

CHAPTER 27

MEDICAL MALPRACTICE LIABILITY INSURANCE

Authority

N.J.S.A. 17:1-8.1, 17:1-15e, 17:23-20 et seq., 17:29AA-1 et seq., 17:30D-17 et seq. and 17:32-1 et seq.

Source and Effective Date

R.2011 d.005, effective November 30, 2010.
See: 42 N.J.R. 1307(a), 43 N.J.R. 55(a).

Chapter Expiration Date

Chapter 27, Medical Malpractice Liability Insurance, expires on November 30, 2015.

Chapter Historical Note

Chapter 27, Medical Malpractice Liability Insurance, Subchapter 7, Medical Malpractice Liability Insurance Premium Assistance Fund—Premium Subsidy, was adopted as special new rules by R.2004 d.461, effective November 17, 2004. Subchapter 7, Medical Malpractice Liability Insurance Premium Assistance Fund—Premium Subsidy, was adopted as concurrent new rules by R.2005 d.186, effective May 16, 2005. See: 36 N.J.R. 5970(a), 37 N.J.R. 2207(a).

Subchapter 3, Mandatory Deductibles, was adopted as new rules by R.2005 d.167, effective June 6, 2005, (operative October 18, 2005). See: 36 N.J.R. 4875(a), 37 N.J.R. 2036(a).

Subchapter 5, Prohibited Premium Increase, Subchapter 6, Renewal and Nonrenewal Notices, and Subchapter 8, Officers, Directors and Board Members of Medical Malpractice Insurers, were adopted as new rules by R.2005 d.168, d.169 and d.170, respectively, effective June 6, 2005. See: 36 N.J.R. 4878(a), 37 N.J.R. 2038(a); 36 N.J.R. 4871(a), 37 N.J.R. 2040(a); and 37 N.J.R. 205(a), 37 N.J.R. 2041(a), respectively.

Subchapter 4, Premium Payment Installments, was adopted as new rules by R.2005 d.188, effective June 20, 2005 (operative October 18, 2005). See: 36 N.J.R. 4876(a), 37 N.J.R. 2205(b).

Subchapter 1, General Provisions, was adopted as new rules by R.2005 d.243, effective July 18, 2005. As a part of R.2005 d.243, effective July 18, 2005 (operative October 18, 2005), Subchapter 2, Optional Policy Provision—Right to Consent to Settlement, was adopted as new rules. See: 36 N.J.R. 4873(b), 37 N.J.R. 2694(a).

Subchapter 9, Medical Malpractice Liability Insurance Purchasing Alliances, was adopted as new rules by R.2005 d.268, effective August 15, 2005. See: 37 N.J.R. 1673(a), 37 N.J.R. 3043(b).

Subchapter 10, Structured Settlements and Furnishing of Bonds, was adopted as new rules by R.2006 d.278, effective August 7, 2006. See: 37 N.J.R. 2294(a), 38 N.J.R. 3178(a).

Subchapter 11, Reporting Requirements, was adopted as new rules by R.2009 d.96, effective March 16, 2009. See: 40 N.J.R. 1065(a), 41 N.J.R. 1250(b).

Subchapter 12, Corporate Governance, was adopted as new rules by R.2009 d.101, effective April 6, 2009. See: 40 N.J.R. 1067(a), 41 N.J.R. 1490(a).

Subchapter 13, Medical Malpractice Liability Insurers - Biannual Reporting of Rate Modifiers, was adopted as new rules by R.2009 d.177, effective June 1, 2009. See: 40 N.J.R. 6384(a), 41 N.J.R. 2332(a).

Chapter 27, Medical Malpractice Liability Insurance, was readopted as R.2011 d.005, effective November 30, 2010. See: Source and Effective Date.

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Exhibit 1

**DEPARTMENT OF BANKING AND INSURANCE
MEDICAL MALPRACTICE DATA CALL - PHYSICIANS AND SURGEONS - PREMIUM MODIFIERS
SEMI-ANNUAL REPORT AS OF JUNE 30, FOR POLICIES EFFECTIVE BETWEEN JANUARY 1 AND JUNE 30,
AND AS OF DECEMBER 31, FOR POLICIES EFFECTIVE BETWEEN JULY 1 AND DECEMBER 31.**

Renewal business.....

(1) Policy Count	(2) Predominant Specialty	(3) ISO Code	(4) Individual(I) or Group(G)	(5) Separate Limit for Corporation (Y/N) Expiring Renewing	(6) Policy Effective Date	(7) Expiring		(8) Modification		(9) Renewal		(10) Modification		(11) Dollar Change Attributable to Modification Change (14)x(10)	(12) Rate Change Attributable to Modification Change [(1+(12))/(1+(9))]-1	(13) Reasons for Change	
						Manual	Charged	(8)/(7)-1	Manual	Charged	(11)/(10)-1	Marketing/ Competition Y/N	Others- Describe				

Renewals Lost to Competitors.....

(1) Policy Count	(2) Predominant Specialty	(3) ISO Code	(4) Individual(I) or Group(G)	(5) Separate Limit for Corporation (Y/N) Expiring Quoted	(6) Policy Effective Date	(7) Expiring		(8) Lost Quote		(9) Dollar Change Attributable to Modification Change (14)x(10)	(10) Rate Change Attributable to Modification Change [(1+(12))/(1+(9))]-1	(11) New Insurer		
						Manual	Charged	(8)/(7)-1	Manual				Quoted	(11)/(10)-1

New Business Written.....

(1) Policy Count	(2) Predominant Specialty	(3) ISO Code	(4) Individual(I) or Group(G)	(5) Separate Limit for Corporation (Y/N)	(6) Policy Effective Date	(7) Newly Written		(8) Reasons for Modification		(9) Prior Insurer	
						Manual	Charged	Modification (8)/(7)-1	Marketing/Competition (Y/N)		Others-Describe

Manual Rate Components (applied uniformly to all qualifying insureds)

Base Rates; Tier Factors; Territorial Factors; Limits Factors; Deductible Factors;
Consent to Settle Discounts; Claims-Made Step Factors; Prior Acts Factors;
Part Time Discounts; Moonlighting Credits/Discounts; Limited Practice Discount;
New Doctor Discounts; Intern, Resident, Fellow Discounts; Teaching Discounts;
Risk Management Discounts; Experience Rating Surcharges/Discounts;
Loss Free Discounts; Size of Risk Discounts (if applied uniformly)

plus, all other factors applied uniformly to all insureds who meet the qualification(s).

Non-Manual Rate Components

Schedule Rating Surcharges/Discounts; Individual Risk Rating Surcharges/Discounts;
Size of Risk Discounts (if not applied uniformly); Negotiated Commissions;
Negotiated Profit Loads

plus, all other factors that are not applied uniformly to all insureds who meet the qualification(s).