



ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

Medical Malpractice Joint Underwriting Association of Rhode Island

NAIC Group Code _____ (Current) _____ (Prior) _____
Rhode Island
Organized under the Laws of _____, State of Domicile or Port of Entry _____ RI
Country of Domicile _____ United States of America
Incorporated/Organized 06/16/1975 Commenced Business 07/01/1975
Statutory Home Office One Turks Head Place Providence, RI, US 02903
(Street and Number) (City or Town, State, Country and Zip Code)
Main Administrative Office One Turks Head Place
(Street and Number) (Area Code) (Telephone Number)
410-980-1100
Mail Address One Turks Head Place Providence, RI, US 02903
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)
Primary Location of Books and Records One Turks Head Place
(Street and Number) (Area Code) (Telephone Number)
410-980-1100
Internet Website Address http://rhodeislandjuia.com/ (Area Code) (Telephone Number)
Statutory Statement Contact Susan Mertes 410-980-1100
(Name) (Area Code) (Telephone Number)
susan.mertes@bbrown.com 401-369-8241
(E-mail Address) (FAX Number)

OFFICERS

Vice Chair Don Baldini Assistant Secretary Susan Mertes #
Chair Earl Cottam Jr. Secretary Adam Robitaille #

OTHER

DIRECTORS OR TRUSTEES

James Pascalides DPM
Adam Robitaille Don Baldini Earl Cottam Jr.
Stacy Paterno # Jennifer Morrison Barbara M Cavicchio DDS
Eric Payntor Michael Walder # Virginia Burke
Joe Torti #

State of Rhode Island SS
County of Kent

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Susan Mertes
Assistant Secretary

Earl Cottam Jr.
Chair

Adam Robitaille
Secretary

Yes [X] No []

a. Is this an original filing?

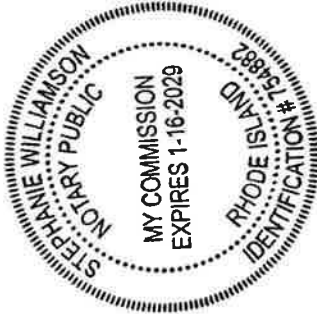
b. If no,

1. State the amendment number.....

2. Date filed

3. Number of pages attached.....

Subscribed and sworn to before me this 18 day of February
Stephanie Williamson





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FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

Medical Malpractice Joint Underwriting Association of Rhode Island

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Country of Domicile _____ United States of America
NAIC Company Code 13101 Employer's ID Number 51-0140354
State of Domicile or Port of Entry RI

Incorporated/Organized 06/16/1975 Commenced Business 07/01/1975

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Chair Earl Cottam Jr. Secretary Adam Robitaille #

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DIRECTORS OR TRUSTEES

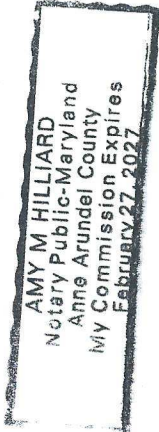
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Stacy Paterno #	Don Baldini	Barbara M Cavicchio DDS
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	Michael Walder #	Joe Torti #

State of Rhode Island
County of Providence

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Susan Mertes
Susan Mertes
Assistant Secretary
Earl Cottam Jr.
Earl Cottam Jr.
Chair
Adam Robitaille
Secretary

Subscribed and sworn to before me this 21st day of January 2025
[Signature]
a. Is this an original filing?
b. If no, Yes [X] No []
1. State the amendment number
2. Date filed
3. Number of pages attached.....





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0000 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2024 NAIC Company Code 13101

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence	1,072,629	1,454,973		1,968,307	3,062,301	1,722,538	13,261,528	350,444	667,559	2,621,904	29,229	44,634
11.2 Medical Professional Liability - Claims-Made	673,515	714,804		155,344	1,515,000	2,176,199	3,432,294	250,499	280,308	672,102	18,353	28,026
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	248,902	350,699		105,488	75,000	4,435	339,402	6,359	4,088	96,798	6,783	10,357
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,995,046	2,520,476	0	2,229,139	4,652,301	3,903,172	17,033,224	607,302	951,955	3,390,804	54,365	83,017
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



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NAIC Group Code 0000 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2024 NAIC Company Code 13101

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		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence	1,072,629	1,454,973	0	1,968,307	3,062,301	1,722,538	13,261,528	350,444	667,589	2,621,904	29,229	44,634
11.2	Medical Professional Liability - Claims-Made	673,515	714,804	0	155,344	1,515,000	2,176,199	3,432,294	250,499	280,308	672,102	18,353	28,026
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence	248,902	350,699	0	105,488	75,000	4,435	339,402	6,359	4,088	96,798	6,783	10,357
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit	0	0	0	0	0	0	0	0	0	0	0	0
29.	International	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty	0	0	0	0	0	0	0	0	0	0	0	0
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a)	1,995,046	2,520,476	0	2,229,139	4,652,301	3,903,172	17,033,224	607,302	951,955	3,390,804	54,365	83,017
DETAILS OF WRITE-INS													
3401.													
3402.													
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3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

Schedule F - Part 1 - Assumed Reinsurance

N O N E

Schedule F - Part 2 - Premium Portfolio Reinsurance Effectuated or (Canceled)

N O N E

Schedule F - Part 3 - Ceded Reinsurance

N O N E

Schedule F - Part 4 - Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3

N O N E

Schedule F - Part 5 - Interrogatories for Schedule F - Part 3

N O N E

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	174,503,489		174,503,489
2. Premiums and considerations (Line 15)	115,328		115,328
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	0		0
4. Funds held by or deposited with reinsured companies (Line 16.2)	0		0
5. Other assets	1,381,443		1,381,443
6. Net amount recoverable from reinsurers			0
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	176,000,260	0	176,000,260
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	23,934,306		23,934,306
10. Taxes, expenses, and other obligations (Lines 4 through 8)	1,812,571		1,812,571
11. Unearned premiums (Line 9)	2,229,139		2,229,139
12. Advance premiums (Line 10)	732,774		732,774
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	0		0
15. Funds held by company under reinsurance treaties (Line 13)	0		0
16. Amounts withheld or retained by company for account of others (Line 14)	462,057		462,057
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	6,903		6,903
19. Total liabilities excluding protected cell business (Line 26)	29,177,750	0	29,177,750
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	146,822,510	XXX	146,822,510
22. Totals (Line 38)	176,000,260	0	176,000,260

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes [] No [X]

If yes, give full explanation:

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

Schedule P - Part 1A - Homeowners/Farmowners

N O N E

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	550.....	0.....	29.....	0.....	7.....	0.....	0.....	586.....	XXX.....
2. 2015.....	1,815.....	0.....	1,815.....	1,467.....	0.....	569.....	0.....	359.....	0.....	0.....	2,395.....	39.....
3. 2016.....	1,489.....	0.....	1,489.....	70.....	0.....	255.....	0.....	224.....	0.....	0.....	549.....	24.....
4. 2017.....	1,046.....	0.....	1,046.....	475.....	0.....	467.....	0.....	149.....	0.....	0.....	1,091.....	13.....
5. 2018.....	994.....	0.....	994.....	503.....	0.....	268.....	0.....	145.....	0.....	0.....	916.....	12.....
6. 2019.....	860.....	0.....	860.....	500.....	0.....	164.....	0.....	91.....	0.....	0.....	755.....	7.....
7. 2020.....	939.....	0.....	939.....	1,000.....	0.....	145.....	0.....	168.....	0.....	0.....	1,313.....	13.....
8. 2021.....	1,054.....	0.....	1,054.....	0.....	0.....	10.....	0.....	131.....	0.....	0.....	141.....	11.....
9. 2022.....	1,538.....	0.....	1,538.....	105.....	0.....	125.....	0.....	225.....	0.....	0.....	455.....	22.....
10. 2023.....	1,657.....	0.....	1,657.....	35.....	0.....	11.....	0.....	80.....	0.....	0.....	126.....	8.....
11. 2024.....	1,455.....	0.....	1,455.....	0.....	0.....	6.....	0.....	67.....	0.....	0.....	73.....	8.....
12. Totals.....	XXX.....	XXX.....	XXX.....	4,705.....	0.....	2,049.....	0.....	1,646.....	0.....	0.....	8,400.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	3,424	0	302	0	136	0	7	0	460	0	0	4,329	2
2. 2015.....	0	0	68	0	0	0	3	0	16	0	0	87	0
3. 2016.....	150	0	81	0	30	0	5	0	40	0	0	306	1
4. 2017.....	345	0	110	0	111	0	22	0	80	0	0	668	4
5. 2018.....	550	0	108	0	80	0	35	0	102	0	0	875	4
6. 2019.....	250	0	99	0	19	0	59	0	66	0	0	493	3
7. 2020.....	250	0	474	0	44	0	129	0	171	0	0	1,068	2
8. 2021.....	250	0	456	0	49	0	95	0	160	0	0	1,010	1
9. 2022.....	1,045	0	1,564	0	190	0	451	0	598	0	0	3,848	11
10. 2023.....	100	0	1,682	0	3	0	634	0	544	0	0	2,963	4
11. 2024.....	600	0	1,354	0	33	0	487	0	491	0	0	2,965	8
12. Totals.....	6,964	0	6,298	0	695	0	1,927	0	2,728	0	0	18,612	40

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	3,726.....	603.....
2. 2015.....	2,482.....	0.....	2,482.....	136.7.....	0.0.....	136.7.....	0.....	0.....	0.0.....	68.....	19.....
3. 2016.....	855.....	0.....	855.....	57.4.....	0.0.....	57.4.....	0.....	0.....	0.0.....	231.....	75.....
4. 2017.....	1,759.....	0.....	1,759.....	168.2.....	0.0.....	168.2.....	0.....	0.....	0.0.....	455.....	213.....
5. 2018.....	1,791.....	0.....	1,791.....	180.2.....	0.0.....	180.2.....	0.....	0.....	0.0.....	658.....	217.....
6. 2019.....	1,248.....	0.....	1,248.....	145.1.....	0.0.....	145.1.....	0.....	0.....	0.0.....	349.....	144.....
7. 2020.....	2,381.....	0.....	2,381.....	253.6.....	0.0.....	253.6.....	0.....	0.....	0.0.....	724.....	344.....
8. 2021.....	1,151.....	0.....	1,151.....	109.2.....	0.0.....	109.2.....	0.....	0.....	0.0.....	706.....	304.....
9. 2022.....	4,303.....	0.....	4,303.....	279.8.....	0.0.....	279.8.....	0.....	0.....	0.0.....	2,609.....	1,239.....
10. 2023.....	3,089.....	0.....	3,089.....	186.4.....	0.0.....	186.4.....	0.....	0.....	0.0.....	1,782.....	1,181.....
11. 2024.....	3,038.....	0.....	3,038.....	208.8.....	0.0.....	208.8.....	0.....	0.....	0.0.....	1,954.....	1,011.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	13,262.....	5,350.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	583.....	0	583.....	700	0	452	0	193	0	0	1,345	22
3. 2016.....	583.....	0	583.....	265	0	355	0	182	0	0	802	18
4. 2017.....	511.....	0	511.....	0	0	22	0	74	0	0	96	8
5. 2018.....	603.....	0	603.....	0	0	145	0	132	0	0	277	14
6. 2019.....	693.....	0	693.....	2,000	0	625	0	121	0	0	2,746	10
7. 2020.....	725.....	0	725.....	95	0	187	0	118	0	0	400	9
8. 2021.....	536.....	0	536.....	0	0	7	0	84	0	0	91	6
9. 2022.....	592.....	0	592.....	300	0	74	0	14	0	0	388	1
10. 2023.....	779.....	0	779.....	0	0	25	0	41	0	0	66	4
11. 2024.....	715.....	0	715.....	0	0	10	0	58	0	0	68	7
12. Totals	XXX	XXX	XXX	3,360	0	1,902	0	1,017	0	0	6,279	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	3	0	0	0	0	0	0	3	1
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	75	0	39	0	8	0	2	0	18	0	0	142	2
6. 2019.....	250	0	80	0	58	0	15	0	55	0	0	458	3
7. 2020.....	50	0	24	0	17	0	10	0	15	0	0	116	1
8. 2021.....	0	0	41	0	12	0	3	0	12	0	0	68	2
9. 2022.....	0	0	58	0	0	0	40	0	22	0	0	120	0
10. 2023.....	275	0	396	0	28	0	72	0	141	0	0	912	2
11. 2024.....	1,200	0	944	0	122	0	282	0	428	0	0	2,976	7
12. Totals	1,850	0	1,582	0	248	0	424	0	691	0	0	4,795	18

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2015.....	1,345.....	0	1,345.....	230.7	0.0	230.7	0	0	0.0	0	0
3. 2016.....	805.....	0	805.....	138.1	0.0	138.1	0	0	0.0	0	3
4. 2017.....	96.....	0	96.....	18.8	0.0	18.8	0	0	0.0	0	0
5. 2018.....	419.....	0	419.....	69.5	0.0	69.5	0	0	0.0	114	28
6. 2019.....	3,204.....	0	3,204.....	462.3	0.0	462.3	0	0	0.0	330	128
7. 2020.....	516.....	0	516.....	71.2	0.0	71.2	0	0	0.0	74	42
8. 2021.....	159.....	0	159.....	29.7	0.0	29.7	0	0	0.0	41	27
9. 2022.....	508.....	0	508.....	85.8	0.0	85.8	0	0	0.0	58	62
10. 2023.....	978.....	0	978.....	125.5	0.0	125.5	0	0	0.0	671	241
11. 2024.....	3,044.....	0	3,044.....	425.7	0.0	425.7	0	0	0.0	2,144	832
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,432	1,363

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

**SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (1 - 2)	4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2015.....												XXX.....
3. 2016.....												XXX.....
4. 2017.....												XXX.....
5. 2018.....												XXX.....
6. 2019.....												XXX.....
7. 2020.....												XXX.....
8. 2021.....												XXX.....
9. 2022.....												XXX.....
10. 2023.....												XXX.....
11. 2024.....												XXX.....
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid		Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....											
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	353.....	0	353	54	0	14	0	37	0	0	105	5
3. 2016.....	266.....	0	266	0	0	0	0	0	0	0	0	0
4. 2017.....	219.....	0	219	0	0	50	0	27	0	0	77	3
5. 2018.....	222.....	0	222	11	0	9	0	33	0	0	53	3
6. 2019.....	258.....	0	258	0	0	0	0	0	0	0	0	0
7. 2020.....	219.....	0	219	0	0	0	0	0	0	0	0	0
8. 2021.....	427.....	0	427	4	0	0	0	38	0	0	42	3
9. 2022.....	389.....	0	389	75	0	0	0	56	0	0	131	5
10. 2023.....	527.....	0	527	0	0	0	0	21	0	0	21	2
11. 2024.....	351.....	0	351	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	144	0	73	0	212	0	0	429	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	75	0	18	0	0	0	5	0	14	0	0	112	1
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	37	0	0	0	14	0	12	0	0	63	0
9. 2022.....	0	0	42	0	0	0	16	0	13	0	0	71	0
10. 2023.....	1	0	94	0	0	0	35	0	30	0	0	160	1
11. 2024.....	0	0	72	0	0	0	27	0	22	0	0	121	0
12. Totals	76	0	263	0	0	0	97	0	91	0	0	527	2

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	105.....	0.....	105.....	29.7.....	0.0.....	29.7.....	0.....	0.....	0.0.....	0.....	0.....
3. 2016.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2017.....	189.....	0.....	189.....	86.3.....	0.0.....	86.3.....	0.....	0.....	0.0.....	93.....	19.....
5. 2018.....	53.....	0.....	53.....	23.9.....	0.0.....	23.9.....	0.....	0.....	0.0.....	0.....	0.....
6. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2020.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2021.....	105.....	0.....	105.....	24.6.....	0.0.....	24.6.....	0.....	0.....	0.0.....	37.....	26.....
9. 2022.....	202.....	0.....	202.....	51.9.....	0.0.....	51.9.....	0.....	0.....	0.0.....	42.....	29.....
10. 2023.....	181.....	0.....	181.....	34.3.....	0.0.....	34.3.....	0.....	0.....	0.0.....	95.....	65.....
11. 2024.....	121.....	0.....	121.....	34.5.....	0.0.....	34.5.....	0.....	0.....	0.0.....	72.....	49.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	339	188

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)

N O N E

Schedule P - Part 1J - Auto Physical Damage

N O N E

Schedule P - Part 1K - Fidelity/Surety

N O N E

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 1T - Warranty

N O N E

Schedule P - Part 1U - Pet Insurance Plans

N O N E

Schedule P - Part 2A - Homeowners/Farmowners

N O N E

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 2E - Commercial Multiple Peril

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	34,992	28,637	21,777	17,380	14,006	10,827	10,410	9,891	9,763	9,891	128	0
2. 2015.....	4,509	4,488	4,400	3,847	4,087	4,053	2,648	2,549	2,178	2,107	(71)	(442)
3. 2016.....	XXX	3,683	3,596	3,025	2,060	1,411	1,071	863	707	591	(116)	(272)
4. 2017.....	XXX	XXX	2,351	2,197	2,268	2,156	1,262	1,402	1,305	1,530	225	128
5. 2018.....	XXX	XXX	XXX	2,112	1,994	2,041	2,128	1,813	1,582	1,544	(38)	(269)
6. 2019.....	XXX	XXX	XXX	XXX	1,788	1,658	1,540	1,231	1,175	1,091	(84)	(140)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,895	1,820	1,612	1,937	2,042	105	430
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,909	1,924	1,231	860	(371)	(1,064)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,570	3,241	3,480	239	910
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,570	2,465	(105)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,480	XXX	XXX
12. Totals											(88)	(719)

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	9,227	7,923	6,406	5,764	5,499	5,206	5,206	5,206	5,206	5,206	0	0
2. 2015.....	1,542	1,883	2,052	2,000	2,069	1,889	1,461	1,153	1,152	1,152	0	(1)
3. 2016.....	XXX	1,984	1,655	1,435	1,128	1,042	991	721	582	623	41	(98)
4. 2017.....	XXX	XXX	705	546	378	183	110	70	22	22	0	(48)
5. 2018.....	XXX	XXX	XXX	1,016	941	660	456	334	304	269	(35)	(65)
6. 2019.....	XXX	XXX	XXX	XXX	1,400	1,273	2,231	3,268	3,161	3,028	(133)	(240)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	797	522	1,069	461	383	(78)	(686)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	640	388	124	63	(61)	(325)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	477	512	472	(40)	(5)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	592	796	204	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,558	XXX	XXX
12. Totals											(102)	(1,468)

**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	1,051	910	1,106	612	521	515	515	515	515	515	0	0
2. 2015.....	343	336	305	257	134	68	68	68	68	68	0	0
3. 2016.....	XXX	140	139	69	27	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	112	101	109	257	155	157	151	148	(3)	(9)
5. 2018.....	XXX	XXX	XXX	117	97	75	89	29	20	20	0	(9)
6. 2019.....	XXX	XXX	XXX	XXX	127	95	64	12	1	0	(1)	(12)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	104	62	42	10	0	(10)	(42)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	157	126	87	55	(32)	(71)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	133	142	133	(9)	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	166	130	(36)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	XXX	XXX
12. Totals											(91)	(143)

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

Schedule P - Part 2I - Special Property

N O N E

Schedule P - Part 2J - Auto Physical Damage

N O N E

Schedule P - Part 2K - Fidelity/Surety

N O N E

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 2M - International

N O N E

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 2T - Warranty

N O N E

Schedule P - Part 2U - Pet Insurance Plans

N O N E

Schedule P - Part 3A - Homeowners/Farmowners

N O N E

Schedule P - Part 3B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 3E - Commercial Multiple Peril

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	1,259.....	2,528.....	3,681.....	4,641.....	4,787.....	5,185.....	5,341.....	5,443.....	6,022.....	57.....	.....
2. 2015.....	29.....	100.....	156.....	393.....	553.....	987.....	2,019.....	2,024.....	2,036.....	2,036.....	7.....	32.....
3. 2016.....	XXX.....	20.....	65.....	75.....	84.....	105.....	171.....	227.....	321.....	325.....	1.....	22.....
4. 2017.....	XXX.....	XXX.....	1.....	6.....	45.....	108.....	159.....	250.....	361.....	942.....	0.....	9.....
5. 2018.....	XXX.....	XXX.....	XXX.....	1.....	1.....	13.....	45.....	123.....	217.....	771.....	0.....	8.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	6.....	17.....	68.....	124.....	664.....	0.....	4.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6.....	14.....	66.....	102.....	1,145.....	1.....	10.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	9.....	9.....	10.....	0.....	10.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9.....	164.....	230.....	2.....	9.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6.....	46.....	0.....	4.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6.....	.....	.....

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	000.....	2,809.....	4,037.....	4,137.....	5,206.....	5,206.....	5,206.....	5,206.....	5,206.....	5,206.....	10.....	.....
2. 2015.....	42.....	141.....	926.....	962.....	1,097.....	1,123.....	1,149.....	1,152.....	1,152.....	1,152.....	2.....	20.....
3. 2016.....	XXX.....	72.....	226.....	256.....	293.....	324.....	354.....	366.....	400.....	620.....	2.....	15.....
4. 2017.....	XXX.....	XXX.....	11.....	22.....	22.....	22.....	22.....	22.....	22.....	22.....	0.....	8.....
5. 2018.....	XXX.....	XXX.....	XXX.....	36.....	79.....	93.....	96.....	105.....	125.....	145.....	0.....	12.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	44.....	143.....	251.....	1,357.....	1,492.....	2,625.....	1.....	6.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	29.....	63.....	114.....	245.....	282.....	1.....	7.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6.....	6.....	7.....	7.....	0.....	4.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	23.....	51.....	374.....	1.....	0.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	25.....	0.....	2.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10.....	.....	.....

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
2. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
3. 2016.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	000.....	60.....	329.....	485.....	515.....	515.....	515.....	515.....	515.....	515.....	6.....	.....
2. 2015.....	0.....	54.....	61.....	68.....	68.....	68.....	68.....	68.....	68.....	68.....	2.....	3.....
3. 2016.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2017.....	XXX.....	XXX.....	0.....	0.....	4.....	22.....	23.....	31.....	44.....	50.....	0.....	2.....
5. 2018.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	6.....	20.....	20.....	20.....	1.....	2.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	4.....	4.....	4.....	1.....	2.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	75.....	1.....	4.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	1.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	.....	.....

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2016.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2017.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2018.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....

NONE

Schedule P - Part 3I - Special Property

N O N E

Schedule P - Part 3J - Auto Physical Damage

N O N E

Schedule P - Part 3K - Fidelity/Surety

N O N E

Schedule P - Part 3L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 3M - International

N O N E

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

Schedule P - Part 3U - Pet Insurance Plans

N O N E

Schedule P - Part 4A - Homeowners/Farmowners

N O N E

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 4E - Commercial Multiple Peril

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	22,840	17,193	11,289	7,375	4,124	1,601	861	419	329	309
2. 2015.....	4,279	3,768	3,487	2,346	1,194	704	514	226	125	71
3. 2016.....	XXX	3,621	3,380	2,832	1,742	1,093	623	115	70	86
4. 2017.....	XXX	XXX	2,340	2,093	1,565	1,102	608	224	247	132
5. 2018.....	XXX	XXX	XXX	2,097	1,858	1,254	1,042	661	430	143
6. 2019.....	XXX	XXX	XXX	XXX	1,728	1,593	1,176	838	417	158
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,770	1,374	1,054	735	603
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,639	1,560	972	551
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,423	1,983	2,015
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,453	2,316
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,841

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	4,764	2,462	1,129	442	183	0	0	0	0	0
2. 2015.....	567	795	414	308	190	281	151	1	0	0
3. 2016.....	XXX	1,054	895	608	457	321	198	199	60	0
4. 2017.....	XXX	XXX	659	504	346	161	88	48	0	0
5. 2018.....	XXX	XXX	XXX	746	497	477	293	171	76	41
6. 2019.....	XXX	XXX	XXX	XXX	593	377	335	479	225	95
7. 2020.....	XXX	XXX	XXX	XXX	XXX	551	298	270	131	34
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	608	368	97	44
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	277	162	98
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	557	468
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,226

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	471	350	307	39	6	0	0	0	0	0
2. 2015.....	143	182	127	78	66	0	0	0	0	0
3. 2016.....	XXX	140	139	69	27	0	0	0	0	0
4. 2017.....	XXX	XXX	83	76	30	32	30	32	26	23
5. 2018.....	XXX	XXX	XXX	94	82	60	18	9	0	0
6. 2019.....	XXX	XXX	XXX	XXX	127	95	64	12	1	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	104	62	42	10	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	137	117	83	51
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123	67	58
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	165	129
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 4I - Special Property

N O N E

Schedule P - Part 4J - Auto Physical Damage

N O N E

Schedule P - Part 4K - Fidelity/Surety

N O N E

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 4M - International

N O N E

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 4T - Warranty

N O N E

Schedule P - Part 4U - Pet Insurance Plans

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 1

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 2
N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 3
N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1
N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2
N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3
N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1
N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2
N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3
N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1
N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2
N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3
N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 1
N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 2
N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 3
N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	3	3	6	5	6	3	2	31	1	
2. 2015.....	0	0	2	2	3	5	5	7	7	7
3. 2016.....	XXX	0	0	0	0	0	0	0	1	1
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2	2
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	73	57	44	30	17	12	8	6	3	2
2. 2015.....	24	18	18	17	13	10	5	1	1	0
3. 2016.....	XXX	13	16	12	5	3	4	4	2	1
4. 2017.....	XXX	XXX	4	2	4	7	5	7	6	4
5. 2018.....	XXX	XXX	XXX	8	7	8	7	6	6	4
6. 2019.....	XXX	XXX	XXX	XXX	5	7	4	4	4	3
7. 2020.....	XXX	XXX	XXX	XXX	XXX	6	8	6	5	2
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	7	5	1	1
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	11	11
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	4
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	10	6	0	2	1	1	0	86	8	56
2. 2015.....	25	29	35	38	38	38	38	38	39	39
3. 2016.....	XXX	14	20	21	23	23	24	24	23	24
4. 2017.....	XXX	XXX	4	5	8	11	11	13	13	13
5. 2018.....	XXX	XXX	XXX	8	10	12	12	12	12	12
6. 2019.....	XXX	XXX	XXX	XXX	5	7	7	7	7	7
7. 2020.....	XXX	XXX	XXX	XXX	XXX	6	9	11	13	13
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	7	10	10	11
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	21	22
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	8
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	5	3	4	2	1	0	0	18	0	(18)
2. 2015.....	0	0	0	1	1	1	2	2	2	2
3. 2016.....	XXX	0	1	1	1	1	1	1	1	2
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	1	1
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	1	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	26	21	11	8	3	0	0	0	0	0
2. 2015.....	22	14	14	11	5	4	1	0	0	0
3. 2016.....	XXX	16	13	11	5	5	4	3	3	1
4. 2017.....	XXX	XXX	8	7	3	1	1	0	0	0
5. 2018.....	XXX	XXX	XXX	13	6	5	3	2	2	2
6. 2019.....	XXX	XXX	XXX	XXX	10	7	7	5	4	3
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	3	3	1	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	6	4	4	2
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	(1)	(1)	0	0	0	0	0	30	67	(1)
2. 2015.....	22	22	22	22	22	22	22	22	22	22
3. 2016.....	XXX	17	18	18	18	18	18	18	18	18
4. 2017.....	XXX	XXX	8	9	8	8	8	8	8	8
5. 2018.....	XXX	XXX	XXX	13	14	14	14	14	14	14
6. 2019.....	XXX	XXX	XXX	XXX	10	10	10	10	10	10
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	9	9	9	9
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	6	6	6	6
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	4
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	2	0	0	2	2	0	(1)	0	0	3
2. 2015.....	0	1	2	2	2	2	2	2	2	2
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	1	1	1
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX		1	1	1
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	6	6	5	2	0	0	0	0	0	0
2. 2015.....	5	3	1	1	0	0		0	0	0
3. 2016.....	XXX	0	0	0	0	0		0	0	0
4. 2017.....	XXX	XXX	2	1	2	2	1	1	1	1
5. 2018.....	XXX	XXX	XXX	3	2	2	2	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0		0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0		0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	2	2	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	2	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	5	0	2	0	0	0	(1)	5	.67	7
2. 2015.....	5	5	5	5	5	5	5	5	5	5
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	2	3	4	4	3	3	3	3
5. 2018.....	XXX	XXX	XXX	3	3	3	3	3	3	3
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	2	3	3	3
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	5	5
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX									
11. 2024.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX									
11. 2024.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	1,152	724	0	0	
2. 2015.....	353	353	353	353	353	353	706	1,059	1,059	1,059	
3. 2016.....	XXX	266	266	266	266	266	532	798	798	798	
4. 2017.....	XXX	XXX	219	219	219	219	438	657	657	657	
5. 2018.....	XXX	XXX	XXX	222	222	222	444	666	666	666	
6. 2019.....	XXX	XXX	XXX	XXX	258	258	516	774	774	774	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	219	438	657	657	657	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	427	854	854	854	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	390	390	390	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	527	527	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	351	351
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	351
13. Earned Premiums (Sch P-Pt. 1)	353	266	219	222	258	219	427	389	527	351	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B
N O N E

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B
N O N E

Schedule P - Part 6M - International - Section 1
N O N E

Schedule P - Part 6M - International - Section 2
N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1
N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2
N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1
N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2
N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A
N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A
N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B
N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B
N O N E

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts
N O N E

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts
N O N E

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE P INTERROGATORIES

1.

The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1

Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or “ERE”) benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [X] No []
If the answer to question 1.1 is “no”, leave the following questions blank. If the answer to question 1.1 is “yes”, please answer the following questions:
- 1.2

What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?\$ 1,366,636
- 1.3

Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [X] No []
- 1.4

Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5

If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [X] N/A []
- 1.6

If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior .....	.....	.....
1.602	2015 .....	.....	.....
1.603	2016 .....	.....	.....
1.604	2017 .....	.....	.....
1.605	2018 .....	.....	.....
1.606	2019 .....	.....	.....
1.607	2020 .....	.....	.....
1.608	2021 .....	.....	.....
1.609	2022 .....	.....	.....
1.610	2023 .....	.....	.....
1.611	2024 .....	.....	.....
1.612	Totals	0	0

2.

The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as “Defense and Cost Containment” and “Adjusting and Other”) reported in compliance with these definitions in this statement? Yes [X] No []
3.

The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4.

Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5.

What were the net premiums in force at the end of the year for:
(in thousands of dollars)

5.1 Fidelity0

5.2 Surety0
6.

Claim count information is reported per claim or per claimant (Indicate which) per claim.....
If not the same in all years, explain in Interrogatory 7.
- 7.1

The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2

(An extended statement may be attached.)
.....

Schedule T - Part 2 - Interstate Compact

N O N E

Schedule Y - Part 1A - Detail of Insurance Holding Company System

N O N E

Schedule Y - Part 1A - Explanations

N O N E

Schedule Y - Part 2

N O N E

Schedule Y - Part 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

		Responses
MARCH FILING		
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?.....	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management’s Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	SEE EXPLANATION
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING		
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?.....	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	YES
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? ...	YES
18.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?..	YES
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will an approval from the reporting entity’s state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25.	Will an approval from the reporting entity’s state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity’s state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?.....	NO
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?.....	NO
29.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?.....	NO
APRIL FILING		
30.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
35.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
38.	Will Management’s Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	SEE EXPLANATION
Explanations:		
8.	N/A	
11.		
12.		
13.		
15.		
16.		
18.		
21.		
22.		
23.		
24.		
25.		
26.		
27.		
28.	N/A	
29.	N/A	
30.		
31.		
32.		
33.		
34.		
35.		
36.		
37.		
38.	Does not meet the annual premium threshold of \$500,000,000 required for filing.	

Bar Codes:

11.	SIS Stockholder Information Supplement [Document Identifier 420]	
12.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	
13.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
15.	Trusteed Surplus Statement [Document Identifier 490]	
16.	Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	
18.	Medicare Part D Coverage Supplement [Document Identifier 365]	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 131012024400000000
22. Bail Bond Supplement [Document Identifier 500]	 131012024500000000
23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]	 131012024505000000
24. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 131012024224000000
25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 131012024225000000
26. Relief from the Requirements for Audit Committees [Document Identifier 226]	 131012024226000000
27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 131012024555000000
28. Exhibit of Other Liabilities by Lines of Business [Document Identifier 570]	 131012024570000000
29. Market Conduct Annual Statement (MCAS) Premium Exhibit [Document Identifier 600]	 131012024600000000
30. Credit Insurance Experience Exhibit [Document Identifier 230]	 131012024230000000
31. Long-Term Care Experience Reporting Forms [Document Identifier 306]	 131012024306000000
32. Accident and Health Policy Experience Exhibit [Document Identifier 210]	 131012024210000000
33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 131012024216000000
34. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]	 131012024550000000
35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 131012024290000000
36. Private Flood Insurance Supplement [Document Identifier 560]	 131012024560000000
37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 131012024565000000

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 24

		1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
2404.	Other Expense		101,723		101,723
2497.	Summary of remaining write-ins for Line 24 from overflow page	0	101,723	0	101,723



REINSURANCE SUMMARY SUPPLEMENTAL FILING FOR GENERAL INTERROGATORY 9 (PART 2)

To Be Filed by March 1

A01.	Assets	176,000,260	0	176,000,260
A02.	Liabilities	29,177,750	0	29,177,750
A03.	Surplus as regards to policyholders	146,822,510	0	146,822,510
A04.	Income before taxes	1,449,015	0	1,449,015

[illegible]

N/A



SUPPLEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

Designate the type of health care
providers reported on this page:
Physicians, including surgeons
and osteopaths

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama .....AL								
2. Alaska .....AK								
3. Arizona .....AZ								
4. Arkansas .....AR								
5. California .....CA								
6. Colorado .....CO								
7. Connecticut .....CT								
8. Delaware .....DE								
9. District of Columbia .....DC								
10. Florida .....FL								
11. Georgia .....GA								
12. Hawaii .....HI								
13. Idaho .....ID								
14. Illinois .....IL								
15. Indiana .....IN								
16. Iowa .....IA								
17. Kansas .....KS								
18. Kentucky .....KY								
19. Louisiana .....LA								
20. Maine .....ME								
21. Maryland .....MD								
22. Massachusetts .....MA								
23. Michigan .....MI								
24. Minnesota .....MN								
25. Mississippi .....MS								
26. Missouri .....MO								
27. Montana .....MT								
28. Nebraska .....NE								
29. Nevada .....NV								
30. New Hampshire .....NH								
31. New Jersey .....NJ								
32. New Mexico .....NM								
33. New York .....NY								
34. North Carolina .....NC								
35. North Dakota .....ND								
36. Ohio .....OH								
37. Oklahoma .....OK								
38. Oregon .....OR								
39. Pennsylvania .....PA								
40. Rhode Island .....RI	1,117,288	1,437,239	4,064,801	7	774,681	4,583,429	12	4,481,887
41. South Carolina .....SC								
42. South Dakota .....SD								
43. Tennessee .....TN								
44. Texas .....TX								
45. Utah .....UT								
46. Vermont .....VT								
47. Virginia .....VA								
48. Washington .....WA								
49. West Virginia .....WV								
50. Wisconsin .....WI								
51. Wyoming .....WY								
52. American Samoa .....AS								
53. Guam .....GU								
54. Puerto Rico .....PR								
55. U.S. Virgin Islands .....VI								
56. Northern Mariana Islands .....MP								
57. Canada .....CAN								
58. Aggregate other alien .....OT	0	0	0	0	0	0	0	0
59. Total	1,117,288	1,437,239	4,064,801	7	774,681	4,583,429	12	4,481,887
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0



SUPPLEMENT FOR THE YEAR 2024 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

Designate the type of health care
providers reported on this page:
Hospitals

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

	1	2	Direct Losses Paid		5	Direct Losses Unpaid		8
			3	4		6	7	
States, etc.	Direct Premiums Written	Direct Premiums Earned	Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Direct Losses Incurred But Not Reported
1. Alabama .....AL								
2. Alaska .....AK								
3. Arizona .....AZ								
4. Arkansas .....AR								
5. California .....CA								
6. Colorado .....CO								
7. Connecticut .....CT								
8. Delaware .....DE								
9. District of Columbia .....DC								
10. Florida .....FL								
11. Georgia .....GA								
12. Hawaii .....HI								
13. Idaho .....ID								
14. Illinois .....IL								
15. Indiana .....IN								
16. Iowa .....IA								
17. Kansas .....KS								
18. Kentucky .....KY								
19. Louisiana .....LA								
20. Maine .....ME								
21. Maryland .....MD								
22. Massachusetts .....MA								
23. Michigan .....MI								
24. Minnesota .....MN								
25. Mississippi .....MS								
26. Missouri .....MO								
27. Montana .....MT								
28. Nebraska .....NE								
29. Nevada .....NV								
30. New Hampshire .....NH								
31. New Jersey .....NJ								
32. New Mexico .....NM								
33. New York .....NY								
34. North Carolina .....NC								
35. North Dakota .....ND								
36. Ohio .....OH								
37. Oklahoma .....OK								
38. Oregon .....OR								
39. Pennsylvania .....PA								
40. Rhode Island .....RI	628,856	732,538	512,500	3	3,124,056	4,230,000	20	3,398,506
41. South Carolina .....SC								
42. South Dakota .....SD								
43. Tennessee .....TN								
44. Texas .....TX								
45. Utah .....UT								
46. Vermont .....VT								
47. Virginia .....VA								
48. Washington .....WA								
49. West Virginia .....WV								
50. Wisconsin .....WI								
51. Wyoming .....WY								
52. American Samoa .....AS								
53. Guam .....GU								
54. Puerto Rico .....PR								
55. U.S. Virgin Islands .....VI								
56. Northern Mariana Islands .....MP								
57. Canada .....CAN								
58. Aggregate other alien .....OT	0	0	0	0	0	0	0	0
59. Total	628,856	732,538	512,500	3	3,124,056	4,230,000	20	3,398,506
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0