

Filing at a Glance

Companies: Executive Risk Indemnity Inc., Federal Insurance Company

Product Name: ForeFront Portfolio and Power SERFF Tr Num: CHUB-125211377 State: Arkansas

Source for Health Care

TOI: 17.0 Other Liability - Claims

SERFF Status: Closed

State Tr Num: AR-PC-07-025344

Made/Occurrence

Sub-TOI: 17.0006 Directors & Officers Liability Co Tr Num: DO AR0036310R01

State Status:

Filing Type: Rate

Co Status:

Reviewer(s): Betty Montesi, Edith Roberts

Authors: Donna Ronan, Lois

Disposition Date: 07-06-2007

Schroeder, Christina Cresenzi

Date Submitted: 07-05-2007

Disposition Status: Filed

Effective Date Requested (New): On Approval

Effective Date (New):

Effective Date Requested (Renewal): On Approval

Effective Date (Renewal):

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number: 00363

Domicile Status Comments:

Reference Organization: NA

Reference Number: NA

Reference Title: NA

Advisory Org. Circular: NA

Filing Status Changed: 07-06-2007

State Status Changed: 07-06-2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

In accordance with the laws of the State of Arkansas, we are filing additional industry codes applicable to the above products. These products were approved by the Department effective January 21, 2004 under our filing designation number DO AR0006610R01.

A corresponding form filing is being filed under DO AR0036310F01.

Enclosed are the following:

Required State Forms (if applicable)

Actuarial Memorandum

Rating page

We propose to implement this filing for all policies effective upon your earliest review and approval. Should you have any questions, please call me at the number identified below.

Company and Contact

Filing Contact Information

Donna Ronan, Support Specialist
82 Hopmeadow Street
Simsbury, CT 06070-7683

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(800) 464-7965 [Phone]
(860) 408-2047[FAX]

Filing Company Information

Executive Risk Indemnity Inc.
82 Hopmeadow Street
Simsbury, CT 06070
(800) 464-7965 ext. [Phone]

CoCode: 35181
Group Code: 38
Group Name:
FEIN Number: 13-2912259

State of Domicile: Delaware
Company Type:
State ID Number:

Federal Insurance Company
202 Hall's Mill Road
P.O. Box 1650
Whitehouse Station, NJ 08889-1650
(908) 572-4726 ext. [Phone]

CoCode: 20281
Group Code: 38
Group Name:
FEIN Number: 13-1963496

State of Domicile: Indiana
Company Type:
State ID Number:

Filing Fees

Fee Required? Yes
Fee Amount: \$200.00
Retaliatory? No
Fee Explanation: 100.00 per company
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
00362503	\$100.00	06-06-2007
00362871	\$100.00	06-25-2007

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	07-06-2007	07-06-2007

Disposition

Disposition Date: 07-06-2007

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
Executive Risk Indemnity Inc.	0.000%	\$0	0	\$0	0.000%	0.000%	0.000%
Federal Insurance Company	0.000%	\$0	0	\$0	0.000%	0.000%	0.000%

Item Type	Item Name	Item Status	Public Access
Supporting Document	Actuarial memo	Filed	Yes
Rate	HC Crime Exhibit	Filed	Yes

Rate Information

Rate data applies to filing.

Filing Method: prior approval
Rate Change Type:
Overall Percentage of Last Rate Revision: 0.000%
Effective Date of Last Rate Revision:
Filing Method of Last Filing: N/A

Company Rate Information

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
Executive Risk Indemnity Inc.	0.000%	\$0	0	\$0	0.000%	0.000%	0.000%
Federal Insurance Company	0.000%	\$0	0	\$0	0.000%	0.000%	0.000%

Overall Rate Information for Multiple Company Filings

Overall % Rate Indicated: 0.000%
Overall Percentage Rate Impact For This Filing: 0.000%
Effect of Rate Filing - Written Premium Change For This Program: \$0
Effect of Rate Filing - Number of Policyholders Affected: 0

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	HC Crime Exhibit	N/A	New	Plan A.pdf

ForeFront Portfolio SM
Power Source SM

Federal Insurance Company

Executive Risk Indemnity Inc.

Industry Factors for Health Care – Crime Coverage Section

Description	SIC	Factor
OFFICES & CLINICS OF MEDICAL DOCTORS	8011	0.90-1.25
OFFICES AND CLINICS OF DENTISTS	8021	0.90-1.25
OFFICES OF OSTEOPATHIC PHYSICIANS	8031	0.90-1.25
OFFICES AND CLINICS OF CHIROPRACTORS	8041	0.90-1.25
OFFICES AND CLINICS OF OPTOMETRISTS	8042	0.90-1.25
OFFICES AND CLINICS OF PODIATRISTS	8043	0.90-1.25
OFFICES OF HEALTH PRACTITIONERS, NEC	8049	0.90-1.25
SKILLED NURSING CARE FACILITIES	8051	0.90-1.25
INTERMEDIATE CARE FACILITIES	8052	0.90-1.25
NURSING AND PERSONAL CARE, NEC	8059	0.90-1.25
MEDICAL LABORATORIES	8071	0.90-1.25
DENTAL LABORATORIES	8072	0.90-1.25
HOME HEALTH CARE SERVICES	8082	0.90-1.25
KIDNEY DIALYSIS CENTERS	8092	0.90-1.25
SPECIALTY OUTPATIENT CLINICS, NEC	8093	1.10-1.25
HEALTH AND ALLIED SERVICES, NEC	8099	0.90-1.25

Supporting Document Schedules

Satisfied -Name:	Actuarial memo	Review Status:	
Comments:		Filed	07-06-2007
Attachment:			
FFP-PS actuarial 363.pdf			

ForeFront Portfolio SM Power Source SM

Federal Insurance Company
Executive Risk Indemnity Inc.

Actuarial Memorandum

We are making two changes to the Forefront Portfolio SM / Power Source SM in this filing.

First, in the Crime coverage section, we propose to add Industry Factors for Health Care related SICs. These factors were inadvertently left out in the previous filings. See the attached exhibit.

Second, we propose to offer two omnibus endorsements. The first will offer a sublimit of regulatory coverage for D&O while the second will exclude regulatory coverage for D&O. The first will have a 5% credit while the second will have a 10% credit, to be applied to the D&O premium. These will appear in the optional coverage enhancements section for D&O as follows:

3. Regulatory Coverage Options	
Regulatory Coverage Sublimit	0.95
Regulatory Coverage Exclusion	0.90

All other coverage parts of these products are unchanged with this filing.