

### NAIC LOSS COST DATA ENTRY DOCUMENT

<b>1.</b>	This filing transmittal is part of Company Tracking #	<b>07-R2181</b>
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<b>2.</b>	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	<b>This is not a loss cost filing.</b>
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Company Name		Company NAIC Number		
<b>3.</b>	<b>A.</b>	<b>Continental Casualty Company</b>	<b>B.</b>	<b>20443</b>

Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)		
<b>4.</b>	<b>A.</b>	<b>Medical Malpractice Insurance</b>	<b>B.</b>	<b>Hospital Professional Liability</b>

<b>5.</b>			FOR LOSS COSTS ONLY				
(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
<b>HPL</b>	<b>0</b>	<b>0</b>					
<b>TOTAL OVERALL EFFECT</b>							

5 Year History		Rate Change History					
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
<b>2002</b>	<b>0</b>	<b>24.1</b>	<b>3/15/02</b>	<b>981,311</b>	<b>696,705</b>	<b>.710</b>	<b>.781</b>
<b>2003</b>	<b>1</b>	<b>24.1</b>	<b>9/3/02</b>	<b>3,490,608</b>	<b>2,196,148</b>	<b>.629</b>	<b>.602</b>
<b>2004</b>	<b>52</b>	<b>24.1</b>	<b>3/3/03</b>	<b>5,285,456</b>	<b>3,133,459</b>	<b>.593</b>	<b>.463</b>
<b>2005</b>	<b>101</b>	<b>24.1</b>	<b>9/1/03</b>	<b>5,811,755</b>	<b>3,754,626</b>	<b>.646</b>	<b>.471</b>
<b>2006</b>	<b>102</b>	<b>11.2</b>	<b>11/1/04</b>	<b>6,452,877</b>	<b>3,640,610</b>	<b>.564</b>	<b>.402</b>
		<b>25.9</b>	<b>7/1/05</b>				

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	<b>10.0%</b>
B. General Expense	<b>6.0%</b>
C. Taxes, License & Fees	<b>2.4%</b>
D. Underwriting Profit & Contingencies	<b>0.9%</b>
E. Other (explain)	
<b>F. TOTAL</b>	<b>19.3%</b>

8.   N   Apply Lost Cost Factors to Future filings? (Y or N)
9.   0   Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): \_\_\_\_\_
10.   0   Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): \_\_\_\_\_