Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line 11 - Med Mal (MD) (Line of Insurance)	23,041,569	-3.8%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): The filing includes a revision to the Claim Free Credit rule for the Physicians & Surgeons Program, the overall rate impact is -3.8%.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

The Medical Protective Company
Name of Company

Angela Adams, Counsel & Assistant Secretary
Official – Title

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DEC 07 2010
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FILING# 10-IL-143