

DEPARTMENT OF BANKING AND INSURANCE  
 MEDICAL MALPRACTICE DATA CALL - PHYSICIANS AND SURGEONS - PREMIUM REDUCTIONS  
 POLICIES EXPIRING BETWEEN DECEMBER 31, 2006 AND MARCH 31, 2007

Exhibit 1

PURPOSE: THIS REPORT IDENTIFIES POLICIES WHERE THE RENEWAL PREMIUM IN 2007, FIRST QUARTER,  
 WAS THE SAME OR LOWER THAN THE PREMIUM ON THE EXPIRING POLICY THAT WAS RENEWED.

WITHIN THIS GROUP, PROVIDE THE DETAILS SHOWN FOR ONLY THOSE POLICIES WHERE THE  
 RENEWAL PREMIUM AT MANUAL RATE LEVEL (\*) WOULD HAVE INCREASED, BUT INSTEAD,  
 THE RENEWAL PREMIUM STAYED THE SAME OR DECREASED.

THIS REPORT MUST BE SIGNED BY AN OFFICER OF THE INSURER.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
POLICY COUNT	SPECIALTY	SPECIALTY CODE	INDIV (I) OR GROUP(G)	POLICY DATE	EFFECTIVE PREMIUM	EXPIRING PREMIUM	DOLLAR AMOUNT OF DECREASE	PERCENT OF DECREASE	REASONS FOR DECREASE		
							(6) - (7)	(7)/(6) - 1.0	MARKETING/ COMPETITION	OTHER(S) (DESCRIBE)	
1		XXXXX		MM/DD/YY	:XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XX.XX%	YES/NO		
2											
3											
4											
ETC											
ALL OTHER COMBINED	-----	-----	I/G	-----	:XXXXXXXX	XXXXXXXXXX	-----	-----	-----	-----	-----
TOTAL	-----	-----	I/G	-----	:XXXXXXXX	XXXXXXXXXX	-----	-----	-----	-----	-----

COLUMN 2: WORD DESCRIPTION

COLUMN 3: SPECIALTY CODES SHOULD BE BASED ON ISO MEDICAL MALPRACTICE CLASS CODES.

(\*) MANUAL RATE LEVEL MEANS FILED RATES PLUS ANY "OBJECTIVE" RATING FACTORS, I.E., EVERY INSURED  
 WHO QUALIFIES FOR THE RATING FACTOR RECEIVES IT.