</td>
<td>-5%</td>
<td>-5%</td>
<td>100011255</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2011</td>
<td>0%</td>
<td>0%</td>
<td>100006008</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2010</td>
<td>0%</td>
<td>0%</td>
<td>90918009</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2009</td>
<td>0%</td>
<td>0%</td>
<td>80903007</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3/1/2008</td>
<td>-0.01%</td>
<td>-0.01%</td>
<td>80129001</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2008</td>
<td>0%</td>
<td>0%</td>
<td>70918006</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2007</td>
<td>-15.00%</td>
<td>-15.00%</td>
<td>60915016</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2006</td>
<td>-5.00%</td>
<td>-5.00%</td>
<td>50826007</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/1/2005</td>
<td>10.20%</td>
<td>10.20%</td>
<td>41006013</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7/1/2004</td>
<td>init filing</td>
<td>init filing</td>
<td>40331017</td>
</tr>
</tbody>
</table>
The company’s results continue to be favorable and subsequent changes made to their rating plan establish their current rates below those that were utilized upon inception, as per the graph above. 

**WVMIC** writes only Physicians and Surgeons coverage and historically had only written within West Virginia. However, having fully repaid their original surplus note ($26.1M start-up loan) back to the State of West Virginia before the end of 2008, they have begun to explore opportunities for expansion into neighboring states. Notably, their medical malpractice market share (on an admitted basis) has declined from an all-time high of 83.69% as of 2008, down to 55.95% as of 2011.

**Medicus Insurance Company**

Domiciled in Texas and initially incorporated in 2006, **Medicus** provides medical malpractice insurance to physicians, surgeons and related medical service providers. They received their initial Certificate of Authority to write casualty insurance in West Virginia in December 2007 and had gained approval of their first Physicians and Surgeons rate, rule and form filing by March 2008. They are currently licensed, admitted, and writing in 24 states including West Virginia. Notably, they became 2nd in overall admitted West Virginia market share by the end of 2009 with 9.17% of the market, and held 10.25% of the market as of 2011.

The rate history of **Medicus** follows, and likewise includes a graph of their current rates relative to inception:

<table>
<thead>
<tr>
<th>2011 Market Share</th>
<th>Company</th>
<th>Eff date</th>
<th>% Req’d</th>
<th>% Granted</th>
<th>WV #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.25%</td>
<td><strong>Medicus Insurance Company</strong></td>
<td>10/10/2012</td>
<td>0%</td>
<td>0%</td>
<td>100015802</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10/27/2011</td>
<td>0%</td>
<td>0%</td>
<td>100010073</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9/24/2010</td>
<td>0%</td>
<td>0%</td>
<td>100004152</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10/1/2009</td>
<td>-1.20%</td>
<td>-1.20%</td>
<td>90630015</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3/20/2008</td>
<td>init filing</td>
<td>init filing</td>
<td>80212014</td>
</tr>
</tbody>
</table>
National Union Fire Insurance Company of Pittsburgh, PA

Domiciled in Pennsylvania, National Union Fire is a licensed and admitted insurer in West Virginia, and is a Chartis (AIG) subsidiary. They are a writer of both personal and commercial insurance, and have a well-established nurse’s malpractice program in the state. During 2011, they wrote $7,242,795 in malpractice premiums in West Virginia, with the majority of that premium ($6,718,299) listed as premium for “Other (Medical) Facilities”. During 2010 however, they only issued $557,061 in malpractice premiums in West Virginia, and had posted similar amounts in most prior years. As this report is primarily concerned with physicians and surgeons programs, National Union Fire was not called upon to participate in this report.

Mountaineer Freedom RRG, Inc.

Mountaineer Freedom is a West Virginia domiciled risk retention group which was newly incorporated during 2006. This RRG was formed in order to provide professional and general liability coverage to Wheeling Hospital and its affiliated staff (which had previously been self-insured.) As Mountaineer Freedom is not an admitted insurer, they did not provide information for this report.

ProAssurance Indemnity Co., Inc.

ProAssurance Indemnity Co., Inc. (formerly Medical Assurance of West Virginia until 2005, and becoming Woodbrook Casualty Insurance Company until 2008) was the leading commercial writer of malpractice insurance for Physicians and Surgeons in West Virginia in the years 2000 and 2003, and was 2nd in West Virginia admitted market share from 2001-2002 and from 2004 to 2008.
ProAssurance’s in-force policy exposure in West Virginia has substantially declined since its peak which occurred during 1998. Beginning with a high of 856 policies, it had dropped to 417 by 2001, 133 by 2004, and stood at only 29 as of their latest rate filing. The rate history of ProAssurance since the year 2000 follows:

<table>
<thead>
<tr>
<th>2011 Market Share</th>
<th>Company</th>
<th>Eff date</th>
<th>% Req’d</th>
<th>% Granted</th>
<th>WV #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.25%</td>
<td>ProAssurance Indemnity Co., Inc.</td>
<td>9/18/2012</td>
<td>2.6%</td>
<td>2.6%</td>
<td>100015776</td>
</tr>
<tr>
<td></td>
<td>*fka Woodbrook Casualty Ins, Inc</td>
<td>4/1/2011</td>
<td>-9.9%</td>
<td>-9.9%</td>
<td>100007562</td>
</tr>
<tr>
<td></td>
<td>*fka Medical Assur. of WV</td>
<td>2/23/2010</td>
<td>0.4%</td>
<td>0.4%</td>
<td>10000816</td>
</tr>
<tr>
<td></td>
<td>12/15/2008</td>
<td>0%</td>
<td>0%</td>
<td>81106028</td>
<td></td>
</tr>
<tr>
<td></td>
<td>11/1/2008</td>
<td>-8.30%</td>
<td>-8.30%</td>
<td>80827030</td>
<td></td>
</tr>
<tr>
<td></td>
<td>11/1/2007</td>
<td>-10.70%</td>
<td>-10.70%</td>
<td>70810017</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10/20/2006</td>
<td>-2.80%</td>
<td>-2.80%</td>
<td>60711005</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10/20/2005</td>
<td>-1.10%</td>
<td>-1.10%</td>
<td>50718024</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10/20/2004</td>
<td>18.50%</td>
<td>14.50%</td>
<td>40721020</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10/3/2003</td>
<td>17.30%</td>
<td>13.00%</td>
<td>30623002</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7/1/2002</td>
<td>23.00%</td>
<td>16.00%</td>
<td>161405</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9/14/2001</td>
<td>30.00%</td>
<td>18.00%</td>
<td>155255</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8/1/2000</td>
<td>35.00%</td>
<td>35.00%</td>
<td>50507</td>
<td></td>
</tr>
</tbody>
</table>

Improved experience has resulted in overall rate level decreases for ProAssurance generally since 2004. The net effect of the rate decrease filings roughly offset their two most recent rate level increase filings which became effective in 2003 and 2004, and results in their current pricing being equivalent to their 2002-2003 levels. Notably, the declining policy count in combination with the declining rate level has caused ProAssurance to fall below the statutory participation level of 5% or more of the market share in accordance §33-20B-6, and accordingly ProAssurance did not participate in this year’s report.

A year 2000 baseline representation of ProAssurance’s rate level is demonstrated here:
Community Hospital RRG

*Community Hospital RRG*, also known as *CHART*, is a Vermont domiciled insurer newly formed in 2002. As a reciprocal risk retention group, it is owned by its member insurers and this includes 8 West Virginia hospitals. *CHART* also operates in Pennsylvania and New York. As a surplus lines insurer *CHART* did not provide 5% market share information and no rate history information is available for this company.

Lexington Insurance Company

*Lexington* is a surplus lines writer (*a Charits* (aka: *AIG*) subsidiary) writing coverage primarily for hospitals and other healthcare facilities. They wrote $1,116,103 in West Virginia in the Medical Malpractice line during 2011, representing 1.40% of the market share in the total market (*combined admitted and non-admitted*.) This represents a decrease in written premium in West Virginia for *Lexington* over 2010. In 2000, Lexington entered the West Virginia market on a surplus lines basis and reported $58,000 in written premium for the year. This increased to over $7M by the 2002-2003 time period, but has generally declined since. As a surplus lines writer *Lexington* did not provide 5% market share information for this report and no rate history information is available for this company.
III-C: Rating Plans and Rating Rules

Physicians and Surgeons Programs
Coverage is provided by each of the insurers on a claims-made (or less frequently, occurrence) basis. The coverage provided by all plans is relatively standard. Differences may occur in:

- Number of classes
- Assignment of specialties to class
- Definition of specialties
- Class relativities
- Maturity and tail factors
- Discounts offered

None of these differences produce an unfair advantage or inappropriate rating plan. Physicians and Surgeons rating plans are consistent with other industry plans and are reasonable.

Hospital Programs
Each insurer provides coverage on a claims-made (or less frequently, occurrence) basis. Variations in the rating plans may occur in the:

- Exposure base
- Experience rating plan
- Schedule rating plan
- Surcharge programs
- Deductible credits
- Increased limits factors

Flexibility in pricing through the use of guide (a) rating (aka ‘refer to company’) allows underwriters the ability to customize the price and coverage to the risk. Such a feature is common when rating large, unique risks such as hospitals.
III-D: Reconciliation of Filed Information to Rate Filing Information

As required by West Virginia Code §33-20B-3.

1. Reconcile the most recent filed information to the experience reported in the rate filings.

Exhibit I-Sheet 1a through 1c provides the premium and loss for each carrier.
(Exhibits begin on page 77.)

- **WVMIC** figures (Sheets 1a through 1c) are noted to have undergone further development as the experience of the legacy program which they had inherited (BRIM II) becomes better known. This development appears to have been favorable to **WVMIC** and generally does not provide concerns.

- **Medicus** figures (Sheets 1a through 1c) the data are still rather immature and due to the long tail nature of this line of business are anticipated to undergo further development. However, due to the small volume of business written by **Medicus** at this time, these figures are shown to demonstrate a great deal of year to year volatility.

2. Reconcile the experience in the filed information to the most recent experience reported in the company’s financial statements.

- **Exhibit VI** provides the comparison of Annual Statement information with the filed 5% Report information for each company. The results are demonstrated to wholly reconcile for both companies participating in the report.
3. **Compare the assumptions underlying the filed information to the most recent rate filing assumptions or other information.**

   ✓ **Exhibits II-V** provide the key assumptions underlying the most recent rate filings to the filed 5% Report information, prior rate filings and abstracts, Annual Statement data, and other source documents. A notable increase in total underwriting expense is observed for *WVMIC* since inception in 2004, and due to the nature of the fixed expense loading procedure the filed information and the most recent rate filing do not match precisely. It is again noted that the specific methodology by which *WVMIC* proposes to be accounting for an offset of their investment income within their rate filings is unclear.

4. **Is the filed information filled out correctly and accurately?**

   ✓ It is clear that each company has attempted to provide accurate information in response to the 5% Report data call.

5. **Does the filed information support our conclusion on the rates as of 12/31/04?**

   ✓ **Exhibit VII** provides rate comparisons for a number of specialties utilizing the filed rates of several companies writing physicians and surgeon’s coverage in West Virginia as well as those filed by a rating organization. Note that in review of the by-company rate histories as provided in Section III-B above, that by premium volume rates have generally remained stable in West Virginia after having declined during the most recent prior years.
III-E: Analysis of Rate Filings

*West Virginia Mutual Insurance Company*

The company most recently filed for and received approval of a 0.0% change to their base rates to become effective on January 1, 2013. Prior to this, an overall decrease of 5% was filed for and approved effective as of January 1, 2012. Similar “no change” filings were approved for January 1, 2011, 2010, 2009, & 2008. *WVMIC* has also again increased the renewal discount in their rating manual. In January of 2007, the company filed for and received approval of an overall rate level decrease of -15%; this followed a similar overall decrease of -5% in 2006. As indicated in Section III-B, the Company’s current rates are about -15% below that of their initial rate filing which became effective on July 1, 2004.

*Medicus Insurance Company*

The company most recently filed for and received approval of a 0.0% change to their base rates to become effective October 10, 2012. Prior to this filing, “no change” filings were approved for October 2011, and September 2010. *Medicus* filed for and received approval of a -1.2% overall filing effective as of October 1, 2009. That filing was subsequent to their initial rate filing in the state which became effective on March 20, 2008. As also indicated in Section III-B, the Company’s current rates are about -1.2% below that of their initial rate filing.

III-F: Investment Portfolio

*Exhibit III* presents a comparison of net investment gains and investment income provisions from rate filings. In earlier years, investment gains had generally declined but are now showing upward movement. It is again noted that *WVMIC* must clearly and specifically account for an investment income offset within its future rate filings.
III-G: Overall Medical Malpractice Market (*Annual Statement Line of Business 11*)

Although sub-lines of medical malpractice (*e.g. physicians, hospitals, etc.*.) are considered individually in the Appendix of this report, a detailed view of the entire medical malpractice line of business on an admitted company basis for 2011 provides the following: (*Companies under $1,000.00 omitted*)

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Premiums Written</th>
<th>Market Share</th>
<th>Premiums Earned</th>
<th>Losses Incurred</th>
<th>Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Virginia Mut Ins Co</td>
<td>$32,677,159</td>
<td>55.95%</td>
<td>$35,287,909</td>
<td>$11,050,076</td>
<td>31.31%</td>
</tr>
<tr>
<td>National Union Fire Ins Co Pitts</td>
<td>$7,242,795</td>
<td>12.40%</td>
<td>$7,269,658</td>
<td>$19,310,899</td>
<td>265.64%</td>
</tr>
<tr>
<td>Mountaineer Freedom RRG Inc</td>
<td>$6,080,042</td>
<td>10.41%</td>
<td>$6,090,886</td>
<td>$2,673,358</td>
<td>43.89%</td>
</tr>
<tr>
<td>Medicus Ins Co</td>
<td>$5,984,271</td>
<td>10.25%</td>
<td>$5,539,308</td>
<td>$6,930,431</td>
<td>125.11%</td>
</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>$1,311,122</td>
<td>2.25%</td>
<td>$1,444,415</td>
<td>($812,499)</td>
<td>-56.25%</td>
</tr>
<tr>
<td>American Cas Co Of Reading PA</td>
<td>$943,168</td>
<td>1.62%</td>
<td>$960,386</td>
<td>($249,466)</td>
<td>-25.98%</td>
</tr>
<tr>
<td>Continental Cas Co</td>
<td>$819,047</td>
<td>1.40%</td>
<td>$1,031,849</td>
<td>$917,218</td>
<td>88.89%</td>
</tr>
<tr>
<td>Doctors Co An Interins Exch</td>
<td>$676,728</td>
<td>1.16%</td>
<td>$659,222</td>
<td>$830,910</td>
<td>126.04%</td>
</tr>
<tr>
<td>Medical Protective Co</td>
<td>$566,516</td>
<td>0.97%</td>
<td>$368,058</td>
<td>$0</td>
<td>0%</td>
</tr>
<tr>
<td>Podiatry Ins Co Of Amer</td>
<td>$538,805</td>
<td>0.92%</td>
<td>$500,791</td>
<td>$233,680</td>
<td>46.66%</td>
</tr>
<tr>
<td>Cincinnati Ins Co</td>
<td>$362,337</td>
<td>0.62%</td>
<td>$420,639</td>
<td>$626,344</td>
<td>148.90%</td>
</tr>
<tr>
<td>Liberty Ins Underwriters Inc</td>
<td>$338,654</td>
<td>0.58%</td>
<td>$262,049</td>
<td>$275,394</td>
<td>105.09%</td>
</tr>
<tr>
<td>NCMIC Ins Co</td>
<td>$336,234</td>
<td>0.58%</td>
<td>$329,832</td>
<td>$223,569</td>
<td>67.78%</td>
</tr>
<tr>
<td>Ace Amer Ins Co</td>
<td>$147,984</td>
<td>0.25%</td>
<td>$127,485</td>
<td>$45,961</td>
<td>36.05%</td>
</tr>
<tr>
<td>American Alt Ins Corp</td>
<td>$93,888</td>
<td>0.16%</td>
<td>$90,023</td>
<td>$60,181</td>
<td>66.85%</td>
</tr>
<tr>
<td>Darwin Natl Assur Co</td>
<td>$69,495</td>
<td>0.12%</td>
<td>$91,098</td>
<td>$9,398</td>
<td>10.32%</td>
</tr>
<tr>
<td>Church Mut Ins Co</td>
<td>$43,422</td>
<td>0.07%</td>
<td>$44,564</td>
<td>($2,339)</td>
<td>-5.25%</td>
</tr>
<tr>
<td>Capson Physicians Ins Co</td>
<td>$43,184</td>
<td>0.07%</td>
<td>$0</td>
<td>$0</td>
<td>0%</td>
</tr>
<tr>
<td>PACO Assur Co Inc</td>
<td>$25,975</td>
<td>0.04%</td>
<td>$21,368</td>
<td>$5,822</td>
<td>27.25%</td>
</tr>
<tr>
<td>Campmed Cas &amp; Ind Co Inc</td>
<td>$24,194</td>
<td>0.04%</td>
<td>$33,099</td>
<td>$2,253</td>
<td>6.81%</td>
</tr>
<tr>
<td>State Farm Fire &amp; Cas Co</td>
<td>$18,232</td>
<td>0.03%</td>
<td>$18,786</td>
<td>($8,500)</td>
<td>-45.25%</td>
</tr>
<tr>
<td>Pharmacists Mut Ins Co</td>
<td>$15,775</td>
<td>0.03%</td>
<td>$14,752</td>
<td>($5,250)</td>
<td>-35.59%</td>
</tr>
<tr>
<td>Fortress Ins Co</td>
<td>$13,328</td>
<td>0.02%</td>
<td>$12,786</td>
<td>$2,291</td>
<td>17.92%</td>
</tr>
<tr>
<td>Granite State Ins Co</td>
<td>$11,623</td>
<td>0.02%</td>
<td>$9,904</td>
<td>($7,420)</td>
<td>-74.92%</td>
</tr>
<tr>
<td>Everest Natl Ins Co</td>
<td>$11,318</td>
<td>0.02%</td>
<td>$8,628</td>
<td>$860</td>
<td>9.97%</td>
</tr>
<tr>
<td>Zurich Amer Ins Co</td>
<td>$11,311</td>
<td>0.02%</td>
<td>$40,057</td>
<td>$9,723</td>
<td>24.27%</td>
</tr>
<tr>
<td>Chicago Ins Co</td>
<td>$1,857</td>
<td>0.00%</td>
<td>$12,138</td>
<td>($128,448)</td>
<td>-1058.23%</td>
</tr>
<tr>
<td>Community Hlth Allin RRG</td>
<td>$1,094</td>
<td>0.00%</td>
<td>$1,094</td>
<td>$0</td>
<td>0%</td>
</tr>
<tr>
<td>Empire Fire &amp; Marine Ins Co</td>
<td>$0</td>
<td>0%</td>
<td>$6,160</td>
<td>$4,681</td>
<td>75.99%</td>
</tr>
<tr>
<td>Executive Risk Ind Inc</td>
<td>$0</td>
<td>0%</td>
<td>$6,081</td>
<td>$29,814</td>
<td>490.28%</td>
</tr>
<tr>
<td>Standard Fire Ins Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>$21,186</td>
<td>0%</td>
</tr>
<tr>
<td>Travelers Cas &amp; Surety Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>$2,045</td>
<td>0%</td>
</tr>
<tr>
<td>Westport Ins Corp</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($1,909)</td>
<td>0%</td>
</tr>
<tr>
<td>American Ins Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($4,654)</td>
<td>0%</td>
</tr>
<tr>
<td>Travelers Prop Cas Co Of Amer</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($14,523)</td>
<td>0%</td>
</tr>
<tr>
<td>Professionals Advocate Ins Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($40,928)</td>
<td>0%</td>
</tr>
<tr>
<td>St Paul Fire &amp; Marine Ins Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($47,808)</td>
<td>0%</td>
</tr>
<tr>
<td>National Fire Ins Co Of Hartford</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($542,085)</td>
<td>0%</td>
</tr>
<tr>
<td>ProAssurance Natl Capital</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($735,000)</td>
<td>0%</td>
</tr>
<tr>
<td>Travelers Ind Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($1,289,855)</td>
<td>0%</td>
</tr>
<tr>
<td>Ohic Ins Co</td>
<td>$0</td>
<td>0%</td>
<td>$0</td>
<td>($1,974,039)</td>
<td>0%</td>
</tr>
<tr>
<td>American Home Assur Co</td>
<td>($9,389)</td>
<td>-0.02%</td>
<td>($9,389)</td>
<td>($1,280)</td>
<td>13.63%</td>
</tr>
</tbody>
</table>

**54 Companies in Report**

<table>
<thead>
<tr>
<th>Premiums Earned</th>
<th>Losses Incurred</th>
<th>Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>$58,400,317</td>
<td>$60,694,306</td>
<td>61.62%</td>
</tr>
</tbody>
</table>
Note that only a very small number of companies (54) are reporting any activity in West Virginia for 2011, and that our domiciled mutual company (*West Virginia Mutual*) has a material concentration of total market share (*although this is in decline as noted previously*). Looking back on these considerations historically, on an admitted basis as well as on a business written basis, the following summary information can be found.

### Licensed Company Basis

<table>
<thead>
<tr>
<th>Year</th>
<th>Active Co's</th>
<th>Loss Ratio</th>
<th>HHI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>59</td>
<td>90.69%</td>
<td>3,142</td>
</tr>
<tr>
<td>1998</td>
<td>58</td>
<td>79.77%</td>
<td>3,038</td>
</tr>
<tr>
<td>1999</td>
<td>60</td>
<td>93.82%</td>
<td>2,829</td>
</tr>
<tr>
<td>2000</td>
<td>61</td>
<td>76.51%</td>
<td>2,672</td>
</tr>
<tr>
<td>2001</td>
<td>61</td>
<td>89.68%</td>
<td>2,850</td>
</tr>
<tr>
<td>2002</td>
<td>60</td>
<td>97.76%</td>
<td>2,773</td>
</tr>
<tr>
<td>2003</td>
<td>58</td>
<td>70.17%</td>
<td>1,913</td>
</tr>
<tr>
<td>2004</td>
<td>65</td>
<td>38.23%</td>
<td>4,911</td>
</tr>
<tr>
<td>2005</td>
<td>59</td>
<td>26.54%</td>
<td>4,547</td>
</tr>
<tr>
<td>2006</td>
<td>56</td>
<td>15.78%</td>
<td>5,575</td>
</tr>
<tr>
<td>2007</td>
<td>52</td>
<td>59.39%</td>
<td>6,819</td>
</tr>
<tr>
<td>2008</td>
<td>57</td>
<td>-8.35%</td>
<td>7,039</td>
</tr>
<tr>
<td>2009</td>
<td>55</td>
<td>36.55%</td>
<td>6,023</td>
</tr>
<tr>
<td>2010</td>
<td>50</td>
<td>22.52%</td>
<td>5,659</td>
</tr>
<tr>
<td>2011</td>
<td>54</td>
<td>61.62%</td>
<td>3,512</td>
</tr>
</tbody>
</table>

### Business Written Basis

<table>
<thead>
<tr>
<th>Year</th>
<th>Active Co's</th>
<th>Loss Ratio</th>
<th>HHI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>79</td>
<td>92.81%</td>
<td>2,512</td>
</tr>
<tr>
<td>1998</td>
<td>87</td>
<td>76.04%</td>
<td>2,335</td>
</tr>
<tr>
<td>1999</td>
<td>91</td>
<td>93.69%</td>
<td>2,252</td>
</tr>
<tr>
<td>2000</td>
<td>93</td>
<td>85.64%</td>
<td>2,295</td>
</tr>
<tr>
<td>2001</td>
<td>93</td>
<td>91.36%</td>
<td>2,163</td>
</tr>
<tr>
<td>2002</td>
<td>94</td>
<td>93.27%</td>
<td>1,834</td>
</tr>
<tr>
<td>2003</td>
<td>94</td>
<td>67.19%</td>
<td>1,047</td>
</tr>
<tr>
<td>2004</td>
<td>100</td>
<td>36.84%</td>
<td>3,185</td>
</tr>
<tr>
<td>2005</td>
<td>104</td>
<td>25.85%</td>
<td>2,595</td>
</tr>
<tr>
<td>2006</td>
<td>104</td>
<td>17.44%</td>
<td>2,909</td>
</tr>
<tr>
<td>2007</td>
<td>102</td>
<td>51.90%</td>
<td>3,746</td>
</tr>
<tr>
<td>2008</td>
<td>107</td>
<td>3.73%</td>
<td>3,335</td>
</tr>
<tr>
<td>2009</td>
<td>111</td>
<td>29.14%</td>
<td>2,832</td>
</tr>
<tr>
<td>2010</td>
<td>106</td>
<td>27.95%</td>
<td>2,083</td>
</tr>
<tr>
<td>2011</td>
<td>108</td>
<td>52.89%</td>
<td>1,934</td>
</tr>
</tbody>
</table>

Note that "HHI" represents the *Herfindahl-Hirschman Index*, a metric named for its originators. This is a commonly accepted measure of marketplace concentration. It is calculated by squaring the market share of each firm competing in a market and then summing the resulting numbers for all firms. For example, in a market consisting of only four firms with market shares of 30%, 30%, 20% and 20%, the **HHI** would be found to be 2,600 or \((30^2 + 30^2 + 20^2 + 20^2)\). A market having only a single firm with a market share of 100% would be found to be 10,000 or \((100^2)\) in what is otherwise known as a monopoly.
The HHI takes into account the relative size and distribution of the firms in a market and approaches zero when a market consists of a large number of firms of relatively equal size. The HHI increases both as the number of firms in the market decreases and as the disparity in size between those firms increases. Markets in which the HHI is between 1,000 and 1,800 points are considered to be moderately concentrated and those in which the HHI is in excess of 1,800 points are considered to be concentrated.

While the general medical malpractice market is in more of a healthy state simply due to the presence of the excess and surplus writers, both markets (admitted and non-admitted) have been becoming generally less concentrated since 2008, and notably, on a Business Written basis is now approaching a moderate concentration.
Other graphical representations of the historical market data:

**Number of Active Companies**

![Number of Active Companies Graph](image)

**Historical Loss Ratios**

![Historical Loss Ratios Graph](image)
Section IV

Other Sources of Data
IV: Other Sources of Data

IV-A: Medical Liability Fund Data

Becoming effective on January 1, 2002, HB 601 increased the fee associated with filing a medical professional liability action in part to support the Medical Liability Fund created pursuant to §29-12B-1 et seq. As part of this change, a portion of the moneys received for each action filed are received by the State Treasurers Office. The data associated with these transactions can be examined to establish the total number of actions involving Medical Professional Liability filed in West Virginia per year and as well the total number filed per county of venue. It is noted that due to the particular timing involved in posting these transactions, the data appears to lag by a period of approximately one month from the actual date that the action in consideration was actually filed in a court of law.

Examining this data in aggregate, the following information is noted:

<table>
<thead>
<tr>
<th>Year</th>
<th># of Filed Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>239</td>
</tr>
<tr>
<td>2003</td>
<td>315</td>
</tr>
<tr>
<td>2004</td>
<td>130</td>
</tr>
<tr>
<td>2005</td>
<td>273</td>
</tr>
<tr>
<td>2006</td>
<td>154</td>
</tr>
<tr>
<td>2007</td>
<td>174</td>
</tr>
<tr>
<td>2008</td>
<td>178</td>
</tr>
<tr>
<td>2009</td>
<td>205</td>
</tr>
<tr>
<td>2010</td>
<td>169</td>
</tr>
<tr>
<td>2011</td>
<td>372</td>
</tr>
</tbody>
</table>

Until 2011, a general decline in the number of filed actions per year had taken place. The polynomial trend (red) line in the graph below indicates that we now have essentially averaged a net “no change” over this period. Hopefully, this recent adverse trend will reverse itself again in the very near future.
Perhaps of more interest than the preceding annual counts, the Medical Liability Fund data also provides the county of venue where the action was filed. Compiling this data from 2002-2011 provides the following: (See also the Appendix page 95.)

The data on suits by county above appears to be roughly equivalent to population levels by county: (See also the Appendix page 116.)
If however, we make the suits by county data relative to the number of residents per county, we can determine which counties then have the highest suit ratios per population.
It is noted that approximately 146 cases were filed against a single doctor in Putnam County over the time period being reviewed above. That outlier has been adjusted for in the county level data above. Not accounting for this outlier would result in Putnam County being assigned to the “Greater than 2” group, and would also increase the State-wide average ratio to 1.19 (otherwise 1.11).
IV-B: Board of Medicine Data

Obtaining data from the West Virginia Board of Medicine regarding physician licensure in West Virginia, the following history is observed.

<table>
<thead>
<tr>
<th>West Virginia Board of Medicine Licensure Data</th>
<th>1997</th>
<th>1998</th>
<th>1999</th>
<th>2000</th>
<th>2001</th>
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<tbody>
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<td>5,026</td>
<td>5,107</td>
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<td>5,212</td>
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<tr>
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<td>920</td>
<td>947</td>
<td>901</td>
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<tr>
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<td>102</td>
<td>115</td>
<td>104</td>
<td>110</td>
<td>104</td>
<td>114</td>
<td>110</td>
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<td>22</td>
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<td>65</td>
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<td>335</td>
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<td>590</td>
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<td>34</td>
<td>42</td>
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<td>55</td>
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<tr>
<td>Special Volunteer Medical Licenses</td>
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<td>-----</td>
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<tr>
<td>Medical School Faculty Limited Licenses</td>
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<td>3,708</td>
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<tr>
<td>Medical Corporations</td>
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<td>513</td>
<td>502</td>
<td>500</td>
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<td>Professional Limited Liability Companies</td>
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<td>51</td>
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</table>
Looking at only licensed physicians that report as actively practicing in West Virginia, an overall favorable increase in physicians is observed for the State.

Tying the active physician licensure data to historical premium data for the physician sub-line of medical malpractice, we can also estimate how the cost of malpractice premiums might be spread on average throughout our physician population.

<table>
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<th>Business Written Basis</th>
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<td>2009</td>
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<tr>
<td>2010</td>
</tr>
<tr>
<td>2011</td>
</tr>
</tbody>
</table>
Note the significant decrease in average premium occurring from 2004 to present.

Note also that the “averaged” premiums above are not necessarily representative of the premium that a given physician doing business in West Virginia may actually be paying, as that premium would be influenced by the physicians specialty (e.g. physician classes versus surgeon classes), the maturity of their claims-made policy, the limits of insurance afforded, presence of rating credits and debits, etc.

However it is clear from the representative information above that, on average, malpractice rates in West Virginia are continuing to decline. This is also directly observable via the rate filing history appearing on page 114.
Section V

Summary Observations
V: Summary Observations

- In 2011, medical malpractice insurance in **West Virginia** continued to demonstrate favorable results, concluding with an overall loss ratio of **61.62%**. Total premium volume for 2011 rebounded from the 2010 level to one that was comparable to that last experienced during 2007-2008. This slight uptick in premium volume aids in combating future volatility occurring within our marketplace due to its inherently small size.

- **Countrywide** net operating results for all lines of business in 2011 remained marginally favorable at 99.8%, but overall medical malpractice results remained stable (**69.1% for 2011, 65.8% in 2010, 71.9% in 2009, 70.6% during 2008, 68.1% during 2007 and 72.6% in 2006**).

- The key volume writer in the state, **West Virginia Mutual Insurance Company** whose market share declined to 59.95% for 2011 in the admitted market, and 40.89% of the entire market, again experienced a favorable year in 2011, posting a pure direct loss ratio of just 31.31%. Encouragingly, there were two insurers once again meeting the 5% or more market share threshold for inclusion in the 2011 report, whereas only **WVMIC** met that threshold as recently as 2008.

- During 2011 medical malpractice rates in **West Virginia** declined only slightly. **WVMIC** held a substantial majority of the market share and initiated a change of -5.00% overall. **Medicus** proposed no rate changes in 2011. **ProAssurance** increased their rates by +2.60% overall, and the **Doctors Company** rates decreased theirs by -4.90% overall. This culminates in a weighted net change to overall rates of -2.80% during 2011. Note that the overall increase in written premium volume is attributed to programs other than physicians and surgeons malpractice insurance.

- As noted in previous reports, one of the key elements underlying the historical adverse results for West Virginia had been a very **high level of defense costs**. Loss adjustment expenses in West Virginia had fallen from a high of 69.5% in 1999 to be more in line with (or better) than the industry countrywide ratios by 2002. However, that favorable change did not continue in 2007 as Loss Adjustment Expense grew to 50.8% of premium (**up from just 11.8% in 2006**), and only improved slightly over that level for 2008 with 39.42%. During 2010 & 2011, Loss Adjustment
Expense is shown to have returned to a more favorable level (23.1% & 19.7% respectively). Yet, this volatility remains an item of concern for the future.

- In the admitted market, the top five malpractice writers in West Virginia by premium written accounted for 91.26% of the entire admitted market (previously 92.25%), and the favorable decline in market concentration demonstrating that there is an increase in competition here continues. In the whole market (admitted and non-admitted), the top five writers account for 71.08% of the market (previously 70.96%). During 2011, our medical malpractice market improved again slightly in its level of concentration, but metrics still indicate a general absence of competition.

- The small size of our medical malpractice marketplace in West Virginia, with only 3,946 active physicians practicing in our State, inherently lends itself toward volatility, as can be demonstrated by simply considering the 2006 through 2011 results (with Direct Loss Ratios of 15.7%, 59.4%, -8.4%, 36.6%, 22.5%, and 61.61% respectively).

- An analysis of West Virginia Board of Medicine data revealed the following:
  - The number of paid claims was shown to have generally declined in West Virginia.
  - Roughly 30% of claims filed are still being dismissed.
  - The total number of claims in 2011 (191) is about half of that experienced in 2001 (375 or 50.93%).
  - Approximately 8% of claims filed actually go to court.
  - 61% of Malpractice claims are settled outside of court.
  - There still does not appear to be any clear and credible pattern of escalating jury awards, although the small number of awards yields little in the way of credible data upon which to draw conclusions.

- A review of Medical Liability fund data indicates that the number of filed actions in West Virginia have been increasing again over the past couple of years.

- Examination of the 5% market share companies data as required by §114CSR22, §114CSR23, and §33-20B-6 found no areas of material concern.
**Glossary of Terms**

**Accident Year Experience:** Measures premiums and losses relating to accidents which occurred during a 12-month period.

**Admitted Market:** Comprised of only Insurance Companies that are specifically authorized and licensed to write business in a given state. Contrast this with the market as a whole which would also include non-admitted insurers who write in a given state on an Excess and Surplus lines basis. (i.e. Business Written Basis.)

**BRIM:** *West Virginia Board of Risk and Insurance Management*

**BRIM I:** Term to identify the medical malpractice program for teaching schools and their physicians. This program is administered by *National Union Fire of Pittsburgh* (an *AIG* subsidiary) under a fronting arrangement. *AIG* assumes no real risk under this arrangement; they simply issue the policies on *AIG* paper and are fully reimbursed by *BRIM* for loss and other expenses. They receive a percentage of premium for providing this service. **BRIM I** policies are written on an occurrence basis.

**BRIM II:** Term to identify the medical malpractice program for private physicians and hospitals. This program was administered by *Marsh*. **BRIM II** was written on a claims-made basis. All **BRIM II** business novated to the *West Virginia Mutual Insurance Company* (*WVMIC*) on July 1, 2004.
**Claims-made Coverage:** A policy which provides coverage only when a claim is made during its active policy period or any automatic or purchased supplemental extended reporting period. For example, generally a claim that is made in the current year will be charged against the current policy even if the injury or loss giving rise to the claim had occurred many years in the past. However, a claims-made policy will also have a set specific retroactive date, prior to which any occurrence giving rise to a claim will not be covered. From a pricing perspective, claims-made coverage is much more straightforward since it strictly limits the insurers’ exposure only to unknown future liabilities (called “incurred but not reported” claims). Contrast this coverage with “**Occurrence Coverage**”. Claims-made coverage became a more accepted approach towards writing long-tailed exposure lines like medical malpractice and products liability during the mid-‘80’s after its introduction by the **Insurance Services Organization (ISO)**.

**Combined Ratio:** Percentage of each premium dollar a property/casualty insurer spends on claims and expenses. A decrease in the combined ratio means financial results are improving; an increase means that they are deteriorating. When the ratio is over 100%, the insurer has an underwriting loss.

**Direct Combined Ratio:** The sum of expenses and incurred losses combined versus earned premiums. On a direct basis, this ratio does not take into account any adjustments for reinsurance recoveries or payments for reinsurance coverage.

**Direct Loss Ratio:** The ratio of incurred losses to earned premium. The direct loss ratio is in contrast to a ‘net loss ratio’ which compares losses after reinsurance recoveries to earned premiums after paying for reinsurance.

**Earned Premium:** The pro rata portion of written premium which represents the expired portion of the insurance contract. For example, an annual policy of $100 written on July 1, 2001, assuming a calendar year accounting period, will be shown on the company’s books as being partially earned in 2001 and 2002, i.e. fifty dollars earned in 2001 and fifty dollars in 2002.
**Guide (a) rating (also known as ‘refer to company’ and ‘judgment rating’):** (a)-rating is typically used for large and/or unique commercial risks. It is generally provided for in the rules section of a company’s underwriting manual. When a risk, such as a hospital, qualifies for (a)-rating, the actual price for the risk will be determined by an experienced underwriter. In this situation, actual filed rates are superseded by the underwriter’s judgment.

**"HHI":** The *Herfindahl-Hirschman Index.* A commonly accepted measure of marketplace concentration, calculated by squaring the market share of each firm competing in a market and then summing the resulting numbers for all firms. The measurement accounts for the relative size and distribution of firms within a market. It approaches 0 when a market consists of a large number of firms of relatively equal size, and 10,000 when a monopoly is measured.

**Incurred Loss:** A monetary payment and/or reserve on the part of the insurance company to cover claims of the insureds which are payable by the terms of the insurance contract.

**Investment Gain/(Loss):** The investment gain relates a company’s total *return on all invested funds* (premiums, reserves, and equity) to the calendar year earned premium. Thus this figure will usually be quite substantial for a long-tailed line like medical malpractice which requires considerable funds to be held in reserves and surplus.

**Loss Adjustment Expense (LAE):** Costs on the part of an insurance company to cover expenses incurred in settling their claims. This expense can be divided into two types: Allocated Loss Adjustment Expenses (ALAE aka Direct Cost Containment Expense [DCCE]) which are those expenses such as outside attorney and necessary court fees which can be directly tied to a specific claim, and Unallocated Loss Adjustment Expenses (ULAE aka Adjusting and Other [AO]) which are insurance company general claim department expenses, etc. and are *not directly allocated to a particular claim.*
**Loss Development Factors:** Designed to account for the subsequent development of losses or those that are late in being reported in order to attempt to reasonably estimate ultimate settlement amounts. Loss development factors are frequently utilized in those lines of insurance where claims develop slowly or are commonly reported later than the year in which the original premiums were earned. Prospective loss development factors are based upon changes in the relationships of historical claim data at specific and set periods during their subsequent development, such as after 12, 24, and 36 months, etc.

**Occurrence Coverage:** A policy that pays claims arising out of incidents that occur during the policy term, even if the claims are filed many years later.

**Operating Profit/(Loss):** Bottom-line profit or loss of an insurance company. Calculated by adding investment income to underwriting profit/(loss).

**Premium-to-Surplus Ratio:** The ratio of written premium to surplus. This ratio is commonly used in the property/casualty insurance industry as a measure of financial strength or to indicate the degree to which a company is leveraged. In Medical Malpractice insurance, this ratio is often less than one-to-one.

**Punitive Damages:** Damages awarded over and above compensatory (economic) damages to punish a negligent party because of wanton, reckless, or malicious acts or omissions.

**Pure Premium:** The portion of the total premium only needed to pay expected losses. The pure premium does not take into account the portion of premium necessary for company expenses (e.g., commissions, taxes, etc.)

**Risk Retention Group:** Liability Insurance Companies which are owned by their policyholders. Membership is limited to people in the same business or activity which exposes them to similar risks. The purpose is to assume and spread liability exposure to group members and to provide an alternative risk financing mechanism for liability. (See also the federal Liability Risk Retention Act of 1986.)
Severity: Average loss per claim.

Surplus Line: (aka Excess Line) A risk or part of a risk for which there is no market available through the original broker or agent in its jurisdiction. Therefore, it is placed with non-admitted insurers on an unregulated basis, in accordance with the surplus or excess lines provisions of the state law.

Underwriting Expense: The expenses which are realized by an insurance company in acquiring, selecting, and servicing policies. Underwriting expense includes agents’ commissions, general administration expenses, inspection & bureau expenses, and taxes, licenses and fees. It does not include any loss adjustment expenses.

Underwriting Profit/(Loss): The remainder when loss, loss adjustment expense and underwriting expense are subtracted from earned premium income.

Written Premium: The total premium from all policies with effective dates within a given time period.
Exhibits
<table>
<thead>
<tr>
<th>Year</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
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### Medicus Insurance Company

#### Physicians & Surgeons

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West Virginia Offices of the Insurance Commissioner
5% Market Share Report
Loss and Premium Information/Reconciliation

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<tr>
<th>West Virginia Mutual Ins Co</th>
<th>Physicians &amp; Surgeons</th>
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<td>Earned Prem</td>
<td>--- --- --- --- --- $44,959,000 $44,390,000 $40,022,000 $36,800,000 $35,077,000 $27,423,000</td>
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<tr>
<td>Inc Losses</td>
<td>--- --- --- --- --- ($1,306,000) $18,123,000 $8,095,000 $13,331,000 $7,974,000 $7,606,000</td>
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<tr>
<td>Loss Ratio</td>
<td>--- --- --- --- --- -2.9% 40.8% 20.2% 36.2% 22.7% 27.7%</td>
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<tr>
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<tr>
<td>Inc Losses</td>
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</tr>
<tr>
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<tr>
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<td>--- --- --- --- --- $52,850,000 $40,429,000 $44,959,000 $44,390,000 $40,022,000 $36,800,000 --- --- ---</td>
</tr>
<tr>
<td>Inc Losses</td>
<td>--- --- --- --- --- $45,549,000 $16,203,000 $1,837,000 $28,544,000 $20,816,000 $22,760,000 --- --- ---</td>
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<td>Loss Ratio</td>
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<td>--- --- --- --- --- $52,850,000 $40,429,000 $44,959,000 $44,390,000 $40,022,000 $36,800,000 --- --- --- ---</td>
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<tr>
<td>Inc Losses</td>
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<td>Loss Ratio</td>
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<tr>
<td>Inc Losses</td>
<td>--- --- --- --- --- $45,549,000 $16,203,000 $1,837,000 $28,544,000 --- --- --- --- --- ---</td>
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<tr>
<td>Loss Ratio</td>
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<tr>
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<td>--- --- --- --- --- $52,850,000 $40,429,000 $44,959,000 --- --- --- --- --- --- ---</td>
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### Medicus Insurance Company

#### Physicians & Surgeons

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### West Virginia Mutual Ins Co

#### Physicians & Surgeons

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<th>2004</th>
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<th>2011</th>
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<td>---</td>
<td>---</td>
<td>$42,371,000</td>
<td>$44,117,000</td>
<td>43,350,000</td>
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<td>37,301,000</td>
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### Medicus Insurance Company

#### Physicians & Surgeons

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<td>$45,874,000</td>
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<td>29.5%</td>
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## II. Comparison of Budgeted Expenses

### West Virginia Mutual Ins Co

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<th>Gen &amp; Other Acq</th>
<th>Taxes, Lic, &amp; Fees</th>
<th>Other</th>
<th>Profit &amp; Cont</th>
<th>Total Var Expense</th>
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<td>§114CSR22</td>
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<td>5.00%</td>
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### Fixed Expense

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<th>$4,481</th>
<th>$4,289</th>
<th>$3,840</th>
<th>$1,304</th>
<th>$1,254</th>
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<td>$20,528</td>
<td>$20,528</td>
<td>$20,528</td>
<td>$20,389</td>
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<td>$24,856</td>
<td>$22,558</td>
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<td>26.95%</td>
<td>26.95%</td>
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<td>21.83%</td>
<td>21.04%</td>
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<tr>
<td>Total Exp (Load %)</td>
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<td>44.55%</td>
<td>44.55%</td>
<td>41.34%</td>
<td>38.93%</td>
<td>39.64%</td>
<td>34.86%</td>
<td>29.55%</td>
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### Medici Insurance Company

<table>
<thead>
<tr>
<th>Filing Number</th>
<th>Effective Date</th>
<th>Comm &amp; Brok</th>
<th>Gen &amp; Other Acq</th>
<th>Taxes, Lic, &amp; Fees</th>
<th>Other</th>
<th>Profit &amp; Cont</th>
<th>Total Var Expense</th>
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<tbody>
<tr>
<td>§114CSR22</td>
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### Fixed Expense

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<th>n/a</th>
<th>n/a</th>
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<tr>
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<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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<tr>
<td>Fixed Exp loading</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
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<tr>
<td>Total Exp (Load %)</td>
<td>27.54%</td>
<td>26.00%</td>
<td>26.00%</td>
<td>24.50%</td>
<td>26.00%</td>
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</table>
West Virginia Offices of the Insurance Commissioner

5% Market Share Report

Comparison of Investment Income Provisions

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>Net Investment Gain</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>West Virginia Mutual Insurance Company</strong></td>
<td></td>
</tr>
<tr>
<td>2004</td>
<td>0.5%</td>
</tr>
<tr>
<td>2005</td>
<td>2.9%</td>
</tr>
<tr>
<td>2006</td>
<td>3.6%</td>
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<tr>
<td>2007</td>
<td>10.8%</td>
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<tr>
<td>2008</td>
<td>12.1%</td>
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<tr>
<td>2009</td>
<td>13.1%</td>
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<tr>
<td>2010</td>
<td>16.2%</td>
</tr>
<tr>
<td>2011</td>
<td>21.6%</td>
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</table>

Rate of Return Underlying:
- 2005 Filing: 3.50%
- 2006 Filing: N/A
- 2007 Filing: N/A
- 2008 Filing: N/A
- 2009 Filing: N/A
- 2010 Filing: N/A
- 2011 Filing: N/A
- 2012 Filing: N/A

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>Net Investment Gain</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medicus Insurance Company</strong></td>
<td></td>
</tr>
<tr>
<td>2008</td>
<td>1.1%</td>
</tr>
<tr>
<td>2009</td>
<td>7.3%</td>
</tr>
<tr>
<td>2010</td>
<td>5.5%</td>
</tr>
<tr>
<td>2011</td>
<td>1.6%</td>
</tr>
</tbody>
</table>

Rate of Return Underlying:
- 2008 Filing: N/A
- 2009 Filing: 5%
- 2010 Filing: 5%
- 2011 Filing: 5%
- 2012 Filing: 5%
West Virginia Offices of the Insurance Commissioner

5% Market Share Report

Comparison of Pure Premium Trends

<table>
<thead>
<tr>
<th>Rate Filings</th>
<th>Physicians &amp; Surgeons Program</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2005</td>
</tr>
<tr>
<td>West Virginia Mutual Ins Co</td>
<td>4.00%</td>
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</tbody>
</table>

Medicus Insurance Company

<table>
<thead>
<tr>
<th>Rate Filings</th>
<th>Physicians &amp; Surgeons Program</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2008</td>
</tr>
<tr>
<td>West Virginia Mutual Ins Co</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

*Medicus Ins Co utilizes West Virginia Mutual Ins Co’s trended pure premium in ratemaking, therefore the 3.00% pure premium trend of West Virginia Mutual Ins Co is implied in Medicus Ins Co rates

5% Market Share Report

Comparison of Incurred Loss Development Factors

<table>
<thead>
<tr>
<th>Physicians &amp; Surgeons</th>
</tr>
</thead>
</table>

West Virginia Mutual Insurance Company

<table>
<thead>
<tr>
<th>Maturity (mos)</th>
<th>Incurred LDFs</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-ultimate</td>
<td>1.152</td>
</tr>
<tr>
<td>30-ultimate</td>
<td>1.019</td>
</tr>
<tr>
<td>42-ultimate</td>
<td>0.997</td>
</tr>
<tr>
<td>54-ultimate</td>
<td>0.998</td>
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<tr>
<td>66-ultimate</td>
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<tr>
<td>78-ultimate</td>
<td>1.000</td>
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<tr>
<td>90-ultimate</td>
<td>1.000</td>
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<tr>
<td>102-ultimate</td>
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<tr>
<td>138-ultimate</td>
<td>1.000</td>
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</tbody>
</table>

Medicus Insurance Company

<table>
<thead>
<tr>
<th>Maturity (mos)</th>
<th>Incurred LDFs</th>
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</thead>
<tbody>
<tr>
<td>12-ultimate</td>
<td>1.763</td>
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<tr>
<td>18-ultimate</td>
<td>1.362</td>
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<tr>
<td>24-ultimate</td>
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</tr>
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<td>30-ultimate</td>
<td>1.091</td>
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<tr>
<td>36-ultimate</td>
<td>1.075</td>
</tr>
<tr>
<td>42-ultimate</td>
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<tr>
<td>48-ultimate</td>
<td>1.050</td>
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</table>
West Virginia Offices of the Insurance Commissioner

5% Market Share Report

Premium Reconciliation

<table>
<thead>
<tr>
<th>Company</th>
<th>Schedule T-Written Premium</th>
<th>Filing Forms</th>
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<tbody>
<tr>
<td>West Virginia Mutual Ins Co</td>
<td>$32,677,159</td>
<td>$32,770,475</td>
</tr>
<tr>
<td>All Other</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Total</td>
<td>$32,677,159</td>
<td>$32,770,475</td>
</tr>
<tr>
<td>Medicus Ins Co</td>
<td>$5,984,271</td>
<td>$5,894,271</td>
</tr>
<tr>
<td>All Other</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Total</td>
<td>$5,984,271</td>
<td>$5,894,271</td>
</tr>
</tbody>
</table>
Family Practice

- Allergy: $12,340
- Anesthesiology - Major Surgery: $30,959
- Cardiovascular Disease - Major Surgery: $69,630
- Dermatology - Minor Surgery: $26,663
- Emergency Medicine - Minor Surgery: $33,824
- General Practitioner - Major Surgery: $40,985
- General Surgery: $55,308
- Gynecology - No Surgery: $19,501
- Internal Medicine - Minor Surgery: $26,663
- Neurology - Major Surgery: $105,437
- Obstetrics/Gynecology: $76,792
- Orthopedics - Incl Spinal Surgery: $69,630
- Ophthalmology - Major Surgery: $23,082
- Orthopedics - Incl Spinal Surgery: $69,630
- Pediatrics - No Surgery: $19,501
- Urology - Major Surgery: $30,959

These rates are a starting point for rating a physician. Rates may be further adjusted by other rating plans.

*ISO only files loss costs and increased limit factors. Affiliated Insurers may use ISO as a basis for their rates.

An underwriting expense load of 25% was used to convert ISO loss costs to rates.
Appendix
### 2011 Physicians/Hospitals/Other Facilities/Professionals-Totals

<table>
<thead>
<tr>
<th>Physicians</th>
<th>2011 West Virginia Business Written</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COMPANY</strong></td>
<td><strong>Direct Premium Written</strong></td>
</tr>
<tr>
<td><strong>NAIC Database</strong></td>
<td><strong>Physicians Market Share</strong></td>
</tr>
<tr>
<td><strong>(Physicians)</strong></td>
<td><strong>Direct Premium Earned</strong></td>
</tr>
<tr>
<td><strong>%</strong></td>
<td><strong>Direct Loss Inurred</strong></td>
</tr>
<tr>
<td><strong>%</strong></td>
<td><strong>Pure Direct Loss Ratio</strong></td>
</tr>
<tr>
<td><strong>COMPANY</strong></td>
<td><strong>WASHINGTON</strong></td>
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<tr>
<td>West Virginia Mut Ins Co</td>
<td>$32,677,159.00</td>
</tr>
<tr>
<td></td>
<td>50.84%</td>
</tr>
<tr>
<td>Everest Ind Ins Co</td>
<td>$35,287,909.00</td>
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<tr>
<td>Medicus Ins Co</td>
<td>$5,539,308.00</td>
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<td>9.31%</td>
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<tr>
<td>ProAssurance Ind Co Inc</td>
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<tr>
<td>Ophthalmic Mut Ins Co RRG</td>
<td>$85,008.00</td>
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<tr>
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<td>1.38%</td>
</tr>
<tr>
<td>Doctors Co An Interins Exch</td>
<td>$645,521.00</td>
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<tr>
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<td>10.04%</td>
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<tr>
<td>National Guardian RRG Inc</td>
<td>$1,066,717.00</td>
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<tr>
<td>Applied Medico Legal Solutions RRG</td>
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<td>Physicians Specialty Ltd RRG</td>
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<tr>
<td>Catlin Specialty Ins Co</td>
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<tr>
<td>Oceanus Ins Co A RRG</td>
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<tr>
<td>National Union Fire Ins Co Of Pitts</td>
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<tr>
<td>Columbia Cas Co</td>
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<td>Medical Protective Co</td>
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<td>Homeland Ins Co of NY</td>
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<td>Evanston Ins Co</td>
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<td>Preferred Physicians Medical RRG</td>
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<td>Admiral Ins Co</td>
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<td>Care RRG Inc</td>
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<td>Southwest Physicians RRG Inc</td>
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<td>Essex Ins Co</td>
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<td>Healthcare Safety &amp; Protection RRG</td>
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<td>National Medical Professional RRG In</td>
<td>$7,776.00</td>
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<td>Capson Physicians Ins Co</td>
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<td></td>
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<tr>
<td>Professional Underwriters Liab Ins</td>
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<td>Hallmark Specialty Ins Co</td>
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<td>Hudson Specialty Ins Co</td>
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<td>American Cas Co Of Reading PA</td>
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<td>National Fire &amp; Marine Ins Co</td>
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<td>Ace Amer Ins Co</td>
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<tr>
<td>Community Hlth Alliance Recip RRG</td>
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<td>General Star Ind Co</td>
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<td>Continental Cas Co</td>
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<td>Pacific Employers Ins Co</td>
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<td>National Cas Co</td>
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<td>Ironshore Specialty Ins Co</td>
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<td>TIG Ins Co</td>
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<td>Interstate Fire &amp; Cas Co</td>
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<td>Travelers Prop Cas Co Of Amer</td>
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<tr>
<td>Steadfast Ins Co</td>
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<tr>
<td>Professionals Advocate Ins Co</td>
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<td>St Paul Fire &amp; Marine Ins Co</td>
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<tr>
<td>Lexington Ins Co</td>
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<tr>
<td>National Fire Ins Co Of Hartford</td>
<td>$542,085.00</td>
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<td>ProAssurance Natl Capital Ins Co</td>
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<td>Ohio Ins Co</td>
<td>$2,652,749.00</td>
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<tr>
<td><strong>TOTALS</strong></td>
<td>$24,647,166.00</td>
</tr>
<tr>
<td><strong>LICENSED COMPANIES (21)</strong></td>
<td><strong>64,270,333.00</strong></td>
</tr>
<tr>
<td><strong>SURPLUS LINE CO’S (19)</strong></td>
<td><strong>67,428,066.00</strong></td>
</tr>
<tr>
<td><strong>RISK RETENTION GROUPS (13)</strong></td>
<td><strong>3,560,891.00</strong></td>
</tr>
</tbody>
</table>

**TOTALS**  **$64,270,333.00**  **100.00%**  **$67,428,066.00**  **$24,647,166.00**  **36.55%**
<table>
<thead>
<tr>
<th>Hospitals</th>
<th>2011 West Virginia Business Written</th>
</tr>
</thead>
<tbody>
<tr>
<td>(NAIC Database) COMPANY</td>
<td>Direct Premium Written</td>
</tr>
<tr>
<td>Mountaineer Freedom RRG Inc</td>
<td>$6,054,852.00</td>
</tr>
<tr>
<td>Community Hospital RRG</td>
<td>$4,819,885.00</td>
</tr>
<tr>
<td>Nautilus Ins Co</td>
<td>$1,387,979.00</td>
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<tr>
<td>Darwin Select Ins Co</td>
<td>$1,194,331.00</td>
</tr>
<tr>
<td>Steadfast Ins Co</td>
<td>$928,562.00</td>
</tr>
<tr>
<td>American Excess Ins Exch RRG</td>
<td>$791,350.00</td>
</tr>
<tr>
<td>Lexingon Ins Co</td>
<td>$750,200.00</td>
</tr>
<tr>
<td>Illinois Union Ins Co</td>
<td>$647,900.00</td>
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<tr>
<td>Arch Specialty Ins Co</td>
<td>$520,000.00</td>
</tr>
<tr>
<td>Indian Harbor Ins Co</td>
<td>$73,197.00</td>
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<tr>
<td>Homeland Ins Co of NY</td>
<td>$14,800.00</td>
</tr>
<tr>
<td>Columbia Cas Co</td>
<td>$1,133.00</td>
</tr>
<tr>
<td>Zurich Amer Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Darwin Natl Assur Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Empire Fire &amp; Marine Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Admiral Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Executive Risk Ind Inc</td>
<td>$0.00</td>
</tr>
<tr>
<td>Standard Fire Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Travelers Cas &amp; Surety Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Executive Risk Specialty Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>St Paul Mercury Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Evanston Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Ace Amer Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>TIG Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Century Ind Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Ironshore Specialty Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>St Paul Fire &amp; Marine Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>ProAssurance Specialty Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Capitol Specialty Ins Corp</td>
<td>$0.00</td>
</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>$0.00</td>
</tr>
<tr>
<td>First Specialty Ins Corp</td>
<td>$0.00</td>
</tr>
<tr>
<td>Interstate Fire &amp; Cas Co</td>
<td>($5.00)</td>
</tr>
<tr>
<td>Everest Ind Ins Co</td>
<td>($14,165,279.00)</td>
</tr>
<tr>
<td>TOTALS</td>
<td>$3,018,905.00</td>
</tr>
</tbody>
</table>

**Licensed Companies (11)**

- $0.00 | 0.00% | $64,361.00 | ($158,025.00) | -245.53%

**Surplus Line Co's (19)**

- ($8,647,182.00) | -286.43% | ($8,330,046.00) | ($5,525,001.00) | 66.33%

**Risk Retention Groups (3)**

- $11,666,087.00 | 386.43% | $11,671,500.00 | $3,573,030.00 | 30.61%
<table>
<thead>
<tr>
<th>Other Professionals</th>
<th>2011 West Virginia Business Written</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Direct Premium Written</td>
</tr>
<tr>
<td>Liberty Surplus Ins Corp</td>
<td>$1,115,133.00</td>
</tr>
<tr>
<td>American Cas Co Of Reading PA</td>
<td>$925,966.00</td>
</tr>
<tr>
<td>Continental Cas Co</td>
<td>$819,047.00</td>
</tr>
<tr>
<td>Podiatry Ins Co Of Amer</td>
<td>$538,805.00</td>
</tr>
<tr>
<td>Cincinnati Ins Co</td>
<td>$362,337.00</td>
</tr>
<tr>
<td>Landmark Amer Ins Co</td>
<td>$341,084.00</td>
</tr>
<tr>
<td>Liberty Ins Underwriters Inc</td>
<td>$338,654.00</td>
</tr>
<tr>
<td>NCMIC Ins Co</td>
<td>$336,234.00</td>
</tr>
<tr>
<td>Evanston Ins Co</td>
<td>$322,887.00</td>
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<tr>
<td>Liberty Ins Underwriters Inc</td>
<td>$248,308.00</td>
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<tr>
<td>American Cas Co Of Reading PA</td>
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<tr>
<td>Continental Cas Co</td>
<td>$220,651.00</td>
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<tr>
<td>Western World Ins Co</td>
<td>$202,414.00</td>
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<tr>
<td>Podiatry Ins Co Of Amer</td>
<td>$146,466.00</td>
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<tr>
<td>Columbia Cas Co</td>
<td>$139,019.00</td>
</tr>
<tr>
<td>National Union Fire Ins Co Of Pitts</td>
<td>$125,760.00</td>
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<tr>
<td>Admiral Ins Co</td>
<td>$111,927.00</td>
</tr>
<tr>
<td>PACO Assur Co Inc</td>
<td>$25,975.00</td>
</tr>
<tr>
<td>Campmed Cas &amp; Ind Co Inc</td>
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<tr>
<td>ProAssurance Specialty Ins Co</td>
<td>$19,810.00</td>
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<tr>
<td>State Farm Fire &amp; Cas Co</td>
<td>$18,232.00</td>
</tr>
<tr>
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<td>$15,775.00</td>
</tr>
<tr>
<td>Fortress Ins Co</td>
<td>$13,328.00</td>
</tr>
<tr>
<td>Allied Professionals Ins Co RRG</td>
<td>$12,602.00</td>
</tr>
<tr>
<td>Interstate Fire &amp; Cas Co</td>
<td>$11,964.00</td>
</tr>
<tr>
<td>Granite State Ins Co</td>
<td>$11,623.00</td>
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<tr>
<td>Professional Underwriters Liab Ins C</td>
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</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>$9,472.00</td>
</tr>
<tr>
<td>Church Mut Ins Co</td>
<td>$3,255.00</td>
</tr>
<tr>
<td>Chicago Ins Co</td>
<td>$1,857.00</td>
</tr>
<tr>
<td>Essex Ins Co</td>
<td>$792.00</td>
</tr>
<tr>
<td>Nationwide Fire Ins Co</td>
<td>$541.00</td>
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<tr>
<td>Nationwide Mut Fire Ins Co</td>
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<tr>
<td>Steadfast Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Ace Fire Underwriters Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Century Ind Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>National Surety Corp</td>
<td>$0.00</td>
</tr>
<tr>
<td>American Automobile Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Illinois Union Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Firemans Fund Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>St Paul Fire &amp; Marine Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>TIG Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Westport Ins Corp</td>
<td>$0.00</td>
</tr>
<tr>
<td>American Home Assur Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>American Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Gulf Underwriters Ins Co</td>
<td>$0.00</td>
</tr>
<tr>
<td>Travelers Ind Co</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>$6,705,620.00</strong></td>
</tr>
</tbody>
</table>

| Licensed Companies (32) | **$3,959,681.00** | **59.05%** | **$4,065,313.00** | **$229,764.00** | **5.65%** |
| Surplus Line Co's (17) | **$2,474,336.00** | **36.90%** | **$1,941,599.00** | **$2,704,747.00** | **139.31%** |

<p>| Risk Retention Groups (3) | <strong>$271,603.00</strong> | <strong>4.05%</strong> | <strong>$281,772.00</strong> | <strong>$17,534.00</strong> | <strong>6.22%</strong> |</p>
<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Direct Premium Written</th>
<th>Physicians Market Share</th>
<th>Direct Premium Earned</th>
<th>Direct Loss Incurred</th>
<th>Pure Direct Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Union Fire Ins Co Of Pitts</td>
<td>$6,718,299.00</td>
<td>127.06%</td>
<td>$6,718,299.00</td>
<td>$17,864,598.00</td>
<td>265.91%</td>
</tr>
<tr>
<td>General Star Ind Co</td>
<td>$545,116.00</td>
<td>10.31%</td>
<td>$74,491.00</td>
<td>$2,000.00</td>
<td>2.68%</td>
</tr>
<tr>
<td>Guardian RRG Inc</td>
<td>$286,323.00</td>
<td>5.41%</td>
<td>$286,323.00</td>
<td>$178,791.00</td>
<td>62.44%</td>
</tr>
<tr>
<td>Darwin Select Ins Co</td>
<td>$245,012.00</td>
<td>4.63%</td>
<td>$246,697.00</td>
<td>$28,273.00</td>
<td>11.46%</td>
</tr>
<tr>
<td>Evanston Ins Co</td>
<td>$205,950.00</td>
<td>3.89%</td>
<td>$253,075.00</td>
<td>($89,201.00)</td>
<td>-27.34%</td>
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<tr>
<td>Arch Specialty Ins Co</td>
<td>$126,974.00</td>
<td>2.40%</td>
<td>$126,323.00</td>
<td>($51,832.00)</td>
<td>-41.03%</td>
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<tr>
<td>Lexington Ins Co</td>
<td>$121,304.00</td>
<td>2.29%</td>
<td>$128,521.00</td>
<td>$779,512.00</td>
<td>606.53%</td>
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<tr>
<td>American All Ins Corp</td>
<td>$93,888.00</td>
<td>1.78%</td>
<td>$90,023.00</td>
<td>$60,181.00</td>
<td>66.85%</td>
</tr>
<tr>
<td>Ironshore Specialty Ins Co</td>
<td>$87,550.00</td>
<td>1.66%</td>
<td>$62,432.00</td>
<td>($9,151.00)</td>
<td>-14.66%</td>
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<tr>
<td>Nautilus Ins Co</td>
<td>$75,473.00</td>
<td>1.43%</td>
<td>$14,435.00</td>
<td>$4,510.00</td>
<td>31.24%</td>
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<tr>
<td>Church Mut Ins Co</td>
<td>$40,167.00</td>
<td>0.76%</td>
<td>$40,773.00</td>
<td>($1,890.00)</td>
<td>-4.64%</td>
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<tr>
<td>National Fire &amp; Marine Ins Co</td>
<td>$37,710.00</td>
<td>0.71%</td>
<td>$15,764.00</td>
<td>$12,079.00</td>
<td>76.62%</td>
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<tr>
<td>The Cincinnati Specialty Underwriter</td>
<td>$35,000.00</td>
<td>0.66%</td>
<td>$10,208.00</td>
<td>$0.00</td>
<td>0.00%</td>
</tr>
<tr>
<td>ProAssurance Specialty Ins Co</td>
<td>$30,572.00</td>
<td>0.58%</td>
<td>$34,612.00</td>
<td>$7,268.00</td>
<td>21.00%</td>
</tr>
<tr>
<td>Catlin Specialty Ins Co</td>
<td>$12,500.00</td>
<td>0.24%</td>
<td>$12,500.00</td>
<td>$1,930.00</td>
<td>15.44%</td>
</tr>
<tr>
<td>Princeton Excess &amp; Surplus Lines Ins</td>
<td>$12,000.00</td>
<td>0.23%</td>
<td>$3,902.00</td>
<td>$2,950.00</td>
<td>75.60%</td>
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<tr>
<td>Zurich Amer Ins Co</td>
<td>$11,311.00</td>
<td>0.21%</td>
<td>$6,651.00</td>
<td>$977.00</td>
<td>14.69%</td>
</tr>
<tr>
<td>Allied World Assur Co US Inc</td>
<td>$10,775.00</td>
<td>0.20%</td>
<td>$10,096.00</td>
<td>$3,722.00</td>
<td>36.87%</td>
</tr>
<tr>
<td>Houston Cas Co</td>
<td>$7,500.00</td>
<td>0.14%</td>
<td>$7,500.00</td>
<td>$1,194.00</td>
<td>15.92%</td>
</tr>
<tr>
<td>Chartis Specialty Ins Co</td>
<td>$2,844.00</td>
<td>0.05%</td>
<td>$9,955.00</td>
<td>$777.00</td>
<td>7.81%</td>
</tr>
<tr>
<td>Illinois Union Ins Co</td>
<td>$2,398.00</td>
<td>0.05%</td>
<td>$994.00</td>
<td>$512.00</td>
<td>51.51%</td>
</tr>
<tr>
<td>Affiliates Ins Recip a RRG</td>
<td>$319.00</td>
<td>0.01%</td>
<td>$319.00</td>
<td>$53.00</td>
<td>16.61%</td>
</tr>
<tr>
<td>Executive Risk Ind Inc</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$6,081.00</td>
<td>$10,137.00</td>
<td>166.70%</td>
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<tr>
<td>Executive Risk Speciality Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>$12,184.00</td>
<td>---</td>
</tr>
<tr>
<td>Cincinnati Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>$3,984.00</td>
<td>---</td>
</tr>
<tr>
<td>Capitol Specialty Ins Corp</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>$278.00</td>
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<tr>
<td>St Paul Mercury Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>$56.00</td>
<td>---</td>
</tr>
<tr>
<td>Interstate Fire &amp; Cas Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($3.00)</td>
<td>---</td>
</tr>
<tr>
<td>Standard Fire Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($136.00)</td>
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<tr>
<td>St Paul Fire &amp; Marine Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($218.00)</td>
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<tr>
<td>Steadfast Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($3,112.00)</td>
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<tr>
<td>Travelers Prop Cas Co Of Amer</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($8,002.00)</td>
<td>---</td>
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<tr>
<td>Landmark Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($316,000.00)</td>
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<tr>
<td>Western World Ins Co</td>
<td>$0.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>($40,000.00)</td>
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<tr>
<td>American Home Assur Co</td>
<td>($9,389.00)</td>
<td>-0.18%</td>
<td>($9,389.00)</td>
<td>$970.00</td>
<td>-10.33%</td>
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<tr>
<td>Homeland Ins Co of NY</td>
<td>($297,235.00)</td>
<td>-5.62%</td>
<td>($194,963.00)</td>
<td>($253,260.00)</td>
<td>129.90%</td>
</tr>
<tr>
<td>Everest Ind Ins Co</td>
<td>($3,114,704.00)</td>
<td>-58.91%</td>
<td>($3,114,704.00)</td>
<td>($1,938,032.00)</td>
<td>62.22%</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>$5,287,657.00</strong></td>
<td><strong>100.00%</strong></td>
<td><strong>$4,840,918.00</strong></td>
<td><strong>$16,585,293.00</strong></td>
<td><strong>342.61%</strong></td>
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</tbody>
</table>

**Licensed Companies (11)**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Direct Premium Written</th>
<th>Physicians Market Share</th>
<th>Direct Premium Earned</th>
<th>Direct Loss Incurred</th>
<th>Pure Direct Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>$6,854,276.00</td>
<td>129.63%</td>
<td>$6,852,438.00</td>
<td>$17,930,657.00</td>
<td>261.67%</td>
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</tbody>
</table>

**Surplus Line Co's (2)**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Direct Premium Written</th>
<th>Physicians Market Share</th>
<th>Direct Premium Earned</th>
<th>Direct Loss Incurred</th>
<th>Pure Direct Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>$(1,853,261.00)</td>
<td>-35.05%</td>
<td>$(2,298,162.00)</td>
<td>$(1,524,208.00)</td>
<td>66.32%</td>
<td></td>
</tr>
</tbody>
</table>

**Risk Retention Groups (2)**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Direct Premium Written</th>
<th>Physicians Market Share</th>
<th>Direct Premium Earned</th>
<th>Direct Loss Incurred</th>
<th>Pure Direct Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>$286,642.00</td>
<td>5.42%</td>
<td>$286,642.00</td>
<td>$178,844.00</td>
<td>62.39%</td>
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</tbody>
</table>
## Total Medical Malpractice

### (NAIC Database) Company

<table>
<thead>
<tr>
<th>Company</th>
<th>Direct Premium Written</th>
<th>Total Med Mal Market Share</th>
<th>Direct Premium Earned</th>
<th>Direct Loss Incurred</th>
<th>Pure Direct Loss Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Virginia Mut Ins Co</td>
<td>32,677,159</td>
<td>40.89%</td>
<td>35,287,909</td>
<td>11,050,076</td>
<td>31.31%</td>
</tr>
<tr>
<td>National Union Fire Ins Co Of Pitts</td>
<td>7,242,795</td>
<td>9.06%</td>
<td>7,269,658</td>
<td>19,310,899</td>
<td>265.64%</td>
</tr>
<tr>
<td>Mountaineer Freedom RRG Inc</td>
<td>6,080,842</td>
<td>7.61%</td>
<td>6,090,886</td>
<td>2,673,358</td>
<td>43.89%</td>
</tr>
<tr>
<td>Medicus Ins Co</td>
<td>5,984,271</td>
<td>7.49%</td>
<td>5,539,208</td>
<td>6,930,431</td>
<td>125.11%</td>
</tr>
<tr>
<td>Community Hospital RRG</td>
<td>4,819,885</td>
<td>6.03%</td>
<td>4,819,885</td>
<td>1,499,853</td>
<td>31.12%</td>
</tr>
<tr>
<td>Darwin Select Ins Co</td>
<td>1,606,156</td>
<td>2.01%</td>
<td>1,730,212</td>
<td>765,899</td>
<td>44.27%</td>
</tr>
<tr>
<td>Nautilus Ind Co</td>
<td>1,463,452</td>
<td>1.83%</td>
<td>1,245,442</td>
<td>-90,068</td>
<td>-7.23%</td>
</tr>
<tr>
<td>ProAssurance Ind Co Inc</td>
<td>1,311,122</td>
<td>1.64%</td>
<td></td>
<td></td>
<td>-56.25%</td>
</tr>
<tr>
<td>Health Care Industry Liab Recip Ins</td>
<td>1,118,696</td>
<td>1.40%</td>
<td></td>
<td></td>
<td>48.65%</td>
</tr>
<tr>
<td>Lexington Ins Co</td>
<td>1,116,103</td>
<td>1.40%</td>
<td></td>
<td></td>
<td>-300.10%</td>
</tr>
<tr>
<td>Liberty Surplus Ins Corp</td>
<td>1,115,133</td>
<td>1.40%</td>
<td></td>
<td></td>
<td>171.65%</td>
</tr>
<tr>
<td>American Cas Of Reading PA</td>
<td>943,168</td>
<td>1.18%</td>
<td></td>
<td></td>
<td>-25.98%</td>
</tr>
<tr>
<td>Steadfast Ins Co</td>
<td>928,562</td>
<td>1.16%</td>
<td></td>
<td></td>
<td>49.03%</td>
</tr>
<tr>
<td>Ophthalmic Mut Ins Co RRG</td>
<td>885,006</td>
<td>1.11%</td>
<td></td>
<td></td>
<td>5.79%</td>
</tr>
<tr>
<td>Continental Cas Co</td>
<td>819,047</td>
<td>1.02%</td>
<td></td>
<td></td>
<td>88.89%</td>
</tr>
<tr>
<td>American Excess Ins Exch RRG</td>
<td>791,350</td>
<td>0.99%</td>
<td></td>
<td></td>
<td>29.62%</td>
</tr>
<tr>
<td>Evanston Ins Co</td>
<td>735,901</td>
<td>0.92%</td>
<td></td>
<td></td>
<td>-20.33%</td>
</tr>
<tr>
<td>Doctors Co An Interins Exch</td>
<td>676,728</td>
<td>0.85%</td>
<td></td>
<td></td>
<td>46.66%</td>
</tr>
<tr>
<td>Illinois Union Ins Co</td>
<td>650,298</td>
<td>0.81%</td>
<td></td>
<td></td>
<td>43.22%</td>
</tr>
<tr>
<td>Arch Specialty Ins Co</td>
<td>646,974</td>
<td>0.81%</td>
<td></td>
<td></td>
<td>2.29%</td>
</tr>
<tr>
<td>Medical Protective Co</td>
<td>566,516</td>
<td>0.71%</td>
<td></td>
<td></td>
<td>368.05%</td>
</tr>
<tr>
<td>National Guardian RRG Inc</td>
<td>565,699</td>
<td>0.71%</td>
<td></td>
<td></td>
<td>188.57%</td>
</tr>
<tr>
<td>General Star Ind Co</td>
<td>545,116</td>
<td>0.68%</td>
<td></td>
<td></td>
<td>37.26%</td>
</tr>
<tr>
<td>Podiatry Ins Co Of Amer</td>
<td>538,805</td>
<td>0.67%</td>
<td></td>
<td></td>
<td>46.66%</td>
</tr>
<tr>
<td>Columbus Cas Co</td>
<td>527,374</td>
<td>0.66%</td>
<td></td>
<td></td>
<td>126.88%</td>
</tr>
<tr>
<td>Physicians Specialty Ltd RRG</td>
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<td></td>
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<td>53,038</td>
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<td>-0.33%</td>
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<td>Total Med Mal Market Share</td>
<td>Direct Premium Earned</td>
<td>Direct Loss Inurred</td>
<td>Pure Direct Loss Ratio</td>
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<td>12,786</td>
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<td>Princeton Excess &amp; Surplus Lines Ins</td>
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<td>Zurich Amer Ins Co</td>
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<td>0.01%</td>
<td>10,096</td>
<td>3,722</td>
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<td>National Fire Ins Co Of Hartford</td>
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<td><strong>108 Companies in Report</strong></td>
<td><strong>79,911,782</strong></td>
<td><strong>100%</strong></td>
<td><strong>82,533,096</strong></td>
<td><strong>43,652,669</strong></td>
<td><strong>52.89%</strong></td>
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**Licensed Companies (52)**
- Total Premium: $52,322,025
  - 65.47%
- Total Loss: $54,612,281
  - 63.59%
- Total Written: $34,727,213

**Surplus Line Co's (37)**
- Total Premium: $12,311,204
  - 15.41%
- Total Loss: $12,554,684
  - 11.83%
- Total Written: $1,484,846

**Risk Retention Groups (19)**
- Total Premium: $15,278,553
  - 19.12%
- Total Loss: $15,366,131
  - 48.42%
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$Licensed Companies (13) 146 \quad 443 \quad 589$

$Surplus Line Co's (6) 9 \quad 12 \quad 21$

$Risk Retention Groups (8) 4 \quad 18 \quad 22$
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| Licensed Companies (14)                     | **125**            | **395**   | **520**     |                  |

| Surplus Line Co's (3)                       | **2**              | **7**     | **9**       |                  |

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**TOTALS**                        | 157                | 375                | 532               |

**Licensed Companies (15)**        | 140                | 316                | 456               |

**Surplus Line’s (8)**             | 17                 | 59                 | 76                |

**Risk Retention Groups (4)**      | 1                  | 10                 | 11                |
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## Historical top 10 Companies in WV Market Share for the Medical Malpractice line

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## Approved Rate Change History of Admitted Carriers for Medical Malpractice (Physicians & Surgeons unless noted)

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<th>Eff date</th>
<th>% Req'd</th>
<th>% Granted</th>
<th>WV #:</th>
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<td>8/1/2007</td>
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<table>
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<th>% Granted</th>
<th>WV #:</th>
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## 2011 West Virginia Population by County

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<th>US Census 2011 Est</th>
<th>County</th>
<th>US Census 2011 Est</th>
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<tbody>
<tr>
<td>Barbour</td>
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<td>Mineral</td>
<td>28,192</td>
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<tr>
<td>Berkeley</td>
<td>105,750</td>
<td>Mingo</td>
<td>26,563</td>
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<tr>
<td>Boone</td>
<td>24,444</td>
<td>Monongalia</td>
<td>98,528</td>
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<td>Braxton</td>
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<td>Monroe</td>
<td>13,534</td>
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<td>Brooke</td>
<td>23,844</td>
<td>Morgan</td>
<td>17,535</td>
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<td>Cabell</td>
<td>96,653</td>
<td>Nicholas</td>
<td>26,268</td>
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<td>Calhoun</td>
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<td>Ohio</td>
<td>44,246</td>
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<td>Clay</td>
<td>9,357</td>
<td>Pendleton</td>
<td>7,673</td>
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<td>Doddridge</td>
<td>8,171</td>
<td>Pleasants</td>
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<td>Pocahontas</td>
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<td>Preston</td>
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<td>Putnam</td>
<td>56,008</td>
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<td>Raleigh</td>
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<td>Taylor</td>
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Source: 2011 U.S. Census