Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/22/2010

(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	$144,707	-47%
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 medical malpractice		

Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
All Territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): dental
The filing proposes to revise the rating plan with changes to the base rate, territory factors, class plan factors policy type factors, increased limit factors, minimum premiums and new dentist discount factors. In addition, deductible factors, Academy of General Dentistry Membership credits, American Dental Association Member credits, group discounts and additional coverage options have been added to the rate plan. Please see the attached side by side comparison.

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

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STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

National Union Fire Insurance Company of Pittsburgh, Pa.
Name of Company

Adam C. Reed - Vice President
Official-Title

H29219D

FILING# AIC-08-EO-10

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag 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 medical malpractice	951,128	2.80%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: all territories and classes

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): base rate change, class plan change, addition of community based hospital program and revisions to various other rating components

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

ProAssurance Casualty Company
Name of Company

LaQuita B. Goodwin, Compliance Specialist
Official – Title

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DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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