

GIRO XXX 2003 Convention

US D&O and PI 14-17 October 2003 City Hall, Cardiff

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The Actuarial Profession making financial sense of the future

GIRO XXX 2003 Convention

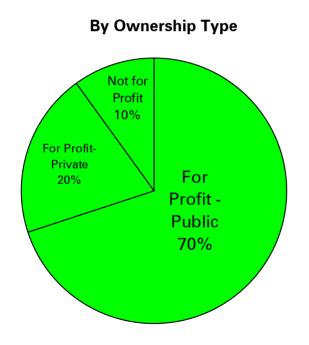
US D&O, E&O and Med-Mal Liability Douglas Collins 14-17 October 2003 City Hall, Cardiff

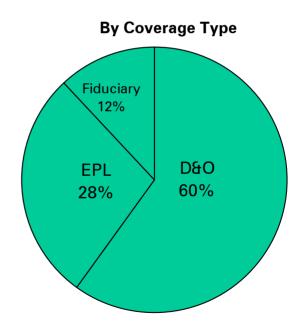
The D&O Insurance Market

- Directors & Officers Liability
 - A. Personal coverage
 - B. Corporate reimbusement coverage
 - C. Entity coverage
- Employment practices liability
- Fiduciary liability

Public insureds represent the largest share of the market

Estimated 2002 Distribution of Premium by Segment

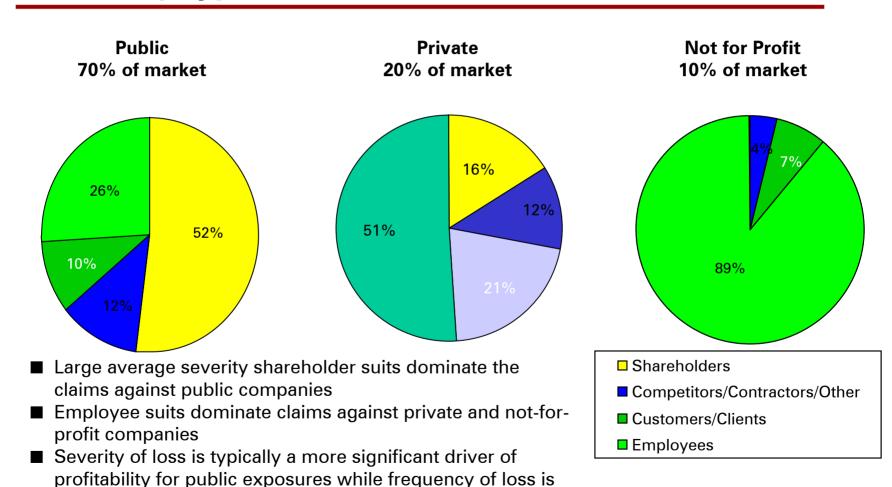




2002 D&O Liability Survey

- Survey of claim and purchasing patterns
- Reflects market in second half of 2002
- 2187 US participants
 - 44% 500 or more shareholders
 - 42% under 500 shareholders
 - 14% not for profit
- Annual update of survey that began over 20 years ago

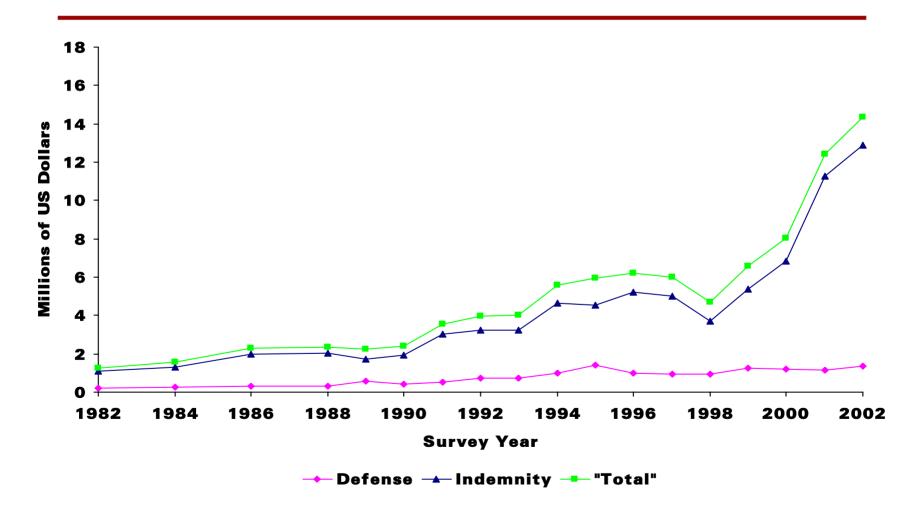
Claimant distribution varies significantly by ownership type



Source: 2002 Tillinghast D&O Survey (distribution of number of claims)

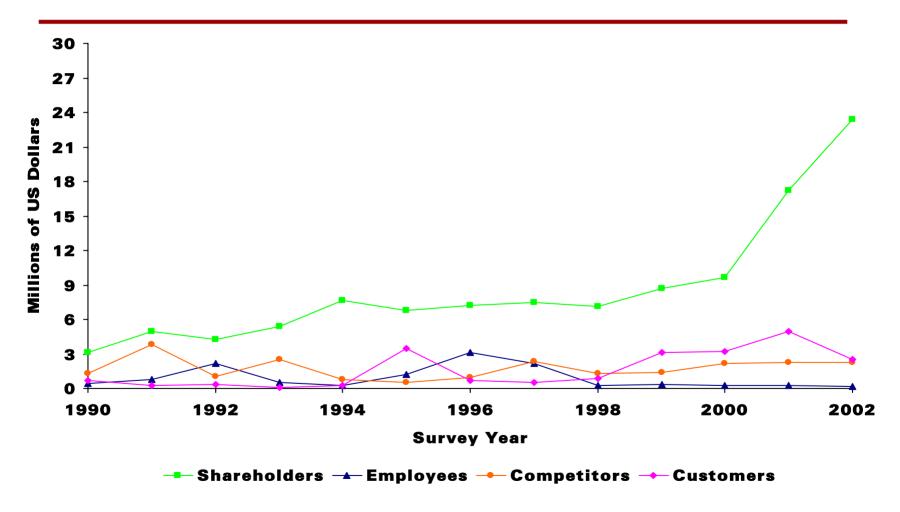
more of an issue for the profitability of private exposures

Average Claim Severity – For-Profit Risks



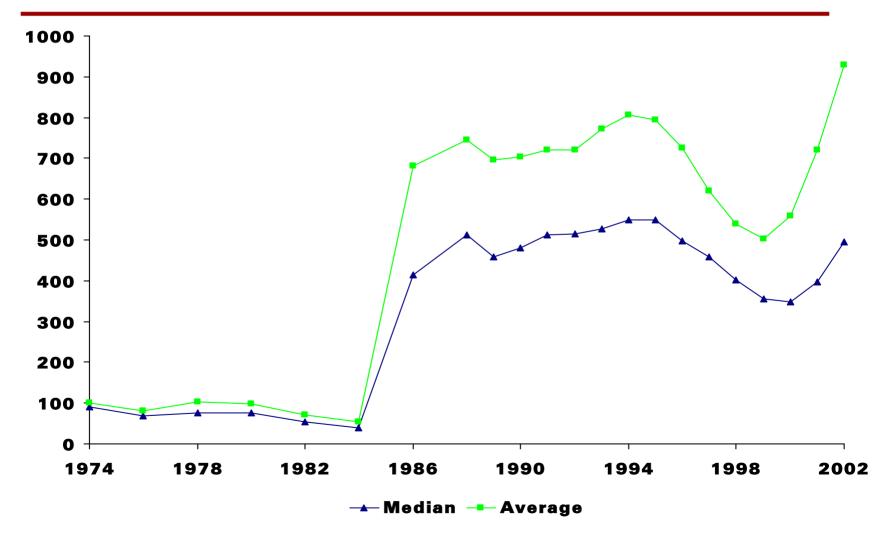
Source: 2002 Tillinghast D&O Survey. Severity of claims closed with payment.

Average Indemnity Severity by Claimant Type



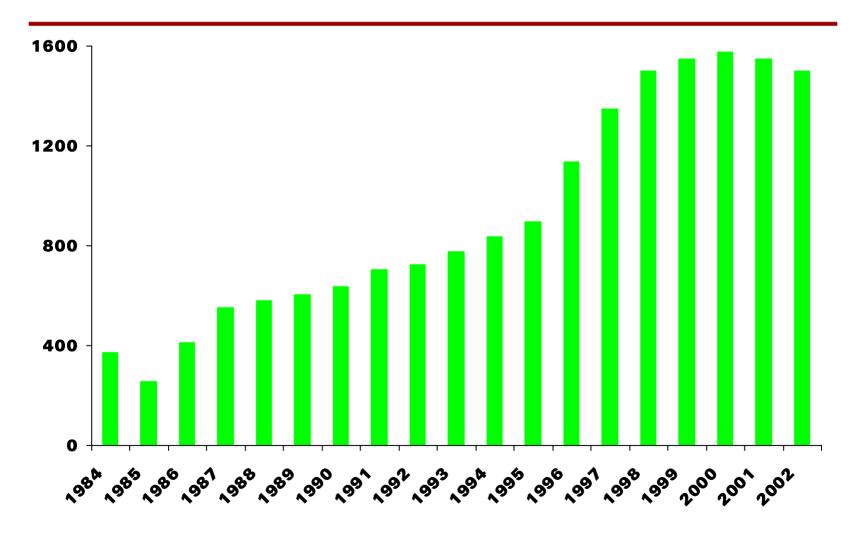
Source: 2002 Tillinghast D&O Survey. Severity of claims closed with payment.

D&O Premium Index – US, For-Profit Only



Source: 2002 Tillinghast D&O Survey.

Full D&O Limits Capacity (\$ Millions)



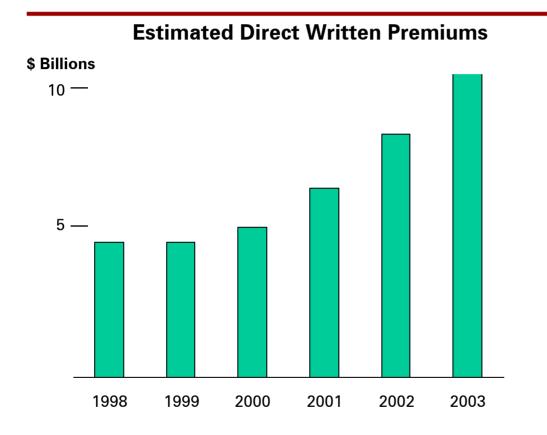
Source: 2002 Tillinghast D&O Survey.

Typical Limits and Retentions

Type / Size	Limits	Retentions
NFP,	\$1m to \$10m	\$5k to \$250k
FP< 500sh	\$1m to \$10m	\$3K tO \$23UK
FP > 500sh		
<\$1B mkt	\$10m to \$50m	\$250k to \$1m
cap		
FP > \$1B mkt	Over \$50m	\$1m to \$5m+
cap		φιπιο φυπι

Source: 2002 Tillinghast D&O Survey.

D&O Market Premiums have doubled since 2000

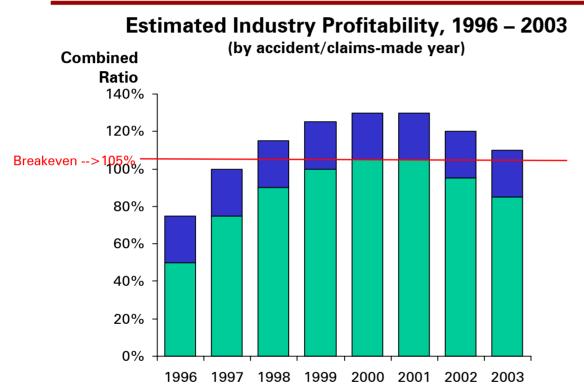


Growth Drivers

- Rapidly increasing rates
- Coverage terms and availability, which were generally broadening during the 1990's, contracted in 2002

Source: A.M. Best; industry press, Tillinghast estimates. Note: These are midpoints of a range of estimates, e.g., 2000 base range is \$4 billion to \$6 billion. As D&O financial results are combined with other liability coverages in the Annual Statement, precise figures are not available.

After several years of deteriorating results, the D&O market appears to be improving due to significant rate increases



Key Trends

- Increasing claim frequency and severity changes will partially offset strengthening
- Breakeven based on opportunity cost approach

Loss & LAE Ratio Combined Ratio (25% underwriting expense ratio)

Source: Tillinghast estimates of loss ratios. A.M. Best for expense ratios.

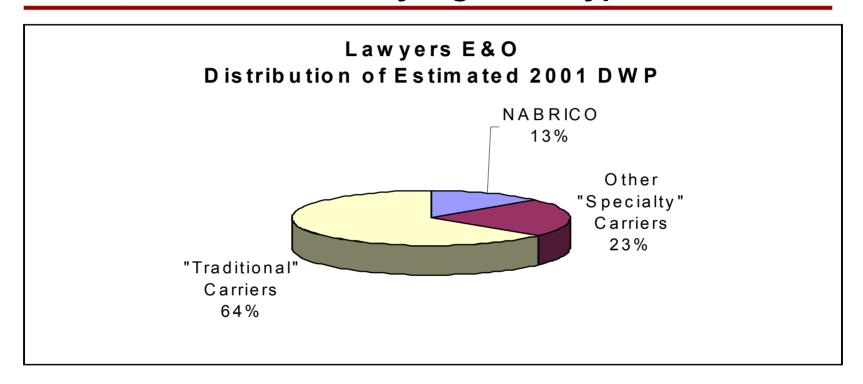
Drivers of D&O Performance

- Legislation, SEC regulations and court rulings
 - Impact of Private Securities Litigation Reform Act of 1995 ("PSLRA")
 - Sarbanes-Oxley, SEC certification requirement (2002)
- Changes in loss costs
 - Frequency of class actions
 - Timing and severity of securities claims
 - EPL trends
- Insured type or behaviour
 - M&A or IPO activity
 - Rating downgrades
 - Restatement of financial results
- Pricing trends
- Economic conditions
 - Bankruptcies, layoffs, stock market decline

The E&O Liability Market

"Traditional" Specialty Areas	Estimated 2001 DWP (000)
Lawyers Professional Liability Accountants Professional Liability Architects & Engineers Professional Liability Insurance Agents/Brokers Professional Liability	\$1,000,000 400,000 400,000 150,000
Subtotal "Traditional" Specialty Areas	\$1,950,000
Other Miscellaneous Professional Liability	\$800,000

The Lawyers E&O market totals approximately \$1.0 billion, and is serviced by 3 general types of insurers



A large number of "traditional" carriers write Lawyers E&O...

Admiral

Carolina Casualty

Deerfield Evanston American Equity

Northland

AIG/Lexington

AIG/National Union

Hartford/Nutmeg

Colony

Preferred National

Chicago

Interstate

Liberty Mutual

St. Paul

CNA

Philadelphia

Old Republic

Star

Chubb/Executive Risk

Redland

Tudor

Clarendon

Royal/DPIC

United National

Great American

SAFECO

W estport

Travelers/Gulf

Scottsdale

Zurich

Kemper

Source: Crittenden's Specialty Coverages Insider and conversations with Tillinghast clients.

In addition, the following are significant Lawyers E&O "speciality" insurers

American National Lawyers Insurance Reciprocal RRG

Association of Trial Lawyers Assurance RRG

Attorneys Insurance Mutual of Alabama

Attorneys Insurance Mutual RRG

Attorneys Liability Assurance Society RRG

Attorneys Liability Protection Society RRG

Bar Plan Mutual Insurance Company

Florida Lawyers Mutual Insurance Company

Illinois State Bar Association Mutual Insurance Company

Lawyers Mutual Insurance Company

Lawyers Mutual Insurance Company of Kentucky

Lawyers Mutual Insurance Company of North Carolina

Legal Mutual Liability Insurance Society of Maryland

Michigan Lawyers Mutual Insurance Company

Minnesota Lawyers Mutual Insurance Company

Ohio Bar Liability Insurance Company

Oklahoma Attorneys Mutual Insurance Company

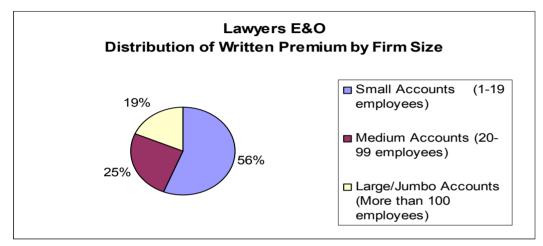
Oregon State Bar Professional Liability Fund

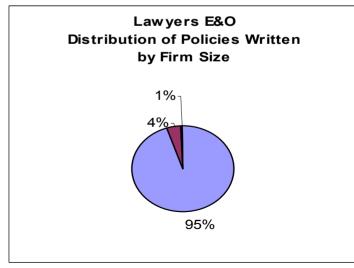
Texas Lawyers Insurance Exchange

Wisconsin Lawyers Mutual Insurance Company

Source: NABRICO, AMBest's, Crittenden's Specialty Coverages Insider

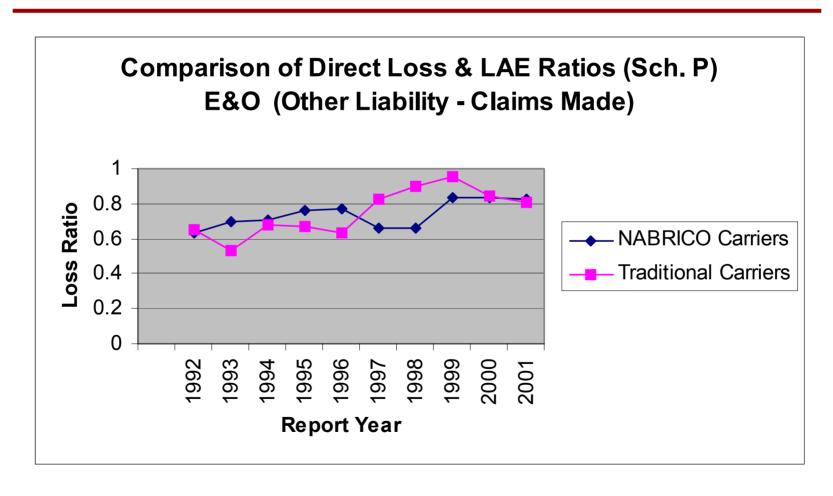
Small firms comprise the majority of the Lawyers E&O market





Source: IMR Data

Recent loss ratios for Lawyers E&O have been similar for NABRICO and traditional carriers



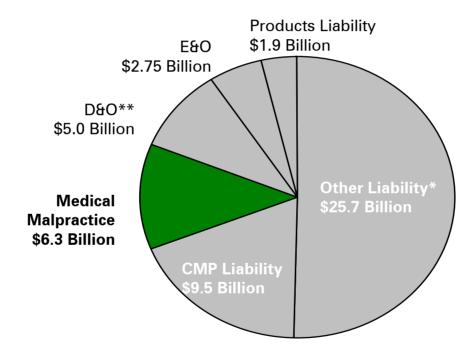
Drivers of E&O performance

- Overall economic outlook
 - Claim activity generally increases in certain practice areas as the economy slows
 - Lower investment returns increase pressure for rate adequacy
- Insured demographics
 - Practice areas/location/firm size/internal controls
- Evolving case law/jury attitudes/legal trends
- Specific market conditions
 - Coverage changes
 - Pricing trends

Source: Crittenden's Specialty Coverages Insider, industry press.

Medical malpractice is the largest professional liability line, accounting for \$6.3 billion in DWP in 2000

Total Commercial Liability Premiums, Excluding Auto Liability



2000 DWP: \$53 Billion

^{*}Consists predominantly of premises and completed operations coverages; also includes umbrella, excess and some non-medical malpractice professional liability written on an occurrence basis.

^{**}Includes D&O, fiduciary and employment practices liability coverages.

Source: A.M. Best; Tillinghast estimates.

OFFICIAL SYMPATHY SURVEY

In the Continuing Battle Over Medical Malpractice Costs, Whom Do You Feel Sorry for?



A. The poor, downtrodden doctors



B. The lowly, underpaid lawyers



C. The small, struggling insurance industry

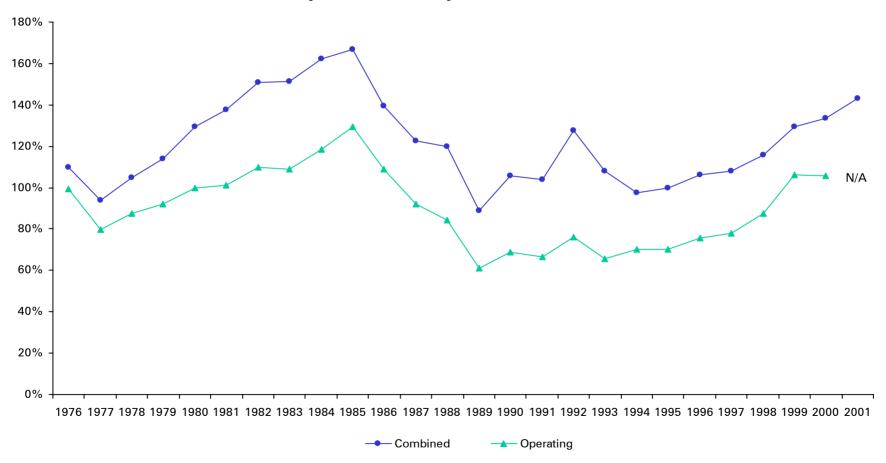
Note: You can only vote for one.

WASHEMAN BUT FRIENDS.

Financial Results

Combined ratios and operating ratios for the line have deteriorated steadily since 1994

Industry Medical Malpractice Ratios, CY Basis



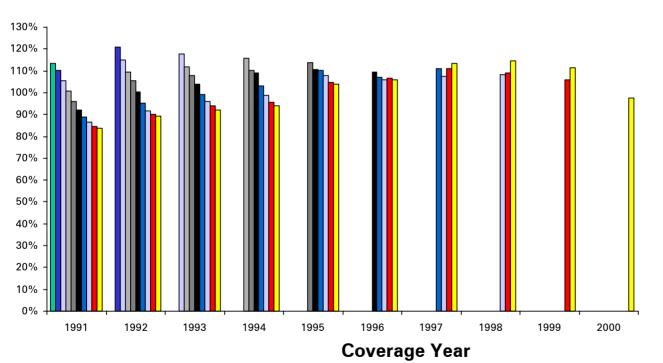
Source: A.M. Best.

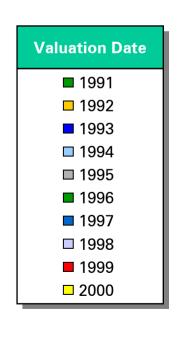
Financial Results

Reserve redundancies are masking the true deterioration of results as carriers steadily draw down reserves set aside for business written in the early 1990s

• Reserves appear to have turned deficient sometime in the past two to three years

Ultimate Projected Loss at Different Valuation Points Coverage Years 1991 – 2000

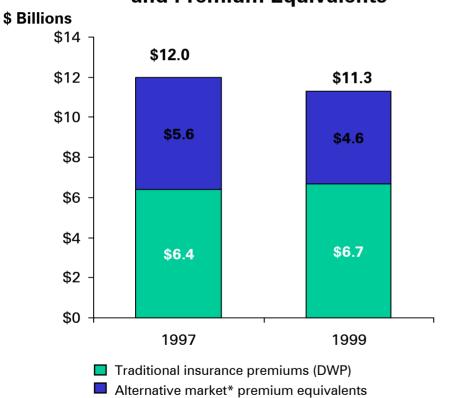




Source: A.M. Best's Aggregates & Averages, Net Loss and DCC Schedule P Part 2 — Occurrence and Claims Made.

The importance and size of alternative markets has fluctuated over time with changes in market conditions

Medical Malpractice Premiums and Premium Equivalents



Commentary

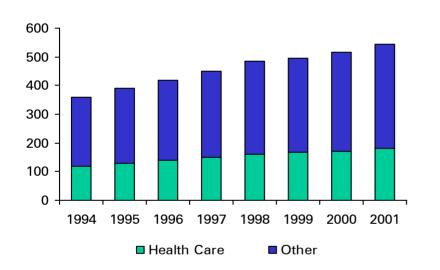
- Total medical malpractice premiums and premium equivalents contracted between 1997 and 1999 with rate reductions in the traditional markets causing movement out of ART market
- As market conditions have hardened, premiums are shifting back to the alternative markets
 - The number of captives grew 2.4% in 2000 and 5.9% in 2001

Source: For alternative market premium equivalents: Conning, "Medical Malpractice Insurance, A Prescription for Chaos," 2001; For traditional insurance premiums (DWP): A.M. Best's Aggregates & Averages, Schedule P Part I.

^{*}Includes off-shore premiums, premiums written by individual state JUAs and amounts paid to fund alternative risk management programs, such as trusts and risk retention groups.

A substantial portion of the alternative market is managed through captives domiciled in the Cayman Islands

Growth in Cayman Captives



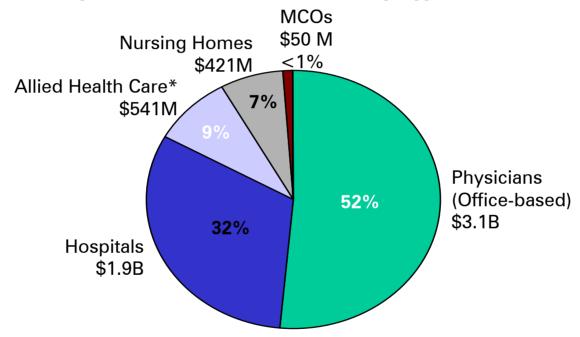
Health Care Captives in the Cayman Islands by Type — 2000

Type of Captive	Number	Premium Volume	Assets
Hospital System	126	\$680,354,244	\$3,900,568,348
Physician Group	34	\$26,339,037	\$169,649,263
Long-term Care	20	\$41,348,283	\$63,382,269
Total	180	\$748,041,564	\$4,133,599,880

Source: Cayman Islands Monetary Authority; Tillinghast estimates.

The physicians market accounts for the largest share of traditional premiums; health systems typically utilize alternative mechanisms to manage their liability exposure

Medical Malpractice Estimated Premium by Type of Customer, 1999



In addition to traditional premiums of \$1.9 billion, hospitals paid between \$4 billion and \$5 billion to fund alternative risk programs in 1999

^{*}Includes all non-M.D. practicioners, with dental being the largest portion.

Source: Conning, "Medical Malpractice Insurance, A Prescription for Chaos," 2001.

The top 10 writers account for roughly 46% of total medical malpractice premiums

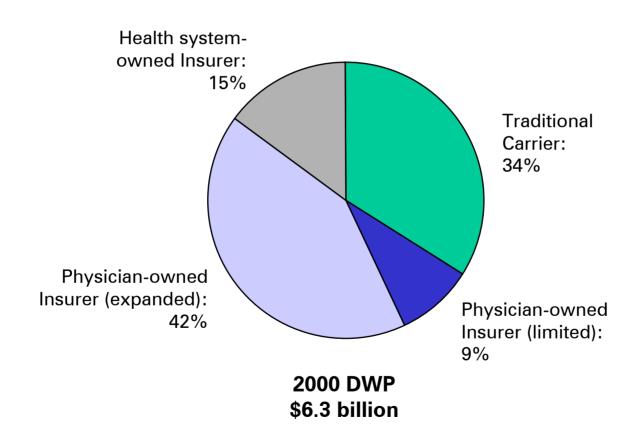
		2000 Direct Written Premium*	
	Group	\$Millions	\$ Total
1	St Paul Companies	\$575	9.1%
2	MLMIC Group	\$500	7.9%
3	GE Capital Insurance Group	\$321	5.0%
4	Health Care Indemnity Inc	\$243	3.9%
5	CNA Insurance Companies	\$232	3.7%
6	Zurich/Farmers Group	\$212	3.7%
7	NORCAL Group	\$210	3.4%
8	MIIX Group	\$205	3.3%
9	Doctors Company Ins Group	\$205	3.3%
10	PHICO Group	\$182	2.9%
Top 10		\$2,911	46%
Top 20		\$4,323	69%
Top 30		\$5,154	82%

^{*}Calendar year data based on a group (vs. individual company) basis. Source: A.M. Best's Aggregates & Averages.

Competitive Landscape

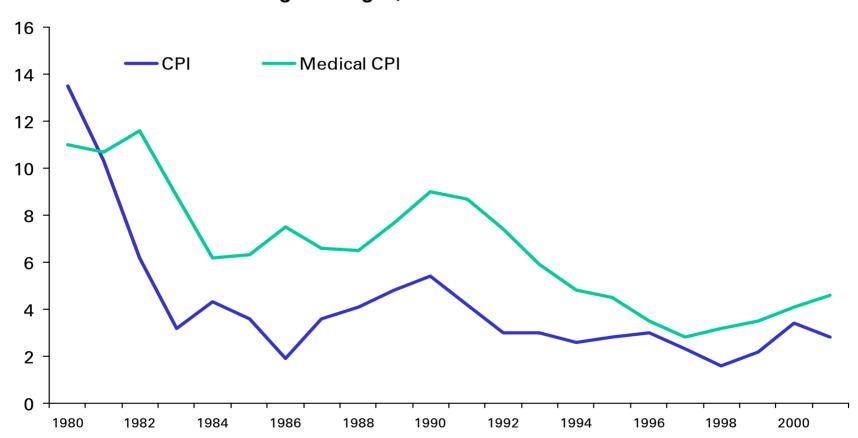
Physician-owned carriers account for half of traditional medical malpractice premiums

Medical Malpractice Premiums, By Type of Insurer



Issues and Opportunities Rising overall health care costs

YOY Percentage Changes, CPI vs. Medical CPI: 1980 – 2001

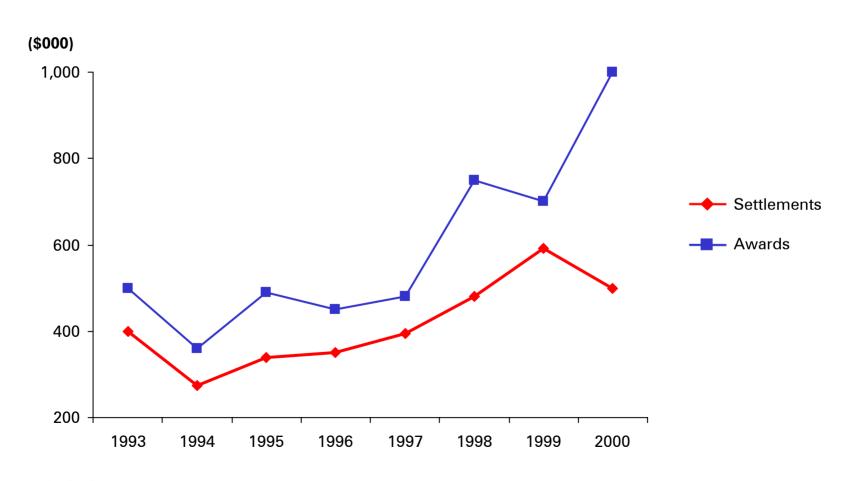


Source: Bureau of Labor Statistics.

Financial Results

Changes in the judicial environment and the health care system in general have led to a significant rise in malpractice awards and settlements

U.S. Median Medical Liability Awards and Settlements



Source: Jury Verdict Research.

Sample large rewards: 1997 versus 2000 - 2001

1997		
June, Queens County, NY	\$27,570,327	
March, Boone County, KY	\$23,530,746	
November, Queens County, NY	\$19,275,466	
September, Dade County, FL	\$18,924,000	
May, LA County, CA	\$15,700,000	
April, Oakland County, MI	\$15,317,000	
December, Philadelphia County, PA	\$15,000,000	
June, Cuyahoga County, OH	\$14,460,000	
May, US District, HI	\$12,381,670	
February, Kings County, NY	\$11,500,000	
April, Orange County, CA	\$10,952,696	
October, Beaumont County, TX	\$10,900,000	

2000 – 2001	
January 2001, Dallas County, TX	\$269,000,000
May 2001, Bronx County, NY	\$108,000,000
January 2001, Philadelphia County, PA	\$100,000,000
May 2001, Nassau County, NY	\$75,000,000
March 2000, Los Angeles County, CA	\$60,686,150
January 2001, Philadelphia County, PA	\$49,594,684
August 2000, Kings County, NY	\$41,444,531
June 2000, TX	\$32,676,410
September 2000, Escambia County, FL	\$31,100,000
December 2000, New Haven, CT	\$30,000,000
July 2000, Cuyahoga County, OH	\$23,500,000
September 2000, Philadelphia County, PA	\$22,400,000

Source: Jury Verdict Research and West Law.

Financial Results

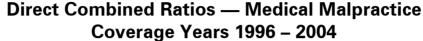
Factors contributing to the rising trend in medical malpractice liability awards and settlements

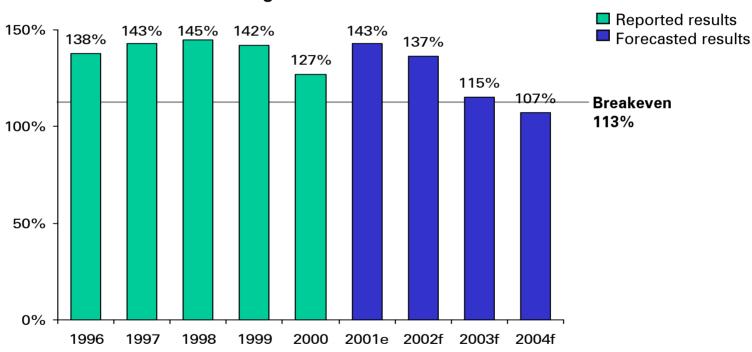
- Rise in public distrust of the medical profession and publicity about the number of medical errors
 - Public believes standards are declining, though actual malpractice is relatively rare
- Growth in patient advocacy and the popularity of patients rights bills
 - Overall, the public is very strongly in favor of specific consumer protections
 - According to a Kaiser survey*, 70% of those consumers surveyed think patients should be able to sue a health plan for malpractice
- Changes in the judicial environment
 - Easier to litigate and find counsel
 - Well funded and savvy plaintiff's bar
- Advent of managed care
 - Focus shifted from committed medical acts to omitted medical acts (i.e., refusal to treat and failure to diagnose)
 - Failure to diagnose breast cancer is now a leading cause of malpractice claims**
 - Loss of "intimacy" between doctor and patient
 - Primary care physicians pushed to see more patients
 - Expectations changed

^{*}Source: Kaiser Family Foundation Public Opinion Update (Document No. 1500) 2001.

^{**}Source: Physicians Insurers Association of America (PIAA) claims report.

2001 results deteriorated significantly, as the industry took the opportunity to strengthen reserves





Key success factors

- Affinity
- Home field advantage
 - Knowledge of medical providers
 - Knowledge of venues/rules
 - Access to defense counsel of choice
 - Politically active
 - Access to regulators
- Access to brokers that understand the business
- Proactive risk management culture in health system
 - Buy-in by senior management
 - Buy-in by medical staff
- Aggressive claims handling
 - Commitment to defend
 - Pool of experts
- Get price right