

## Iowa Medical Malpractice Annual Report

For Calendar Year 2020

September 2021 Iowa Insurance Division



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#### **Executive Summary**

The Iowa Insurance Division requested open and closed claim data for calendar year 2020 from licensed insurance companies pursuant to Iowa Code Section 505.27. Licensed companies who wrote medical malpractice insurance in Iowa during the period from January 1, 2020, through December 31, 2020, were asked to provide specific data for claims closed during that period and separately for those remaining open at the end of the year.

Data was reviewed for consistency within and between companies, and for completeness and reasonableness. The accuracy of the report depends on the accuracy of the data obtained from the companies.

This report provides a snapshot of Iowa's medical malpractice insurance market. Average payments of benefits plus allocated loss adjustment expenses (ALAE) were approximately \$162,000 for closed claims. The average incurred losses and allocated loss adjustment expenses were approximately \$239,000 for all open claims.

Of the provider specialties listed, Family Practice and Hospital had the highest number of closed claims reported. Clinic/Corporation had the most open claims. General Surgery had the highest average benefits and ALAE paid for closed claims and Obstetrics/Gynecology had the highest average incurred losses and ALAE for open claims.

For alleged cause of loss, Failure to Diagnose/Monitor/Treat produced the highest number of closed claims and Inappropriate/Improper Surgical Procedure claims had the highest number of open claims. Pregnancy or Birth-Related Problems had the highest average benefits and ALAE paid for both open and closed claims.

By severity of claim categories, Temporary – Minor had the highest number for closed claims and Death had the highest number for open claims. Permanent – Major had the highest average benefits and ALAE paid for closed claims and Grave claims had the highest average incurred losses and ALAE for open claims. Average paid losses and ALAE by severity category ranged from approximately \$13,000 to \$347,000 for closed claims. Average incurred loss and ALAE by severity category ranged from approximately \$73,000 to \$505,000 for open claims.

Minor rounding differences may exist; however, no adjustments were made to the amounts reported.

As explained in the section titled Recommendations, the Division has not identified any immediate changes needed in the Medical Malpractice insurance marketplace.



## Recommendations

(Iowa Medical Malpractice Report for CY 2020)

Since the Medical Malpractice Report was first produced for calendar year 2006, no revisions to the law have been implemented. Companies have been providing their data in a consistent manner throughout the years. The Division has not identified any immediate changes needed in the Medical Malpractice insurance marketplace from the data compiled in this report. As part of last year's Recommendations, the Division evaluated methods for adding loss ratio information to supplement the report. The Division determined it was not appropriate to require companies to report this information because loss ratio is not a required element of the report under lowa Code 505.27.



#### Introduction

Pursuant to Iowa Code Section 505.27, the Iowa Insurance Division requested insurance companies report medical malpractice claim data for calendar year 2020.

Licensed insurers who wrote medical malpractice insurance in Iowa during 2020 were asked to provide data separately for any claims that closed during the year and for any claims that were open at the end of the year.

#### **Data Request**

The Division requested that companies submit data for each *claim* or *lawsuit*.

*Claims* were defined as formal or written demands for compensation under a medical malpractice insurance policy relating to allegations of liability on the part of one or more providers for any act, error, or omission in the rendering of, or failure to render medical services for medically related injuries.

A *lawsuit* was defined as a complaint filed in any court in Iowa alleging liability on the part of one or more providers for any act, error, or omission in the rendering of, or failure to render medical services for medically related injuries.

Only direct business was to be included in the report. Adjustments for subrogation were to be made. Claims were to be reported separately for each insured associated with a claim; for each injured party associated with an incident; for each claimant that filed a claim for the same injury; and for each policy if filed under more than one policy. Reopened claims were to be reported considering only their final disposition date.

A copy of the data request is included at the end of this report in Appendix B.



#### **Companies**

Licensed insurers who wrote medical malpractice insurance in Iowa during 2020 were required to provide data for claims that closed during the year or that were open at the end of the year. All licensed insurers represented 55.4% of the medical malpractice market in Iowa as determined by their percentage of calendar year 2020 direct written premiums. Some companies reported for a group of affiliated companies together; others reported for each company individually. The term "company" is being used to represent either an individual entity or a group of affiliated companies.

Not all the licensed companies had open or closed claims to report. Licensed insurers that reported claims comprise 48.0% of the 2020 medical malpractice premium in Iowa.

Page 7 shows a history of the market shares for company groups that reported claims for the Medical Malpractice Annual Report for Calendar Year 2020. The company groupings are shown in Appendix A. Licensed insurers that reported claims comprise 48.0% of the 2020 medical malpractice market in Iowa. The market shares were determined by dividing the group's written premium for the year by the total written premium for all companies in that year. Company groups that reported claims comprise 60.2% of the 2020 medical malpractice premium in Iowa. Note that this includes some non-licensed insurers that are part of groups that include both licensed and non-licensed insurers.

The companies that write medical malpractice insurance in Iowa change from year to year. New companies start writing the business, others cease writing the business. Some companies change their names or acquire other companies. The premium volume that a company writes will vary year to year, and for some companies it will vary dramatically.

In reports for 2018 and earlier, a market share table for companies that reported claims was provided, however, because some entities file the report as a group, it was somewhat inconsistent. Therefore, in this report, as in last year's report, we have provided the market share report on a consistent insurance group basis.



#### Iowa Insurance Division Medical Malpractice Closed and Open Claim Report Market Shares of Company Groups with Reported Claims Based on 2020 Direct Written Premiums

	NAIC Group	Calendar Year	Calendar Year	Calendar Year	Calendar Year	Calendar Year
Entity Name	Number	2016	2017	2018	2019	2020
American International Group	12	17.6%	16.9%	17.6%	0.2%	0.2%
Berkshire Hathaway Group	31	8.4%	5.7%	6.0%	5.6%	5.3%
Church Mutual Group	4851	0.2%	0.2%	0.1%	0.2%	0.3%
Cincinnati Financial Group	244	0.7%	0.8%	0.7%	0.7%	0.6%
CNA Ins Group	218	7.2%	7.6%	7.6%	9.5%	9.0%
MMIC Group	4790	40.2%	36.6%	35.5%	33.8%	31.5%
Fairfax Financial Group	158	0.4%	0.5%	0.6%	0.4%	0.5%
ISMIE Group	2358	1.0%	0.9%	0.7%	1.1%	0.2%
Chubb Ltd Grp	626	0.4%	0.6%	0.5%	0.8%	0.7%
Coverys Group	1154	0.6%	3.7%	4.3%	3.9%	4.0%
NCMIC Grp	2638	3.8%	4.4%	4.3%	3.9%	3.5%
NORCAL Group	1282	0.7%	0.7%	1.1%	0.9%	0.9%
National Group	508	0.9%	0.9%	0.9%	0.8%	0.7%
ProAssurance Corp Group 2698		7.7%	7.8%	6.2%	5.4%	2.9%
Total Market Share for Groups with Reported	Claims for					
2020		89.8%	87.3%	86.2%	67.1%	60.2%



#### Data

All responses received were reviewed for consistency with the data request. Data elements were reviewed for completeness, reasonableness, and consistency with other data elements.

In cases where a company did not use the provided categories to identify claims, if a category could be reasonably assigned, that was done. Otherwise, the claim was listed in the Other/Unknown category. Any categories with less than five claims were combined and reported in total.

On the Benefits and Expenses by Company exhibits, companies with fewer than five claims were reported as a group. Page 25 shows the companies combined for the closed claim exhibits and for the open claim exhibits.

Several large losses were reported, for both open and closed claims. Twenty-two closed claims had total loss and allocated loss adjustment expenses of at least \$500,000. Twelve closed claims had total loss and allocated loss adjustment expense of at least \$1,000,000, with the largest paid losses and ALAE exceeding \$2.5 million. Forty-five open claims had incurred amounts of \$500,000 or more. Twenty-one open claims had incurred loss adjustment expense of at least \$1,000,000, with the five largest claims exceeding \$2,000,000.



#### Limitations

The accuracy of this report depends on the accuracy of the data provided by the companies. The Division reviewed the data for completeness, reasonableness, consistency with other data elements, and consistency with the data request. No adjustments were made to the data other than the assigning categories to identify claims for which a company did not use the provided categories, but one could be reasonably assigned.

Although attempts were made to gather uniform data from all companies, complete uniformity is not possible. Some companies did not maintain records of all the data as requested. Some used company specific definitions that could not be manipulated to completely match the requested categories. Companies may have interpreted data elements differently from each other. Practices such as the timing for considering an incident an open claim or a closed claim may differ by company.

Medical malpractice insurance is available for individuals and for a variety of institutions, including hospitals, clinics, and nursing homes. Insurance companies often specialize in what medical malpractice insurance they write. Differences in data between specialties or types of policyholders may be a result of or compounded by the companies writing the business.

Other factors internal to a company writing the business that affect the results of the study include, but are not limited to, the type of policies written, the limits of insurance requested by policyholders, the size of deductibles, company underwriting considerations and claim practices. Factors external to a company may also affect the report. These may include, but are not limited to, the regulatory environment, the legal environment, the general economy and medical inflation. The report makes no adjustments for and does not attempt to analyze changes in economic conditions, exposures, medical practices, legal climate, rate levels, or medical inflation.

The companies writing medical malpractice insurance in Iowa and the premium volume that each company wrote have changed from year to year. This can have a significant effect on any analysis. No adjustments to the data have been made to reflect shifting business.

The report provides a snapshot of Iowa's medical malpractice insurance market. It includes claims from 2020 and earlier which were either closed in 2020 or remained open at the end of the year for those companies that responded to the data request. Since medical malpractice claims can take years to be reported and closed, the claims closed in a year and open at the end of the year do not correspond to premiums for that year.

Large losses are not individually identified in the report. They are included in the totals and averages.



## Aggregate Claim Reports by Specialty of Provider

Companies were asked to classify each claim reported by a number of typical provider specialties. All claims in each category were totaled, separately for the open and the closed reports, and averaged by dividing the total dollar amounts by the number of claims. To maintain confidentiality of individual claims, any categories with fewer than five claims were grouped in the Other/Unknown category.

Average payments of benefits plus allocated loss adjustment expenses were approximately \$162,000 for all closed claims. The average incurred losses and allocated loss adjustment expenses were approximately \$239,000 for all open claims. The claims underlying these amounts are not comparable since the open claims represent all those open at the end of calendar year 2020, without regard to when the injury occurred, or the claim was reported. The closed claims include all claims closed in 2020, regardless of the date of injury or the date reported. The mix of claims by type, severity, or size, will not be the same for the open and closed reports.

Family Practice and Hospital had the highest number of closed claims reported. Clinic/Corporation had the highest number of open claims. General Surgery had the highest average benefits and allocated loss adjustment expenses paid for closed claims. Obstetrics/Gynecology had the highest average incurred losses and allocated loss adjustment expenses for open claims.



#### Iowa Insurance Division Closed Claims Total Benefits and Expenses Calendar Year 2020 - By Specialty

Provider Specialty	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Additional Payments After 6 Months from Disposition
Family Practice	27	\$3,656,000	\$1,754,888	\$0
Hospital	20	\$6,625,000	\$1,033,469	\$0
Orthopedics	10	\$0	\$119,253	\$0
Radiology	10	\$3,000,000	\$234,610	\$0
Emergency Medicine	8	\$895,000	\$124,046	\$0
General Surgery	8	\$2,850,000	\$354,626	\$0
Obstetrics/Gynecology	8	\$408,500	\$283,753	\$0
Clinic/Corporation	7	\$0	\$145,252	\$0
Internal Medicine	6	\$0	\$113,521	\$0
Chiropractic	5	\$515,000	\$392,086	\$0
All Other/Unknown	97	\$7,825,863	\$3,075,760	\$43,979
Grand Total	206	\$25,775,363	\$7,631,264	\$43,979

## Number of Closed Claims by Provider Specialty





#### Iowa Insurance Division Closed Claims Average Benefits and Expenses Calendar Year 2020 - By Specialty

Provider Specialty	Number of Claims	Average Benefits Paid	Average Allocated Loss Adjustment Paid	Average Additional Payments After 6 Months from Disposition
Family Practice	27	\$135,407	\$64,996	\$0
Hospital	20	\$331,250	\$51,673	\$0
Orthopedics	10	\$0	\$11,925	\$0
Radiology	10	\$300,000	\$23 <i>,</i> 461	\$0
Emergency Medicine	8	\$111,875	\$15,506	\$0
General Surgery	8	\$356,250	\$44,328	\$0
Obstetrics/Gynecology	8	\$51,063	\$35 <i>,</i> 469	\$0
Clinic/Corporation	7	\$0	\$20,750	\$0
Internal Medicine	6	\$0	\$18,920	\$0
Chiropractic	5	\$103,000	\$78,417	\$0
All Other/Unknown	97	\$80,679	\$31,709	\$453
Grand Total	206	\$125,123	\$37,045	\$213



## Average Payments by Provider Specialty



#### Iowa Insurance Division Open Claims Total Benefits and Expenses Calendar Year 2020 - By Specialty

Provider Specialty	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
Clinic/Corporation	33	\$0	\$673,956	\$6,500,001
Family Practice	23	\$0	\$4,234,463	\$2,305,000
Obstetrics/Gynecology	21	\$0	\$1,303,739	\$8,660,506
Orthopedics	20	\$0	\$598,383	\$3,153,600
Radiology	19	\$0	\$494,568	\$6,797,500
Hospital	17	\$0	\$351,687	\$1,451,000
General Surgery	16	\$0	\$688 <i>,</i> 864	\$3,437,510
Chiropractic	15	\$0	\$418,253	\$2,460,000
Plastic Surgery	12	\$0	\$647,569	\$3,210,000
Anesthesiology	9	\$0	\$138,160	\$457,500
Emergency Medicine	7	\$0	\$140,137	\$309,500
Registered Nurse	7	\$0	\$77 <i>,</i> 697	\$1,707,505
Cardiology	6	\$450,000	\$154,923	\$1,093,750
Neurology	6	\$0	\$120,446	\$1,750,000
Dentistry	6	\$2,185	\$224,130	\$0
Podiatry	5	\$0	\$135,569	\$190,998
All Other/Unknown	89	\$0	\$3,654,770	\$16,427,270
Grand Total	311	\$452,185	\$14,057,311	\$59,911,640

#### Number of Open Claims by Provider Specialty





#### Iowa Insurance Division Open Claims Average Benefits and Expenses Calendar Year 2020 - By Specialty

Provider Specialty	Number of Claims	Average Benefits Paid	Average Allocated Loss Adjustment Expenses Paid	Average Reserve for Incurred and Reported but not Disposed
Clinic/Corporation	33	\$0	\$20,423	\$196,970
Family Practice	23	\$0	\$184,107	\$100,217
Obstetrics/Gynecology	21	\$0	\$62,083	\$412,405
Orthopedics	20	\$0	\$29,919	\$157,680
Radiology	19	\$0	\$26,030	\$357,763
Hospital	17	\$0	\$20,687	\$85,353
General Surgery	16	\$0	\$43,054	\$214,844
Chiropractic	15	\$0	\$27,884	\$164,000
Plastic Surgery	12	\$0	\$53,964	\$267,500
Anesthesiology	9	\$0	\$15,351	\$50,833
Emergency Medicine	7	\$0	\$20,020	\$44,214
Registered Nurse	7	\$0	\$11,100	\$243,929
Cardiology	6	\$75,000	\$25,820	\$182,292
Neurology	6	\$0	\$20,074	\$291,667
Dentistry	6	\$364	\$37,355	\$0
Podiatry	5	\$0	\$27,114	\$38,200
All Other/Unknown	89	\$0	\$41,065	\$184,576
Grand Total	311	\$1,454	\$45,200	\$192,642

#### Average Incurred Losses ALAE by Provider Specialty





## Aggregate Claim Reports by Nature of Claim

Companies were asked to classify each claim reported by a number of alleged cause of loss descriptions. Most companies used the provided descriptions to categorize the claims. For those claims that were not assigned to one of the listed cause of loss descriptions, one was assigned if it reasonably fit the description provided by the company. Otherwise the claim was listed in the Other/Unknown category.

All claims in each category were totaled, separately for the open and the closed reports, and averaged by dividing the total dollar amounts by the number of claims. To maintain confidentiality of individual claims, any categories with fewer than five claims were grouped in the Other/Unknown category.

Failure to Diagnose, Monitor, and/or Treat had the highest number of closed claims reported, and Inappropriate/Improper Surgical Procedure had the highest number of open claims. Pregnancy or Birth Related Problems had the highest average benefits and allocated loss adjustment expenses paid for closed claims and for open claims.



#### Iowa Insurance Division Closed Claims Total Benefits and Expenses Calendar Year 2020 - By Nature of Claim

Alleged Cause of Loss	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Additional Payments After 6 Months from Disposition
Failure to Diagnose/Monitor/Treat	46	\$12,850,000	\$3,128,073	\$18,028
Inappropriate/Improper Surgical Procedure	38	\$3,697,500	\$676,380	\$0
Treatment Related Cause	34	\$1,914,032	\$851,093	\$24,337
Delay in Diagnosis	16	\$900,000	\$851,698	\$0
Post-Operative Complications	15	\$1,500,000	\$340,602	\$0
Pregnancy or Birth Related Problems	8	\$3,900,000	\$547,949	\$0
Fracture/Fall	7	\$0	\$178,534	\$0
Lack of Supervision or Control	6	\$567,831	\$276,384	\$0
Misdiagnosis	5	\$0	\$68,915	\$0
All Other/Unknown	31	\$446,000	\$711,636	\$1,614
Grand Total	206	\$25,775,363	\$7,631,264	\$43,979

## Number of Closed Claims by Nature of Claim





#### Iowa Insurance Division Closed Claims Average Benefits and Expenses Calendar Year 2020 - By Nature of Claim

Alleged Cause of Loss	Number of Claims	Average Benefits Paid	Average Allocated Loss Adjustment Expenses Paid	Average Additional Payments After 6 Months from Disposition
Failure to Diagnose/Monitor/Treat	46	\$279,348	\$68,002	\$392
Inappropriate/Improper Surgical Procedure	38	\$97,303	\$17,799	\$0
Treatment Related Cause	34	\$56,295	\$25,032	\$716
Delay in Diagnosis	16	\$56,250	\$53,231	\$0
Post-Operative Complications	15	\$100,000	\$22,707	\$0
Pregnancy or Birth Related Problems	8	\$487,500	\$68,494	\$0
Fracture/Fall	7	\$0	\$25,505	\$0
Lack of Supervision or Control	6	\$94,638	\$46,064	\$0
Misdiagnosis	5	\$0	\$13,783	\$0
All Other/Unknown	31	\$14,387	\$22,956	\$52
Grand Total	206	\$125,123	\$37,045	\$213





#### Iowa Insurance Division Open Claims Total Benefits and Expenses Calendar Year 2020 - By Nature of Claim

Alleged Cause of Loss	Number of Claims	Total Benefits Paid	Total Allocated LAE Paid	Reserve for Incurred and Reported but not Disposed
Inappropriate/Improper Surgical Procedure	80	\$450 <i>,</i> 000	\$2,269,947	\$15,513,255
Failure to Diagnose/Monitor/Treat	66	\$0	\$6,529,265	\$19,996,525
Treatment Related Cause	57	\$2,185	\$1,434,299	\$6,339,753
Pregnancy or Birth Related Problems	34	\$0	\$1,811,431	\$12,800,000
Post-Operative Complications	17	\$0	\$72,091	\$402,505
Lack of Monitoring Medication	13	\$0	\$298 <i>,</i> 364	\$385,000
Delay in Diagnosis	12	\$0	\$443,236	\$1,691,501
Fracture/Fall	9	\$0	\$236,227	\$1,145,001
Misdiagnosis	7	\$0	\$144,470	\$320,000
All Other/Unknown	16	\$0	\$817,981	\$1,318,100
Grand Total	311	\$452,185	\$14,057,311	\$59,911,640

## Number of Open Claims by Alleged Cause of Loss





#### Iowa Insurance Division Open Claims Average Benefits and Expenses Calendar Year 2020 - By Nature of Claim

Alleged Cause of Loss	Number of Claims	Average Benefits Paid	Average Allocated LAE Paid	Average Reserve for Incurred and Reported but not Disposed
Inappropriate/Improper Surgical Procedure	80	\$5,625	\$28,374	\$193,916
Failure to Diagnose/Monitor/Treat	66	\$0	\$98,928	\$302,978
Treatment Related Cause	57	\$38	\$25,163	\$111,224
Pregnancy or Birth Related Problems	34	\$0	\$53,277	\$376,471
Post-Operative Complications	17	\$0	\$4,241	\$23,677
Lack of Monitoring Medication	13	\$0	\$22,951	\$29,615
Delay in Diagnosis	12	\$0	\$36 <i>,</i> 936	\$140,958
Fracture/Fall	9	\$0	\$26,247	\$127,222
Misdiagnosis	7	\$0	\$20,639	\$45,714
All Other/Unknown	16	\$0	\$51,124	\$82,381
Grand Total	311	\$1,454	\$45,200	\$192,642

Average Incurred Losses and ALAE by Alleged Cause of Loss





## Aggregate Claim Reports by Substance of Claim

Companies were asked to classify each claim by the following severity of injury types.

- Emotional Only (e.g. fright, no physical damage)
- Temporary Insignificant (e.g. lacerations, contusions, minor scars, rash; no delay)
- Temporary Minor (e.g. infections, fracture, fall in hospital; recovery delayed)
- Temporary Major (e.g. surgical material left, drug side effect, brain damage; recovery delayed)
- Permanent Minor (e.g. loss of fingers, loss or damage to organs; includes non-disabling injuries)
- Permanent Significant (e.g. deafness, loss of limb, loss of eye, loss of one kidney or lung)
- Permanent Major (e.g. paraplegia, blindness, loss of two limbs, brain damage)
- Grave (e.g. quadriplegia, severe brain damage, lifelong care or fatal prognosis)
- Death

Temporary – Minor had the highest number of closed claims reported. Death had the highest number of open claims. Permanent - Major had the highest average benefits and allocated loss adjustment expenses paid for closed claims and Grave had the highest average incurred losses and allocated loss adjustment expenses for open claims.

Average paid losses and expenses by category ranged from approximately \$13,000 to \$347,000 for closed claims. Average incurred amounts including reserves for allocated loss adjustment expenses ranged from approximately \$73,000 to \$505,000 for open claims.



#### Iowa Insurance Division Closed Claims Total Benefits and Expenses Calendar Year 2020 - By Severity of Claim

Severity of Injury	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Additional Payments After 6 Months from Disposition
Temporary - Minor	49	\$1,675,331	\$898,456	\$11,196
Temporary - Major	36	\$1,720,000	\$543 <i>,</i> 315	\$0
Permanent - Minor	33	\$5,506,000	\$2,145,520	\$14,755
Permanent - Major	33	\$9,350,000	\$2,107,282	\$0
Death	31	\$6,890,532	\$1,581,638	\$0
Temporary - Insignificant	12	\$118,500	\$33,914	\$18,028
Emotional Only	5	\$15,000	\$73,927	\$0
Other/Unknown	7	\$500,000	\$247,211	\$0
Grand Total	206	\$25,775,363	\$7,631,264	\$43,979



## Number of Closed Claims by Severity of Injury



#### Iowa Insurance Division Closed Claims Average Benefits and Expenses Calendar Year 2020- By Severity of Claim

Severity of Injury	Number of Claims	Average Benefits Paid	Average Allocated Loss Adjustment Expenses Paid	Average Additional Payments After 6 Months from Disposition
Emotional Only	5	\$3,000	\$14,785	\$0
Temporary - Insignificant	12	\$9 <i>,</i> 875	\$2,826	\$1,502
Temporary - Minor	49	\$34,190	\$18,336	\$228
Temporary - Major	36	\$47,778	\$15,092	\$0
Permanent - Minor	33	\$166,848	\$65,016	\$447
Permanent - Major	33	\$283 <i>,</i> 333	\$63,857	\$0
Death	31	\$222,275	\$51,021	\$0
Other/Unknown	7	\$71,429	\$35,316	\$0
Grand Total	206	\$125,123	\$37,045	\$213

Average Payments by Severity of Injury





#### Iowa Insurance Division Open Claims Total Benefits and Expenses Calendar Year 2020 - By Severity of Claim

Severity of Injury	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
Death	88	\$0	\$6,117,004	\$24,774,752
Temporary - Major	49	\$0	\$1,266,195	\$4,455,612
Permanent - Major	47	\$0	\$1,785,503	\$16,592,500
Permanent - Minor	42	\$450,000	\$877,720	\$4,276,505
Temporary - Minor	35	\$2,185	\$749,365	\$1,814,250
Permanent - Significant	30	\$0	\$871,270	\$2,860,001
Grave	14	\$0	\$2,374,190	\$4,698,020
Other/Unknown	6	\$0	\$16,065	\$440,000
Grand Total	311	\$452,185	\$14,057,311	\$59,911,640



#### Number of Open Claims by Severity of Injury



#### Iowa Insurance Division Open Claims Average Benefits and Expenses Calendar Year 2020 - By Severity of Claim

Severity of Injury	Number of Claims	Average Total Benefits Paid	Average Total Allocated Loss Adjustment Expenses Paid	Average Reserve for Incurred and Reported but not Disposed
Death	88	\$0	\$69,511	\$281,531
Temporary - Major	49	\$0	\$25,841	\$90,931
Permanent - Major	47	\$0	\$37,989	\$353,032
Permanent - Minor	42	\$10,714	\$20,898	\$101,822
Temporary - Minor	35	\$62	\$21,410	\$51,836
Permanent - Significant	30	\$0	\$29,042	\$95,333
Grave	14	\$0	\$169,585	\$335,573
Other/Unknown	6	\$0	\$2,678	\$73,333
Grand Total	311	\$1,454	\$45,200	\$192,642



## Average Incurred Losses and ALAE by Severity of Injury



## **Reports by Company**

The following summaries provide data by company for closed and open claims.

As described earlier in the report, a category was assigned in cases where a company did not use the categories provided in the data call to identify claims but a category could be reasonably assigned. Otherwise, the claim was listed in the Other/Unknown category. Any categories with less than five claims were combined and reported in total for the company.

Companies with fewer than five claims in total were reported as a group. Below are the grouped companies for the closed claim exhibits and for the open claim exhibits.

#### **Companies Grouped for Closed Claim Report**

Continental Casualty Insurance Company Coverys Specialty Insurance Company Hudson Insurance Company ISMIE Mutual Insurance Company Legacy ACE ProAssurance Company of America

#### **Companies Grouped for Open Claim Report**

Cincinnati Insurance Companies Church Mutual Continental Casualty Company Hudson Insurance Company NORCAL Insurance Company ProAssurance Company of America



#### Iowa Insurance Division Benefits and Expenses by Company Closed Claims by Specialty Calendar Year 2020

Company	Provider Specialty	Number of Claims	Total Benefits Paid	Total Allocated LAE + Attorney + All Other ALAE Paid	Additional Payments After 6 Months from Disposition
<b>CNA</b> Companies					
	All Other/Unknown	6	\$220,000	\$116,454	\$43,979
MMIC Insurance,	Inc.				
	Family Practice	7	\$606,000	\$542,351	\$0
	Obstetrics/Gynecology	5	\$400,000	\$411,857	\$0
	Orthopedics	8	\$0	\$143,613	\$0
	All Other/Unknown	82	\$7,605,863	\$5,763,609	\$0
NCMIC Insurance	Company and PSIC Insura	nce Company			
	Chiropractic	5	\$515,000	\$782,291	
	All Other/Unknown	6	\$0	\$230,802	\$0
ProAssurance Co	mpanies				
	Family Practice	5	\$3,000,000	\$2,599,252	\$0
	Hospital	5	\$3,000,000	\$531,618	\$0
	All Other/Unknown	16	\$3,008,500	\$965,577	\$0
ProSelect Insurar	nce Company				
	Hospital	15	\$3,625,000	\$1,535,320	\$0
	All Other/Unknown	8	\$1,125,000	\$302,827	\$0
The MedPro Grou	up				
	Family Practice	15	\$50,000	\$366,203	\$0
	Radiology	6	\$1,000,000	\$109,022	\$0
	All Other/Unknown	6	\$600,000	\$211,532	\$0
Grouped Compar	•			· · ·	·
	All Other/Unknown	11	\$1,020,000	\$652,371	\$0



#### Iowa Insurance Division Benefits and Expenses by Company Open Claims by Specialty Calendar Year 2020

Company	Provider Specialty	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
CNA Comp	anies				
	Registered Nurse	6	\$0	\$44,372	\$907,505
Coverys Sp	ecialty Insurance Company				
	All Other/Unknown	7	\$0	\$3,794,635	\$560,000
ISMIE Mutu	ual Insurance Company				
	All Other/Unknown	6	\$0	\$164,949	\$3,600,000
MMIC Insu	rance, Inc.				
	Anesthesiology	5	\$0	\$92,636	\$457,500
	Family Practice	13	\$0	\$344,075	\$490,000
	General Surgery	11	\$0	\$424,948	\$1,537,510
	Neurology	5	\$0	\$96,675	\$1,150,000
	Obstetrics/Gynecology	18	\$0	\$1,288,450	\$8,415,505
	Orthopedics	11	\$0	\$441,750	\$518,600
	Plastic Surgery	10	\$0	\$492,480	\$3,210,000
	All Other/Unknown	89	\$450,000	\$3,959,242	\$18,020,020
NCMIC Insu	urance Company and PSIC In	surance Con	npany		
	Orthopedics	6	\$0	\$128,658	\$2,335,000
	Radiology	6	\$0	\$44,816	\$4,600,000
	Chiropractic	15	\$0	\$418,253	\$2,460,000
	Clinic/Corporation	6	\$0	\$214,598	\$5,700,000
	All Other/Unknown	3	\$0	\$226,747	\$675,000
ProAssurar	nce Companies				
	Hospital	5	\$0	\$146,057	\$350,000
	All Other/Unknown	10	\$0	\$269,506	\$2,336,002
ProSelect I	nsurance Company				
	Hospital	12	\$0	\$205,629	\$1,101,000
	All Other/Unknown	8	\$0	\$80,762	\$1,023,000
The MedPr	o Group				
	Radiology	6	\$0	\$142,818	\$0
	Dentistry	5	\$0	\$224,130	\$0
	Clinic/Corporation	19	\$0	\$271,477	\$0
	All Other/Unknown	21	\$0	\$430,038	\$0
Grouped Co			-		·
•	All Other/Unknown	8	\$2,185	\$109,609	\$464,998



#### Iowa Insurance Division Benefits and Expenses by Company Closed Claims by Nature of Claim Calendar Year 2020

Company	Cause of Loss	Number of Claims	Total Benefits Paid	Total Allocated LAE + Attorney + All Other ALAE Paid	Additional Payments After 6 Months from Disposition
CNA Comp	panies				
	All Other/Unknown	6	\$220,000	\$116,454	\$43,979
MMIC Insu	irance, Inc.				
	Failure to Diagnose/Monitor/Treat	16	\$2,850,000	\$1,747,567	\$0
	Delay in Diagnosis	10	\$300,000	\$1,459,809	\$0
	Inappropriate/Improper Surgical Procedure	19	\$1,847,500	\$701,997	\$0
	Post-Operative Complications	8	\$1,500,000	\$463 <i>,</i> 300	\$0
	Treatment Related Cause	9	\$825 <i>,</i> 532	\$274,414	\$0
	Pregnancy or Birth Related Problems	5	\$400,000	\$103,924	\$0
	Fracture/Fall	5	\$0	\$234,078	\$0
	All Other/Unknown	30	\$888,831	\$1,876,341	\$0
NCMIC Ins	urance Company and PSIC Insurance Company	y			
	Treatment Related Cause	8	\$515,000	\$988,244	\$0
	All Other/Unknown	3	\$0	\$24,849	\$0
ProAssura	nce Companies				
	Failure to Diagnose/Monitor/Treat	12	\$9,000,000	\$3,846,138	\$0
	All Other/Unknown	14	\$8,500	\$250,309	\$0
ProSelect	Insurance Company				
	Inappropriate/Improper Surgical Procedure	10	\$850,000	\$469,930	\$0
	Treatment Related Cause	5	\$275,000	\$132,006	\$0
	All Other/Unknown	8	\$3,625,000	\$1,236,211	\$0
The MedP	ro Group				
	Failure to Diagnose/Monitor/Treat	9	\$1,000,000	\$233,927	\$0
	Delay in Diagnosis	6	\$600,000	\$243,586	\$0
	All Other/Unknown	12	\$50 <i>,</i> 000	\$209,244	\$0
Grouped C	Companies				
-	Failure to Diagnose/Monitor/Treat	5	\$0	\$309,943	\$0
	All Other/Unknown	6	\$1,020,000	\$342,428	\$0



#### Iowa Insurance Division Benefits and Expenses by Company Open Claims by Nature of Claim Calendar Year 2020

Company	Alleged Cause of Loss	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
CNA Compan	ies				
А	ll Other/Unknown	6	\$0	\$44,372	\$907,505
Coverys Spec	ialty Insurance Company				
La	ack of Monitoring Medication	5	\$0	\$34,342	\$110,000
А	ll Other/Unknown	2	\$0	\$3,760,294	\$450,000
ISMIE Mutua	I Insurance Company				
А	ll Other/Unknown	6	\$0	\$164,949	\$3,600,000
MMIC Insura	nce, Inc.				
Fa	ailure to Diagnose/Monitor/Treat	27	\$0	\$2,150,544	\$4,300,025
La	ack of Monitoring Medication	5	\$0	\$222,605	\$225,000
Ir	happropriate/Improper Surgical Procedure	53	\$450,000	\$1,566,442	\$11,933,255
Р	ost-Operative Complications	13	\$0	\$69,718	\$402,505
Т	reatment Related Cause	17	\$0	\$327,198	\$1,253,750
Р	regnancy or Birth Related Problems	28	\$0	\$1,734,651	\$12,300,000
A	ll Other/Unknown	19	\$0	\$1,069,098	\$3,384,600
NCMIC Insura	ance Company and PSIC Insurance Company	y			
Fa	ailure to Diagnose/Monitor/Treat	11	\$0	\$166,739	\$10,810,000
Т	reatment Related Cause	23	\$0	\$832,667	\$4,835,000
A	ll Other/Unknown	2	\$0	\$33,666	\$125,000
ProAssurance	e Companies				
Ir	nappropriate/Improper Surgical Procedure	11	\$0	\$283,795	\$2,310,002
A	ll Other/Unknown	4	\$0	\$131,769	\$376,000
ProSelect Ins	urance Company				
А	ll Other/Unknown	20	\$0	\$286,391	\$2,124,000
The MedPro	Group				
Fa	ailure to Diagnose/Monitor/Treat	12	\$0	\$231,644	\$0
D	elay in Diagnosis	5	\$0	\$146,135	\$0
Ir	nappropriate/Improper Surgical Procedure	8	\$0	\$311,046	\$0
Т	reatment Related Cause	10	\$0	\$122,990	\$0
A	ll Other/Unknown	16	\$0	\$256,648	\$0
Grouped Com	npanies				
A	ll Other/Unknown	8	\$2,185	\$109,609	\$464,998

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#### Iowa Insurance Division Benefits and Expenses by Company Closed Claims by Substance of Claim Calendar Year 2020

Company	Severity	Number of Claims	Total Benefits Paid	Total Allocated LAE + Attorney + All Other ALAE Paid	Additional Payments After 6 Months from Disposition
CNA Comp	oanies				
	All Other/Unknown	6	\$220,000	\$116,454	\$43,979
MMIC Insu	urance, Inc.				
	Temporary - Minor	29	\$535,331	\$651,580	\$0
	Temporary - Major	8	\$300,000	\$578 <i>,</i> 593	\$0
	Permanent - Minor	18	\$1,636,000	\$1,051,848	\$0
	Permanent - Major	28	\$5,250,000	\$3,147,324	\$0
	Death	13	\$890,532	\$1,348,220	\$0
	All Other/Unknown	6	\$0	\$83 <i>,</i> 865	\$0
NCMIC Ins	urance Company and I	SIC Insurar	nce Company		
	All Other/Unknown	11	\$515,000	\$1,013,093	\$0
ProAssura	nce Companies				
	Temporary - Minor	7	\$0	\$240,435	\$0
	Death	8	\$6,000,000	\$1,308,705	\$0
	All Other/Unknown	11	\$3,008,500	\$2,547,307	\$0
ProSelect	Insurance Company				
	Temporary - Major	12	\$400,000	\$287,086	\$0
	Permanent - Minor	6	\$850,000	\$451,561	\$0
	All Other/Unknown	5	\$3,500,000	\$1,099,501	\$0
The MedP	ro Group				
	Temporary - Minor	7	\$0	\$327,533	\$0
	Temporary - Major	10	\$1,000,000	\$163,717	\$0
	All Other/Unknown	10	\$650,000	\$195,507	\$0
Grouped C	Companies				
	Death	7	\$0	\$462,277	\$0
	All Other/Unknown	4	\$1,020,000	\$190,094	\$0



#### Iowa Insurance Division Benefits and Expenses by Company Open Claims by Substance of Claim Calendar Year 2020

Company	Severity	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
CNA Comp	panies				
	All Other/Unknown	6	\$0	\$44,372	\$907,505
Coverys Sp	pecialty Insurance Compar	ıy			
	Death	7	\$0	\$3,794,635	\$560,000
ISMIE Mut	tual Insurance Company				
	All Other/Unknown	6	\$0	\$164,949	\$3,600,000
MMIC Insu	urance, Inc.				
	Temporary - Minor	22	\$0	\$293,005	\$731,750
	Temporary - Major	19	\$0	\$539,596	\$1,885,610
	Permanent - Minor	24	\$450 <i>,</i> 000	\$560,266	\$2,851,505
	Permanent - Significant	7	\$0	\$165,706	\$340,000
	Permanent - Major	37	\$0	\$1,633,877	\$15,592,500
	Grave	10	\$0	\$2,333,126	\$3,498,020
	Death	41	\$0	\$1,613,638	\$8,889,750
	All Other/Unknown	2	\$0	\$1,042	\$10,000
NCMIC Ins	surance Company and PSIC	Insurance C	Company		
	Permanent - Minor	6	\$0	\$97,063	\$425,000
	Permanent - Significant	12	\$0	\$509,774	\$2,450,000
	Death	11	\$0	\$188,660	\$12,285,000
	All Other/Unknown	7	\$0	\$237,575	\$610,000
ProAssura	nce Companies				
	Temporary - Minor	5	\$0	\$211,281	\$875,000
	Temporary - Major	7	\$0	\$84,875	\$1,560,002
	All Other/Unknown	3	\$0	\$119,407	\$251,000
ProSelect	Insurance Company				
	Temporary - Major	7	\$0	\$145,434	\$700,000
	Permanent - Minor	5	\$0	\$65,895	\$749,000
	Death	6	\$0	\$75,062	\$600,000
	All Other/Unknown	2	\$0	\$0	\$75,000



Company	Severity	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
The MedPro Group					
	Temporary - Major	13	\$0	\$345,548	\$0
	Permanent - Significant	8	\$0	\$149,185	\$0
	Permanent - Major	9	\$0	\$109,834	\$0
	Death	13	\$0	\$279,873	\$0
	All Other/Unknown	8	\$0	\$184,023	\$0
Grouped C	Companies				
	All Other/Unknown	8	\$2,185	\$109,609	\$464,998

#### Continued



## Appendix A: Grouped Companies

#### NAIC Group Number 12: American International Group

AIG Assurance Co. AIG Insurance Co. - PR AIG Property Casualty Co. AIG Specialty Insurance Co. AIU Insurance Co. American Home Assurance Co. Blackboard Insurance Co. Blackboard Specialty Insurance Co. Commerce & Industry Insurance Co. Eaglestone Reinsurance Co Granite State Insurance Co. Illinois National Insurance Co Ins Co. of the State of PA Lexington Insurance Co.

#### NAIC Group Number 31: Berkshire Hathaway Group

- AmGUARD Insurance Co. AttPro RRG Reciprocal RRG AZGUARD Insurance Co. Berkshire Hathaway Assurance Corp. Berkshire Hathaway Direct Ins Berkshire Hathaway Homestate Berkshire Hathaway Specialty Ins BHHC Special Risks Insurance Co. Central States Indemnity Co. Columbia Insurance Co. Continental Divide Insurance Co. Cypress Ins Co. (CA) EastGUARD Insurance Co. Finial Reinsurance Co. GEICO Advantage Insurance Co. **GEICO** Casualty Co. **GEICO** Choice Insurance Co.
- **GEICO** County Mutual Insurance Co. **GEICO** General Insurance Co. **GEICO Indemnity Co. GEICO** Marine Insurance Co. **GEICO** Secure Insurance Co. Geico Texas County Mutual Ins. Co. General Reinsurance Corp. General Star Indemnity Co. General Star National Insurance Co. Genesis Insurance Co. Government Employees Ins. Co. Medical Protective Co. MedPro RRG MLMIC Insurance Co. Mount Vernon Fire Insurance Co Mount Vernon Specialty Ins Co. National Fire & Marine Insurance Co.

#### NAIC Group Number 158: Fairfax Financial Group

Allied World Assurance Co. (U.S.) Allied World Insurance Co. Allied World National Assurance Co. Allied World Specialty Insurance Co. Allied World Surplus Lines Ins American Underwriters Ins Co. Crum & Forster Indemnity Co. Crum & Forster Insurance Co. Crum & Forster Specialty Ins. Co. First Mercury Insurance Co. Greystone Insurance Co. Hilltop Specialty Insurance Co Hudson Excess Insurance Co. Hudson Insurance Co. MTAW Insurance Co. North River Insurance Co.

#### NAIC Group Number 218: CNA Ins Group

American Cas Co. of Reading PA Columbia Casualty Co. Continental Casualty Co. Continental Ins Co. of NJ Continental Insurance Co. Natl Fire Insurance Co. of Hartford Surety Bonding Co. of America Transportation Insurance Co. National Union Fire Insurance Co. New Hampshire Insurance Co. Stratford Insurance Co. Tudor Insurance Co. Western World Insurance Co.

National Indemnity Co of the South National Indemnity Co. National Liability & Fire Insurance Co. Natl Indemnity Co. of Mid-America NorGUARD Insurance Co. Oak River Insurance Co. Old United Casualty Co. PLICO Inc. Princeton Insurance Co. Radnor Specialty Insurance Co. Redwood Fire & Casualty Insurance Co. U.S. Liability Insurance Co. U.S. Underwriters Insurance Co Wellfleet Insurance Co. Wellfleet New York Ins Co. WestGUARD Insurance Co.

Odyssey Reinsurance Co. Seneca Insurance Co. Seneca Specialty Insurance Co. TIG Insurance Co. U.S. Fire Insurance Co. Vantapro Specialty Ins Co. Zenith Insurance Co. ZNAT Insurance Co.

Universal Surety of America Valley Forge Insurance Co. Western Surety Co.



#### NAIC Group Number 244: Cincinnati Financial Group

Cincinnati Casualty Co. Cincinnati Indemnity Co. Cincinnati Insurance Co. Cincinnati Specialty Underwriters

#### NAIC Group Number 508: National Group

Fortress Insurance Co.

OMS National Insurance Co. RRG

#### NAIC Group Number 626: Chubb Ltd Grp

ACE American Insurance Co. ACE Fire Underwriters Insurance Co ACE Ins Co. of the Midwest ACE P&C Insurance Co. Agri General Insurance Co. Atlantic Employers Insurance Co. Bankers Standard Insurance Co. Century Indemnity Co. Chubb Custom Insurance Co.	Chubb Indemnity Insurance Co. Chubb Insurance Co. of NJ Chubb Insurance Co. of PR Chubb Lloyds Ins Co. of Texas Chubb National Insurance Co. Executive Risk Indemnity Inc. Executive Risk Specialty Insurance Co. Federal Insurance Co. Great Northern Insurance Co.	Illinois Union Insurance Co. Indemnity Ins Co. of N Amer (PA) Insurance Co. of North America Pacific Employers Insurance Co Pacific Indemnity Co. Penn Millers Insurance Co. Vigilant Insurance Co. Westchester Fire Insurance Co. (PA) Westchester Surplus Lines Ins				
NAIC Group Number 1154: Coverys Gro	up					
Coverys RRG Inc.	Healthcare Underwriters Group Inc.	Preferred Professional Insurance Co.				
Coverys Specialty Insurance Co	Medical Prof Mutual Ins Co.	ProSelect Insurance Co.				
NAIC Crown Number 1282: NODCAL Cr						
NAIC Group Number 1282: NORCAL Gro FD Insurance Co.	NORCAL Mutual Insurance Co.	Pfd Physicians Med RRG a Mutual				
Medicus Insurance Co.	NORCAL Specialty Insurance Co.					
NAIC Group Number 2358: ISMIE Group						
ISMIE Indemnity Co.	ISMIE Mutual Insurance Co.	ISMIE RRG Inc.				
NAIC Group Number 2638: NCMIC Grp						
Professional Solutions Ins Co.	NCMIC Risk Retention Group Inc	NCMIC Insurance Co.				
NAIC Group Number 2698: ProAssurand						
Allied Eastern Indemnity Co.	Noetic Specialty Insurance Co.	ProAssurance Ins Co. of Am				
Eastern Advantage Assurance Co Eastern Alliance Insurance Co.	ProAssurance Amer Mutual A RRG ProAssurance Casualty Co.	ProAssurance Specialty Ins Co.				
Medmarc Casualty Insurance Co.	ProAssurance Indemnity Co.					
Weathare casually insurance co.	ToAssurance indefinity co.					
NAIC Group Number 4790: MMIC Grou	ρ					
Arkansas Mutual Insurance Co.	MMIC Insurance Inc.	UMIA Insurance Inc.				
NAIC Group Number 4851: Church Mut Church Mutual Insurance Co. S.I.	CM Regent Insurance Co.	CM Vantage Specialty Insurance Co.				
CM Indemnity Insurance Co.	CM Select Insurance Co.	Civi vantage specialty insurance CO.				
chi maching mourance co.						



Appendix B:

Data Call



## STATE OF IOWA

KIM REYNOLDS GOVERNOR

ADAM GREGG LT. GOVERNOR DOUG OMMEN COMMISSIONER OF INSURANCE

# DATE:April 6, 2021FROM:Iowa Insurance DivisionTO:All Admitted Insurance Companies Writing Medical Malpractice Insurance<br/>In Iowa

## ANNUAL REPORT

LINE(S) OF BUSINESS:	Medical Professional Liability Insurance per Line #11 of the Annual Statement.
REPORTING COMPANIES:	All companies licensed by the Iowa Insurance Division to write the line(s) of business noted above, with direct written premiums on or after January 1, 2020 through December 31, 2020.
DATA REQUESTED:	Regarding <i>closed claims</i> and <i>open claims</i> .
DUE DATE:	June 1, 2021
IID CONTACT PERSON:	Travis Grassel ( <u>travis.grassel@iid.iowa.gov</u> )

#### **GENERAL INSTRUCTIONS**

The following pages provide detailed directions for completing the report. The report must be submitted in the format provided. Record layout and formatting instructions will be found on subsequent pages. The report should consist of two EXCEL spreadsheets, one for closed claims and one for open claims, and the contact information sheet. The report should be submitted via e-mail to Travis Grassel at medmal@iid.iowa.gov by June 1, 2020.

## MEDICAL PROFESSIONAL LIABILITY (MEDICAL MALPRACTICE) INSURANCE CLOSED AND OPEN CLAIM REPORT REPORT INSTRUCTIONS/SPECIFICATIONS

- 1. Please provide data for all medical professional liability, medical malpractice, insurance claims, and lawsuits closed or disposed of on or after January 1, 2020 through December 31, 2020. Also, please provide data for all medical professional liability, medical malpractice, insurance claims, and lawsuits open as of December 31, 2020.
- 2. A claim for the purpose of this report is a formal or written demand for compensation under a medical professional liability, medical malpractice, insurance policy relating to allegations of liability on the part of one or more providers for any act, error, or omission in the rendering of, or failure to render medical services for medically related injuries.
- 3. A lawsuit for the purpose of this report is a complaint filed in any court in this state alleging liability on the part of one or more providers for any act, error, or omission in the rendering of, or failure to render medical services for medically related injuries.
- 4. If more than one insured is associated with an incident, report separately for each insured.
- 5. If more than one injured party is associated with an incident, report separately for each injured party.
- 6. If a claimant filed claims for the same injury under more than one policy, report separately for each policy.
- 7. Include only direct business.
- 8. If a claim has been reopened, but had not yet closed as of December 31, 2020, report this only within the open claims report.
- 9. If a claim was reopened and then closed within the period from January 1, 2020 through December 31, 2020, only include in the closed claims report.
- 10. Submit information for each closed claim, whether closed with or without payment.
- 11. Submit information for each open claim, whether a reserve amount has been established or not.

## MEDICAL PROFESSIONAL LIABILITY (MEDICAL MALPRACTICE) INSURANCE CLOSED AND OPEN CLAIM REPORT ELECTRONIC REPORTING INSTRUCTIONS

- 1. Please provide data in an EXCEL spreadsheet in accordance with the attached open and closed record layouts.
- 2. Please provide a separate spreadsheet for the closed claims report and a separate spreadsheet for the open claims report.
- 3. Companies within a group may report as a group rather than submitting separate reports for each company.
- 4. Each claim should be reported on one row within the appropriate spreadsheet, either the open claims spreadsheet or the closed claims spreadsheet.
- 5. Provide a separate document with the additional codes to explain the specified column when the date provided includes more codes than the closed and open layouts.
- 6. Data must be entered in the spreadsheets according to the definitions and report layout provided. To be accepted, data must be entered in date format as MM/DD/YYYY for dates; numeric format for dollar amounts, numbers, and any designated codes; and alpha-numeric format for other entries. For any columns where "Other" is chosen, enter in alpha-numeric format. Do not use formulas in the cells.
- Please submit your completed Microsoft Excel spreadsheets and a copy of the Contact Information sheet via e-mail to Travis Grassel at <u>medmal@iid.iowa.gov</u>. The Excel spreadsheets may be zipped using the WinZip program if the file is too large for e-mail.
- 8. The report is due June 1, 2021.
- 9. If you have any questions, please feel free to e-mail or call Travis Grassel at travis.grassel@iid.iowa.gov, (515) 281-4019.

#### **DEFINITIONS**

Admitted Insurance Company – An insurer who has been licensed by the insurance division within the state of Iowa to write specific lines of business.

Allocated Loss Adjustment Expenses – Expenses attributable to a particular claim (direct defense and cost containment expenses).

Calendar Year – January 1 through December 31.

**Claim** – A formal or written demand for compensation under a medical professional liability insurance policy relating to allegations of liability on the part of one or more providers for any act, error, or omission in the rendering of, or failure to render medical services for medically related injuries.

**Closed Claim** – A claim for which no further action is expected; final payment if any has been made. Report all claims closed within the reporting period regardless the date they were reported to the company.

**Deductible** – An amount of money set within a policy that must be paid by an insured before the insurer is liable for any payments.

**Direct Business** – Policies written by an insurer without consideration of reinsurance.

Loss Reserve – The liability established to pay for a claim.

Paid Losses (Indemnity Payment) – Losses, but not expenses, paid to a claimant to close a claim.

**Lawsuit** – A complaint filed in any court in Iowa alleging liability on the part of one or more providers for any act, error, or omission in the rendering of, or failure to render medical services for medically related injuries.

Limit of Insurance – The maximum amount an insurer will pay as set forth in a contract of insurance.

**Open Claim** – A claim for which further action is expected; the final payment has not been completed. Report all claims opened at the end of the calendar year regardless of the date they were filed.

**Reinsurance** – Insurance coverage for the risks covered by other insurance companies.

Reopened Claim – A claim that had been closed, but for some reason, needs further action or payment.

**Reserves** – The liability set up to pay for a claim when the claim is ultimately closed. Reserves may be established for potential loss payments and allocated loss adjustment expenses separately or combined.

**Reserves for Payment of Claims Incurred and Reported but not Disposed** – The liability set up to pay for a claim when the claim is ultimately closed. Report reserves on all open claims during the calendar year that continue to be open at year-end.

**Self-Insurance** – A program in which an individual or entity assumes all or a portion of the risk for its medical professional liability (medical malpractice) claims.

**Subrogation** – Reimbursement by a party responsible for a payment to another party that had paid the amount.

#### ALLEGED INJURY

Please classify each claim by the following severity of injury types.

- Emotional Only (e.g. fright, no physical damage)
- Temporary Insignificant (e.g. lacerations, contusions, minor scars, rash; no delay)
- Temporary Minor (e.g. infections, fracture, fall in hospital; recovery delayed)
- Temporary Major (e.g. surgical material left, drug side effect, brain damage; recovery delayed)
- Permanent Minor (e.g. loss of fingers, loss or damage to organs; includes non-disabling injuries)
- Permanent Significant (e.g. deafness, loss of limb, loss of eye, loss of one kidney or lung)
- Permanent Major (e.g. paraplegia, blindness, loss of two limbs, brain damage)
- Grave (e.g. quadriplegia, severe brain damage, lifelong care or fatal prognosis)
- Death
- Other/Unknown (e.g. injury was not a part of the list above, data was not captured or maintained)

#### MEDICAL PROFESSIONAL LIABILITY (MEDICAL MALPRACTICE) INSURANCE CLOSED AND OPEN CLAIM REPORT CONTACT INFORMATION

Please complete the following and submit with your spreadsheets.

Contact Person:		
Title:		
Telephone Number:		
Company:		
Address:		
Company: Address: City, State, ZIP:		
- · · · · · · · · · · · · · · · · · · ·		

I have provided all relevant and accurate closed and open claim data for the medical professional liability, medical malpractice, line of business for this data call. To the best of my knowledge, the information provided for this company is true and accurate as of December 31, 2020.

Person Responsible for Data Call: _	
Title:	
Date:	

## We thank you for your prompt attention to this matter!

The Iowa Insurance Division