University of Cincinnati Physicians  
Medical Malpractice  
Roster Report - Cross Reference as of July 1, 2017

2017-18 BASE RATE PREMIUM

CLASS 1 “PURE” BASE RATE ................................................................. $5,549.33  
CLASS 1 “DISCOUNTED” BASE RATE .............................................. $2,414.32

CATEGORY

FACULTY PHYSICIAN................................................................. PHYS
NON-FACULTY PHYSICIAN......................................................... NFP
FELLOW............................................................... FEL
MISCELLANEOUS MID-LEVEL PROVIDER/ MEDICAL STAFF........ MISC
VOLUNTEER FACULTY PHYSICIAN............................................ VFP
NON-EMPLOYEE EXCEPTION SHEET............................................. NEES

* Please note: As of July 1, 2017 the special services category has been eliminated and individual physicians will be charged a minimum rate for their risk class at the request of the College of Medicine (COM).

PHYSICIAN NAME - Self-explanatory

SPECIALTY - Physicians, surgeons and other plan participants bear the most appropriate descriptions as provided by the practice plan departments

EFFECTIVE DATE - Date enrolled in the current plan

TERMINATION DATE - Date terminated from the current plan from salary dec provided by College of Medicine

RATE CODE - Premium class in accordance with the Medical Liability Mutual Insurance Rating Classifications

RELATIVITY - Premium Rate related to the Rate Code and provided by the actuary

APPLIED BASE RATE (CALCULATED PREMIUMS VARY BY CATEGORY)

PHYS = RELATIVITY * DISCOUNTED BASE RATE
NFP = RELATIVITY * DISCOUNTED BASE RATE * 30%
FEL = DISCOUNTED BASE RATE * 75%
MISC = RELATIVITY * DISCOUNTED BASE RATE

PRORATED AMOUNT

PHYS = Applied Base Rate * Clin effort percentage)/(365*No Days in Program)
NFP = [Applied Base Rate * (Clin effort percentage * 1.3)]/(365*No Days in Program)

MINIMUM AMOUNT = DISCOUNTED BASE RATE * (0.05/365) * # OF DAYS IN PROGRAM
APPLIED AMOUNT = GREATER OF PRORATED AMOUNT OR MINIMUM AMOUNT
NUMBER OF DAYS IN PROGRAM = TERMINATION DATE MINUS EFFECTIVE DATE

NOTE: ALL PARTICIPANTS TERMINATED PRIOR TO THE END OF THE POLICY PERIOD WILL REMAIN ON THE DEPARTMENT’S ROSTER FOR THE ENTIRE YEAR. HOWEVER, THEIR BILLING IS PRORATED AND TOTAL PREMIUM CHARGES WILL REFLECT THE NUMBER OF DAYS IN THE PROGRAM, SUBJECT TO THE MINIMUM AMOUNT.