

# Iowa Medical Malpractice Annual Report

For Calendar Year 2024

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August 2025 To: Iowa Insurance Division From: NovaRest, Inc.

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### **Executive Summary**

The Iowa Insurance Division requested open and closed claim data for calendar year 2024 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, 2024, through December 31, 2024, 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 \$188,000 for closed claims. The average incurred losses (total benefits paid plus reserve for incurred and reported but not disposed) plus allocated loss adjustment expenses were approximately \$166,000 for all open claims.

Of the provider specialties listed, Clinic/Corporation had the highest number of closed and open claims reported. Cardiology 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 and open claims. Delay in Diagnosis had the highest average benefits and ALAE paid for closed claims and Pregnancy or Birth Related Problems had the highest average incurred losses and ALAE for open claims.

By severity of claim categories, Death had the highest number for closed and open claims. Grave had the highest average benefits and ALAE paid for closed claims and Permanent – Major had the highest average incurred losses and ALAE for open claims. Average paid losses and ALAE by severity category ranged from approximately \$5,000 to \$785,000 for closed claims. Average incurred loss and ALAE by severity category ranged from approximately \$23,000 to \$428,000 for open claims.

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

In 2020, the Iowa Insurance Division (IID) began receiving requests for information about the companies' overall loss ratios. This information is not required to be reported under Iowa Code 505.27, but the IID acknowledges that the information is valuable. Being able to assess companies' claims in relation to the amount of premium collected will provide a better understanding of the adequacy or excessiveness of medical malpractice rates in Iowa. The IID compiled the medical malpractice loss ratio information that was attached as a supplemental report to the Iowa Medical Malpractice Annual Report for calendar year 2021 in response to the requests and to compare Iowa's market to neighboring states. As a result, changes were made to the Iowa code related to medical malpractice limits/noneconomic damage limitation figures. An updated supplemental report with data from 2020-2024 is attached with this report.

<sup>&</sup>lt;sup>1</sup> https://iid.iowa.gov/legal-resources/data/noneconomic-damage-limitation-figures



#### Introduction

Pursuant to Iowa Code Section 505.27, the Iowa Insurance Division requested insurance companies report medical malpractice claim data for calendar year 2024.

Licensed insurers who wrote medical malpractice insurance in lowa during 2024 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.



### **Companies**

Licensed insurers who wrote medical malpractice insurance in Iowa during 2024 were required to provide data for claims that closed during the year or that were open at the end of the year. Some companies report at the company level, and some report as a company group. For uniformity, we report all information at the company group level. All licensed insurers represented 42%<sup>2</sup> of the medical malpractice market in Iowa as determined by their percentage of calendar year 2024 direct written premiums.

Company groups that reported for 2024 and include at least one licensed insurer represent 100% of the licensed direct written medical malpractice premium in Iowa for 2024, and 90%<sup>3</sup> of the total (including non-licensed companies) direct written medical malpractice premium in Iowa for 2024.

However, not all company groups had open or closed claims to report in Iowa for 2024. Company groups that reported for 2024 include at least one licensed insurer, and reported non-zero claims in 2024 comprise 88%<sup>4</sup> of the licensed direct written medical malpractice premium in Iowa for 2024, and 80%<sup>5</sup> of the total (including non-licensed companies) direct written medical malpractice premium in Iowa for 2024.

Page 6 shows a history of the market shares for company groups that reported non-zero claims for the Medical Malpractice Annual Report for Calendar Year 2024 in the state of Iowa. The market shares were determined by dividing the company group's direct written premium for the year by the total direct written premium for all companies in that year. Note that this includes non-licensed insurers that are part of groups that include both licensed and non-licensed insurers. The market share for only licensed insurers in the state of Iowa is shown on page 7.

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, consistent with the prior year report, we have provided the market share report on a consistent insurance group basis.

<sup>&</sup>lt;sup>2</sup> This is a decrease from the prior report which indicated licensed insurers represented 48% of 2023 direct written premiums

<sup>&</sup>lt;sup>3</sup> This is a decrease from the prior report which indicated reporting company groups represented 92% of 2024 direct written premiums

<sup>&</sup>lt;sup>4</sup> Consistent with the prior report which indicated 89% of the licensed direct written medical malpractice direct written premiums represented by company groups with at least one licensed insurer represented and reporting non-zero claims in 2024.

<sup>&</sup>lt;sup>5</sup> This is an increase from the prior report which indicated 65% of the total direct written medical malpractice direct written premiums represented by company groups reporting non-zero claims in 2024.



# Iowa Insurance Division Medical Malpractice Closed and Open Claim Report Market Shares of Company Groups with Reported Non-Zero Claims Based on 2024 Iowa Direct Written Premiums

Entity Name <sup>6,7</sup>	NAIC Group Number	Calendar Year 2020	Calendar Year 2021	Calendar Year 2022	Calendar Year 2023	Calendar Year 2024
Apollo Global Mgmt Grp	4734	1.0%	1.1%	1.3%	1.2%	2.6%
Cincinnati Financial Group	244	0.6%	0.6%	0.6%	0.4%	0.4%
CNA Ins Group	218	9.2%	3.1%	3.1%	3.4%	3.7%
COPIC Group	4902	7.0%	9.7%	13.8%	23.6%	22.0%
Coverys Group	1154	4.1%	4.8%	5.5%	3.0%	2.1%
Curi Holdings Grp	184	32.7%	32.0%	30.4%	22.1%	17.1%
Doctors Co Group	831	0.7%	1.4%	2.0%	0.8%	0.7%
Fairfax Fin Group	158	0.5%	0.4%	0.4%	0.7%	0.7%
ISMIE Group	2358	0.2%	0.1%	0.2%	0.4%	0.1%
Liberty Mutual Group	111	22.5%	20.3%	11.1%	16.3%	21.2%
MAG Mut Ins Group	413	0.0%	0.0%	1.0%	2.2%	3.2%
National Group	508	0.7%	0.8%	0.8%	0.8%	0.8%
NCMIC Group	2638	3.6%	2.9%	3.1%	2.4%	2.1%
ProAssurance Corp Group	2698	1.5%	1.8%	2.0%	2.5%	2.1%
WR Berkley Corp Group	98	0.6%	0.7%	1.2%	1.3%	1.3%
Total Market Share for Group Reported Non-Zero Claims f		84.9%	79.8%	76.6%	81.2%	80.1%

<sup>&</sup>lt;sup>6</sup> Please note the numbers in this table will not match with prior reports as some groups that had claims to report for 2024 may not have reported in previous years. For example, Liberty Mutual group represents significant market share as can be seen above, but they did not have any open or closed claims to report in 2023, while they reported an open claim in 2024.

<sup>&</sup>lt;sup>7</sup> The company groupings are shown in Appendix A.



# Iowa Insurance Division Medical Malpractice Closed and Open Claim Report Market Shares of Licensed Company Groups with Reported Non-Zero Claims Based on 2024 Iowa Direct Written Premiums

	NAIC Group	Calendar Year	Calendar Year	Calendar Year	Calendar Year	Calendar Year
Entity Name	Number	2020	2021	2022	2023	2024
Apollo Global Mgmt Grp	4734	1.8%	2.0%	2.2%	2.2%	2.3%
Cincinnati Financial Group	244	1.1%	1.1%	1.2%	0.9%	0.8%
CNA Ins Group	218	3.7%	3.5%	3.7%	3.8%	3.8%
COPIC Group	4902	8.3%	10.7%	17.8%	29.2%	32.1%
Coverys Group	1154	5.5%	5.4%	5.7%	1.5%	1.8%
Curi Holdings Grp	184	58.9%	57.4%	48.8%	38.9%	34.7%
Doctors Co Group	831	0.4%	0.4%	0.6%	1.0%	1.1%
Fairfax Fin Group	158	0.4%	0.3%	0.3%	0.3%	0.3%
ISMIE Group	2358	0.4%	0.2%	0.2%	0.2%	0.2%
Liberty Mutual Group	111	1.1%	1.1%	1.2%	1.3%	1.4%
MAG Mut Ins Group	413	0.0%	0.0%	0.1%	0.3%	1.3%
National Group	508	0.1%	0.1%	0.1%	0.1%	0.1%
NCMIC Group	2638	6.5%	5.3%	5.8%	5.1%	4.9%
ProAssurance Corp Group	2698	1.2%	1.3%	1.4%	3.2%	3.0%
WR Berkley Corp Group	98	0.3%	0.3%	0.4%	0.4%	0.4%
Total Licensed and Chartered	Market					
Share for Groups with Reporte	d Non-Zero	89.7%	89.1%	89.6%	88.5%	88.2%
Claims for 2024						



#### **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 group 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 All Other/Unknown category. Any categories with less than five claims were combined and reported in total.

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

Several large losses were reported, for both open and closed claims. Twenty-eight (28) closed claims had total loss and allocated loss adjustment expenses of at least \$500,000. Sixteen (16) closed claims had total loss and allocated loss adjustment expense of at least \$1,000,000, with the five largest paid losses and ALAE being at least \$2 million. Forty-seven (47) open claims had incurred amounts of \$500,000 or more. Twenty (20) open claims had incurred loss and loss adjustment expense of at least \$1,000,000, with the six largest claims exceeding \$2,000,000.



### Limitations

The accuracy of this report depends on the accuracy of the data provided by the companies. NovaRest 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 lowa's medical malpractice insurance market. It includes claims from 2024 and earlier which either closed in 2024 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 \$188,000 for all closed claims. The average incurred losses and allocated loss adjustment expenses were approximately \$166,000 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 2024, without regard to when the injury occurred, or the claim was reported. The closed claims include all claims closed in 2024, 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.

Clinic/Corporation had the highest number of closed and open claims reported. Cardiology 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.

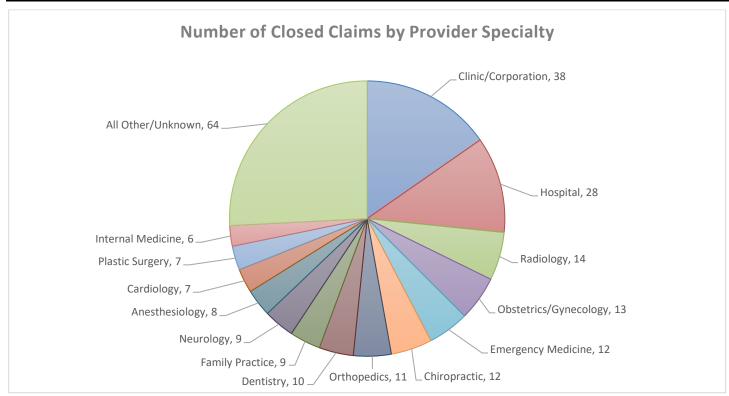


# Iowa Insurance Division Closed Claims

### **Total Benefits and Expenses**

Calendar Year 2024 - By Specialty

Provider Specialty	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Additional Payments After 6 Months from Disposition
Clinic/Corporation	38	\$4,192,500	\$1,288,765	\$0
Hospital	28	\$2,827,352	\$217,747	\$0
Radiology	14	\$1,010,000	\$442,143	\$0
Obstetrics/Gynecology	13	\$2,150,000	\$412,314	\$0
Emergency Medicine	12	\$950,000	\$522,938	\$0
Chiropractic	12	\$410,829	\$226,171	\$0
Orthopedics	11	\$1,170,558	\$508,107	\$0
Dentistry	10	\$1,506,000	\$98,186	\$0
Family Practice	9	\$4,395,000	\$883,045	\$0
Neurology	9	\$2,375,000	\$662,971	\$0
Anesthesiology	8	\$650,000	\$687,438	\$0
Cardiology	7	\$8,500,000	\$422,239	\$0
Plastic Surgery	7	\$0	\$186,441	\$0
Internal Medicine	6	\$0	\$19,925	\$0
All Other/Unknown	64	\$7,197,623	\$2,715,103	\$5,142
Total	248	\$37,334,863	\$9,293,534	\$5,142

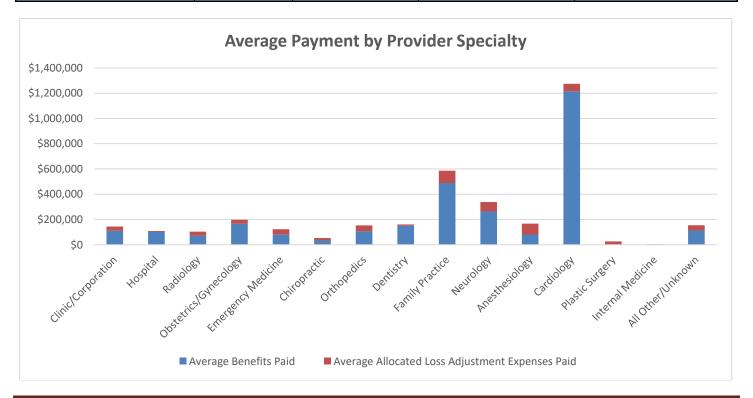




## Iowa Insurance Division Closed Claims

### Average Benefits and Expenses Calendar Year 2024 – By Specialty

Provider Specialty	Number of Claims	Average Benefits Paid	Average Allocated Loss Adjustment Expenses Paid	Average Payments After 6 Months from Disposition
Clinic/Corporation	38	\$110,329	\$33,915	\$0
Hospital	28	\$100,977	\$7,777	\$0
Radiology	14	\$72,143	\$31,582	\$0
Obstetrics/Gynecology	13	\$165,385	\$31,716	\$0
Emergency Medicine	12	\$79,167	\$43,578	\$0
Chiropractic	12	\$34,236	\$18,848	\$0
Orthopedics	11	\$106,414	\$46,192	\$0
Dentistry	10	\$150,600	\$9,819	\$0
Family Practice	9	\$488,333	\$98,116	\$0
Neurology	9	\$263,889	\$73,663	\$0
Anesthesiology	8	\$81,250	\$85,930	\$0
Cardiology	7	\$1,214,286	\$60,320	\$0
Plastic Surgery	7	\$0	\$26,634	\$0
Internal Medicine	6	\$0	\$3,321	\$0
All Other/Unknown	64	\$112,463	\$42,423	\$80
Total	248	\$150,544	\$37,474	\$21



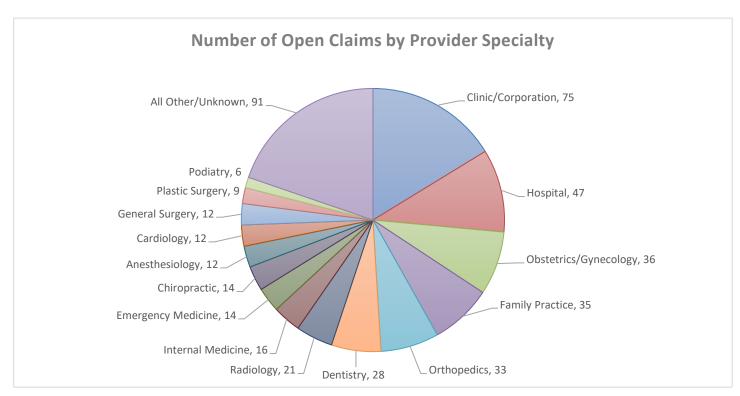


### Iowa Insurance Division Open Claims

### **Total Benefits and Expenses**

Calendar Year 2024 - By Specialty

Provider Specialty	Number of Claims	Total Benefits Paid	Total Allocated LAE Paid	Reserve for Incurred and Reported but not Disposed
Clinic/Corporation	75	\$1,002,000	\$799,424	\$4,805,733
Hospital	47	\$700,000	\$751,704	\$7,836,933
Obstetrics/Gynecology	36	\$500,000	\$1,494,283	\$8,558,099
Family Practice	35	\$125,000	\$1,293,691	\$7,743,516
Orthopedics	33	\$150,000	\$971,965	\$3,803,415
Dentistry	28	\$451,267	\$239,411	\$686,062
Radiology	21	\$0	\$426,573	\$1,905,707
Internal Medicine	16	\$0	\$150,595	\$1,976,001
Emergency Medicine	14	\$0	\$328,383	\$2,163,774
Chiropractic	14	\$2,847	\$664,758	\$935,000
Anesthesiology	12	\$0	\$340,223	\$1,061,889
Cardiology	12	\$0	\$260,398	\$1,836,603
General Surgery	12	\$0	\$657,070	\$2,709,121
Plastic Surgery	9	\$0	\$285,557	\$651,676
Podiatry	6	\$0	\$47,792	\$223,662
All Other/Unknown	91	\$0	\$6,028,708	\$11,757,226
Total	461	\$2,931,113	\$14,740,536	\$58,654,416



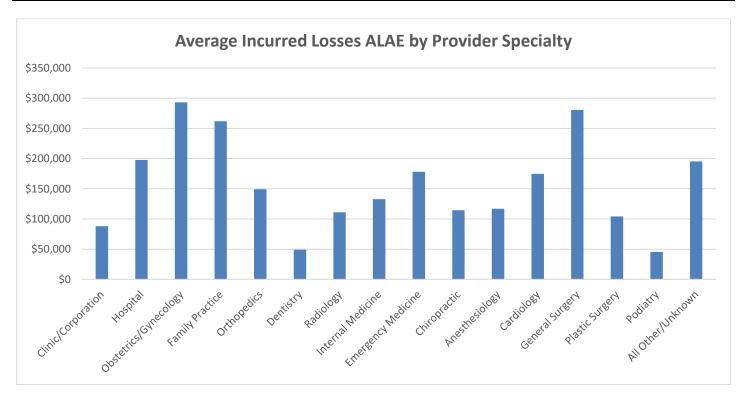


### Iowa Insurance Division Open Claims

### **Average Benefits and Expenses**

Calendar Year 2024 - By Specialty

Provider Specialty	Number of Claims	Average Benefits Paid	Average Allocated LAE Paid	Average Reserve for Incurred and Reported but not Disposed
Clinic/Corporation	75	\$13,360	\$10,659	\$64,076
Hospital	47	\$14,894	\$15,994	\$166,743
Obstetrics/Gynecology	36	\$13,889	\$41,508	\$237,725
Family Practice	35	\$3,571	\$36,963	\$221,243
Orthopedics	33	\$4,545	\$29,453	\$115,255
Dentistry	28	\$16,117	\$8,550	\$24,502
Radiology	21	\$0	\$20,313	\$90,748
Internal Medicine	16	\$0	\$9,412	\$123,500
Emergency Medicine	14	\$0	\$23,456	\$154,555
Chiropractic	14	\$203	\$47,483	\$66,786
Anesthesiology	12	\$0	\$28,352	\$88,491
Cardiology	12	\$0	\$21,700	\$153,050
General Surgery	12	\$0	\$54,756	\$225,760
Plastic Surgery	9	\$0	\$31,729	\$72,408
Podiatry	6	\$0	\$7,965	\$37,277
All Other/Unknown	91	\$0	\$66,250	\$129,200
Total	461	\$6,358	\$31,975	\$127,233





### **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.

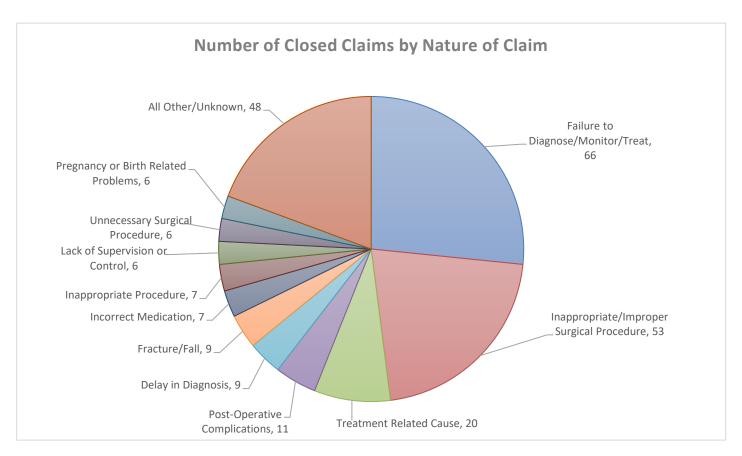
Failure to Diagnose, Monitor, and/or Treat had the highest number of closed and open claims reported. Delay in Diagnosis had the highest average benefits and allocated loss adjustment expenses paid for closed claims and Pregnancy or Birth Related Problems had the highest average incurred losses and ALAE for open claims.



# Iowa Insurance Division Closed Claims

### **Total Benefits and Expenses**

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	66	\$20,188,109	\$3,898,133	\$5,142
Inappropriate/Improper Surgical Procedure	53	\$2,434,432	\$1,555,328	\$0
Treatment Related Cause	20	\$1,066,231	\$491,798	\$0
Post-Operative Complications	11	\$115,000	\$265,954	\$0
Delay in Diagnosis	9	\$7,800,000	\$534,512	\$0
Fracture/Fall	9	\$2,021,831	\$991,952	\$0
Incorrect Medication	7	\$5,000	\$90,212	\$0
Inappropriate Procedure	7	\$40,000	\$57,610	\$0
Lack of Supervision or Control	6	\$1,296	\$4,538	\$0
Unnecessary Surgical Procedure	6	\$25,000	\$13,201	\$0
Pregnancy or Birth Related Problems	6	\$150,000	\$268,068	\$0
All Other/Unknown	48	\$3,487,964	\$1,122,227	\$0
Total	248	\$37,334,863	\$9,293,534	\$5,142

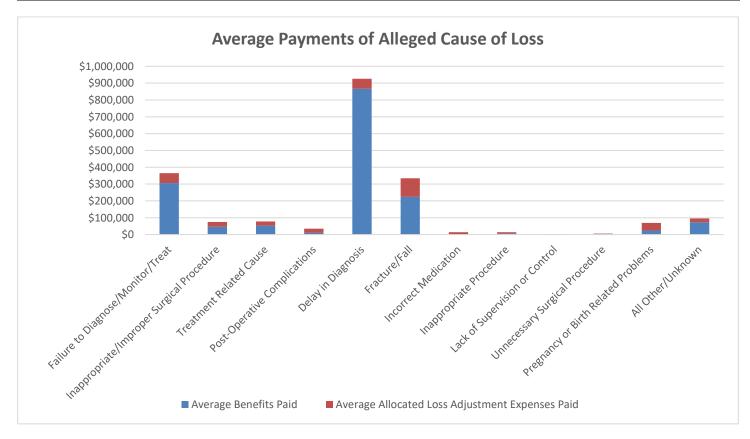




### Iowa Insurance Division Closed Claims

### **Average Benefits and Expenses**

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	66	\$305,880	\$59,063	\$78
Inappropriate/Improper Surgical Procedure	53	\$45,933	\$29,346	\$0
Treatment Related Cause	20	\$53,312	\$24,590	\$0
Post-Operative Complications	11	\$10,455	\$24,178	\$0
Delay in Diagnosis	9	\$866,667	\$59,390	\$0
Fracture/Fall	9	\$224,648	\$110,217	\$0
Incorrect Medication	7	\$714	\$12,887	\$0
Inappropriate Procedure	7	\$5,714	\$8,230	\$0
Lack of Supervision or Control	6	\$216	\$756	\$0
Unnecessary Surgical Procedure	6	\$4,167	\$2,200	\$0
Pregnancy or Birth Related Problems	6	\$25,000	\$44,678	\$0
All Other/Unknown	48	\$72,666	\$23,380	\$0
Total	248	\$150,544	\$37,474	\$21

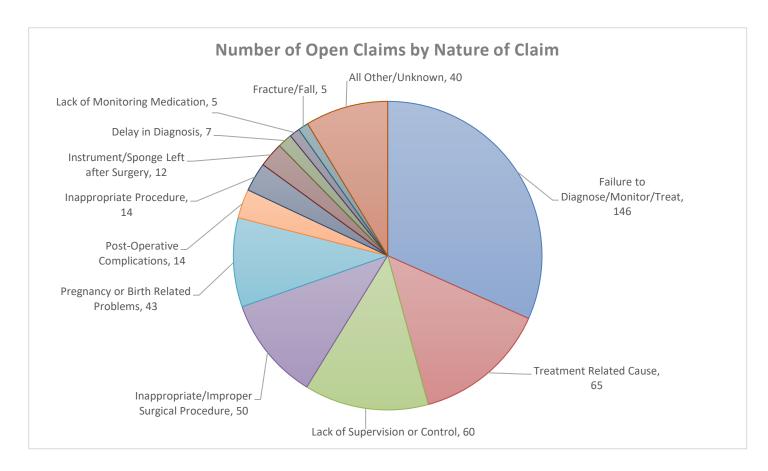




### Iowa Insurance Division Open Claims

### **Total Benefits and Expenses**

Alleged Cause of Loss	Number	Total	Total Allocated	Reserve for Incurred and
Alleged Cause of Loss	of Claims	Benefits Paid	LAE Paid	Reported but not Disposed
Failure to Diagnose/Monitor/Treat	146	\$2,211,267	\$3,653,003	\$18,403,564
Treatment Related Cause	65	\$2,000	\$2,073,398	\$9,516,616
Lack of Supervision or Control	60	\$700,000	\$923,484	\$6,735,449
Inappropriate/Improper Surgical Procedure	50	\$15,000	\$2,007,141	\$8,830,655
Pregnancy or Birth Related Problems	43	\$0	\$3,961,945	\$10,023,865
Post-Operative Complications	14	\$0	\$566,664	\$1,605,966
Inappropriate Procedure	14	\$0	\$301,403	\$1,354,256
Instrument/Sponge Left after Surgery	12	\$0	\$37,012	\$6,009
Delay in Diagnosis	7	\$0	\$104,413	\$751,497
Lack of Monitoring Medication	5	\$0	\$12,864	\$80,000
Fracture/Fall	5	\$0	\$117,206	\$255,274
All Other/Unknown	40	\$2,847	\$982,003	\$1,091,265
Total	461	\$2,931,113	\$14,740,536	\$58,654,416

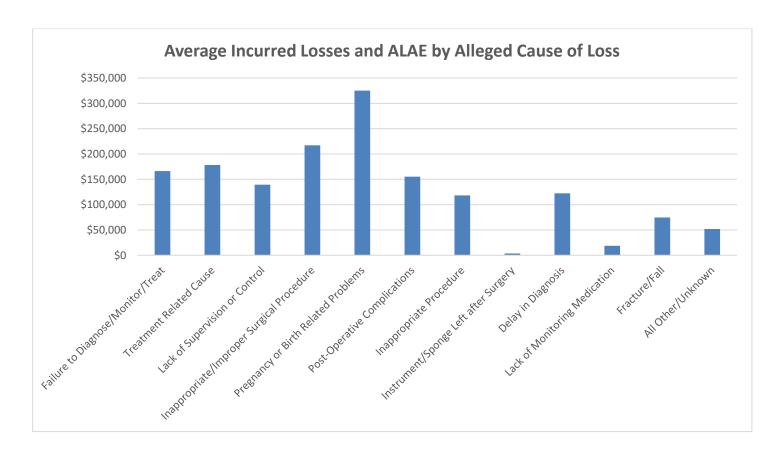




### Iowa Insurance Division Open Claims

### **Average Benefits and Expenses**

Alleged Cause of Loss	Number of Claims	Average Benefits Paid	Average Allocated LAE Paid	Average Reserve for Incurred and Reported but not Disposed
Failure to Diagnose/Monitor/Treat	146	\$15,146	\$25,021	\$126,052
Treatment Related Cause	65	\$31	\$31,898	\$146,409
Lack of Supervision or Control	60	\$11,667	\$15,391	\$112,257
Inappropriate/Improper Surgical Procedure	50	\$300	\$40,143	\$176,613
Pregnancy or Birth Related Problems	43	\$0	\$92,138	\$233,113
Post-Operative Complications	14	\$0	\$40,476	\$114,712
Inappropriate Procedure	14	\$0	\$21,529	\$96,733
Instrument/Sponge Left after Surgery	12	\$0	\$3,084	\$501
Delay in Diagnosis	7	\$0	\$14,916	\$107,357
Lack of Monitoring Medication	5	\$0	\$2,573	\$16,000
Fracture/Fall	5	\$0	\$23,441	\$51,055
All Other/Unknown	40	\$71	\$24,550	\$27,282
Total	461	\$6,358	\$31,975	\$127,233





### **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

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

Average paid losses and expenses by category ranged from approximately \$5,000 to \$785,000 for closed claims. Average incurred amounts including reserves for allocated loss adjustment expenses ranged from approximately \$23,000 to \$428,000 for open claims.

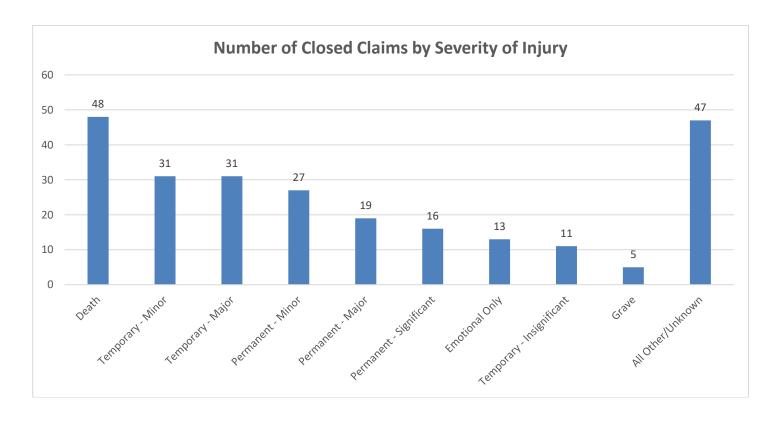


# Iowa Insurance Division Closed Claims

### **Total Benefits and Expenses**

Calendar Year 2024 - By Severity of Claim

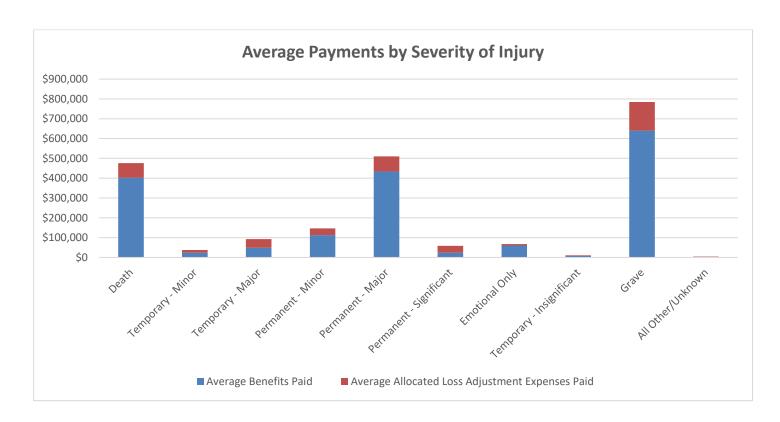
Severity of Injury	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Additional Payments After 6 Months from Disposition
Death	48	\$19,320,000	\$3,543,345	\$5,142
Temporary - Minor	31	\$739,420	\$428,937	\$0
Temporary - Major	31	\$1,505,000	\$1,369,505	\$0
Permanent - Minor	27	\$3,050,000	\$913,888	\$0
Permanent - Major	19	\$8,250,000	\$1,433,859	\$0
Permanent - Significant	16	\$375,000	\$564,211	\$0
Emotional Only	13	\$786,829	\$90,267	\$0
Temporary - Insignificant	11	\$85,000	\$34,067	\$0
Grave	5	\$3,200,000	\$722,031	\$0
All Other/Unknown	47	\$23,613	\$193,423	\$0
Total	248	\$37,334,863	\$9,293,534	\$5,142





# Iowa Insurance Division Closed Claims Average Benefits and Expenses Calendar Year 2024 – 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
Death	48	\$402,500	\$73,820	\$107
Temporary - Minor	31	\$23,852	\$13,837	\$0
Temporary - Major	31	\$48,548	\$44,178	\$0
Permanent - Minor	27	\$112,963	\$33,848	\$0
Permanent - Major	19	\$434,211	\$75,466	\$0
Permanent - Significant	16	\$23,438	\$35,263	\$0
Emotional Only	13	\$60,525	\$6,944	\$0
Temporary - Insignificant	11	\$7,727	\$3,097	\$0
Grave	5	\$640,000	\$144,406	\$0
All Other/Unknown	47	\$502	\$4,115	\$0
Total	248	\$150,544	\$37,474	\$21



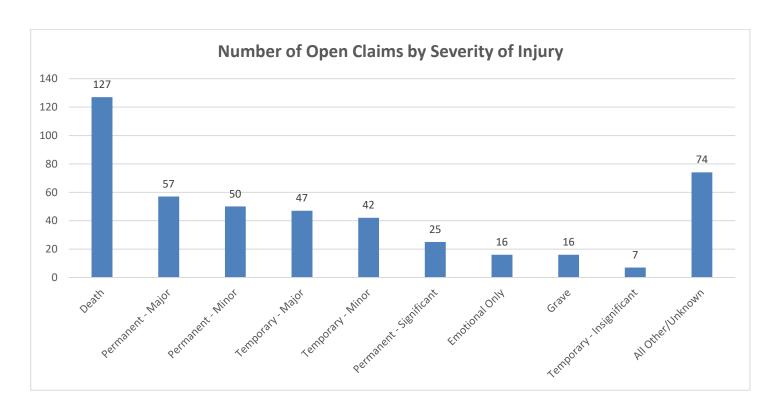


## Iowa Insurance Division Open Claims

### **Total Benefits and Expenses**

Calendar Year 2024 - By Severity of Claim

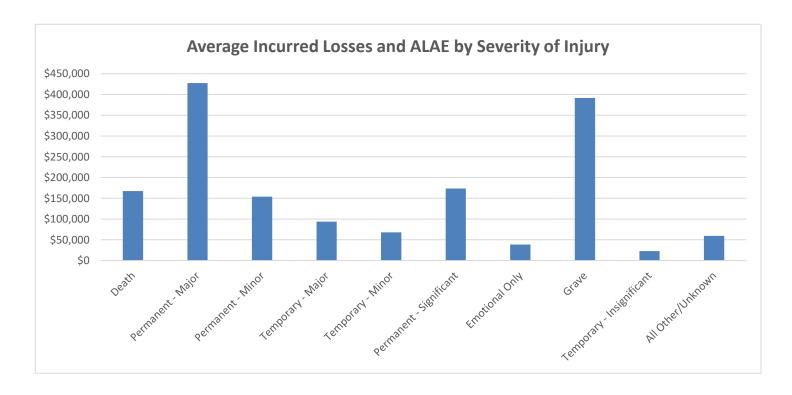
Severity of Injury	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
Death	127	\$825,000	\$4,106,269	\$16,301,068
Permanent - Major	57	\$500,000	\$4,844,956	\$19,026,934
Permanent - Minor	50	\$26,267	\$1,944,932	\$5,728,775
Temporary - Major	47	\$575,000	\$1,174,846	\$2,654,260
Temporary - Minor	42	\$0	\$864,322	\$1,987,658
Permanent - Significant	25	\$0	\$570,938	\$3,767,019
Emotional Only	16	\$2,847	\$356,108	\$258,005
Grave	16	\$0	\$599,869	\$5,663,654
Temporary - Insignificant	7	\$2,000	\$53,446	\$104,985
All Other/Unknown	74	\$1,000,000	\$224,851	\$3,162,059
Total	461	\$2,931,113	\$14,740,536	\$58,654,416





# Iowa Insurance Division Open Claims Average Benefits and Expenses Calendar Year 2024 – By Severity of Claim

Severity of Injury	Number of Claims	Average Benefits Paid	Average Allocated Loss Adjustment Expenses Paid	Average Reserve for Incurred and Reported but not Disposed	
Death	127	\$6,496	\$32,333	\$128,355	
Permanent - Major	57	\$8,772	\$84,999	\$333,806	
Permanent - Minor	50	\$525	\$38,899	\$114,575	
Temporary - Major	47	\$12,234	\$24,997	\$56,474	
Temporary - Minor	42	\$0	\$20,579	\$47,325	
Permanent - Significant	25	\$0	\$22,838	\$150,681	
Emotional Only	16	\$178	\$22,257	\$16,125	
Grave	16	\$0	\$37,492	\$353,978	
Temporary - Insignificant	7	\$286	\$7,635	\$14,998	
All Other/Unknown	74	\$13,514	\$3,039	\$42,731	
Total	461	\$6,358	\$31,975	\$127,233	





### **Reports by Company**

The following summaries provide data by company group 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 All Other/Unknown category. Any categories with less than five claims were combined and reported in total for the company.

Company groups with fewer than five claims in total were reported as a combined group. Below are the company groups that were combined for the closed claim exhibits and for the open claim exhibits.

### **Company Groups Combined for Closed Claim Report**

Allied World Group
CNA Insurance Company
Continental Casualty Company
ISMIE Mutual Insurance Company
MAG Mutual Insurance Co.
NORCAL Insurance
Preferred Professional Insurance Company
The Cincinnati Insurance Companies

### **Company Groups Combined for Open Claim Report**

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Allied World Group
CNA Insurance Company
Continental Casualty Company
Fortress Insurance Company
ISMIE Mutual Insurance Company
Liberty International Underwriters Inc.
MAG Mutual Insurance Co.
NORCAL Insurance
Preferred Professional Insurance Company
ProAssurance Companies
ProAssurance Insurance Company of America (PICA)
The Cincinnati Insurance Companies
The Doctors Company



# Iowa Insurance Division Benefits and Expenses by Company Closed Claims by Specialty Calendar Year 2024

		Number	ar Year 2024	Total Allocated LAE	Additional Payments
Company	Provider Specialty	of	<b>Total Benefits</b>	+ Attorney + All	After 6 Months from
Joinpan,	11011001 0000.00.,	Claims	Paid	Other ALAE Paid	Disposition
Aspen American Ins	surance Company				
·	Dentistry	6	\$71,000	\$126,981	\$0
COPIC Insurance					
	Emergency Medicine	6	\$750,000	\$233,789	\$0
	Obstetrics/Gynecology	7	\$2,000,000	\$689,342	\$0
	Hospital	25	\$2,827,352	\$265,675	\$0
	Clinic/Corporation	27	\$2,992,500	\$1,352,312	\$0
	All Other/Unknown	24	\$521,915	\$507,953	\$0
Coverys Specialty I	nsurance Company				
	All Other/Unknown	7	\$645,000	\$310,956	\$0
Great Divide Insura	nce Company				
	Chiropractic	6	\$10,829	\$0	\$0
MMIC Insurance, In	IC.				
	Family Practice	5	\$3,750,000	\$1,506,219	\$0
	Neurology	5	\$2,000,000	\$1,032,802	\$0
	Obstetrics/Gynecology	6	\$150,000	\$135,286	\$0
	Orthopedics	6	\$7,126	\$633,462	\$0
	Plastic Surgery	6	\$0	\$365,472	\$0
	All Other/Unknown	58	\$7,189,140	\$6,464,430	\$0
NCMIC Insurance C	Company / Professional Sol	lutions Insi	rance Company		
	Radiology	6	\$10,000	\$267,893	\$0
	All Other/Unknown	4	\$440,000	\$373,638	\$0
ProAssurance Com	panies				
	All Other/Unknown	5	\$2,300,000	\$1,036,355	\$0
ProSelect Insurance	e Company				
	All Other/Unknown	6	\$200,000	\$672,266	\$0
The Medical Protect	tive				
	Clinic/Corporation	8	\$1,200,000	\$1,070,840	\$0
	All Other/Unknown	8	\$8,500,000	\$1,040,760	\$0
Grouped Companie	 9s				
1					

\$1,770,000

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17

\$820,982

\$5,142

All Other/Unknown



# Iowa Insurance Division Benefits and Expenses by Company Open Claims by Specialty Calendar Year 2024

		Catend	ar Year 2024		
Company	Provider Specialty	Number Total To of Claims Benefits Paid		Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
Aspen American	Insurance Company				
	Dentistry	22	\$451,267	\$120,538	\$108,062
COPIC Insurance	9				
	Emergency Medicine	6	\$0	\$174,226	\$1,500,774
	Family Practice	12	\$125,000	\$119,989	\$1,755,511
	General Surgery	6	\$0	\$175,879	\$1,159,121
	Internal Medicine	8	\$0	\$46,249	\$653,751
	Obstetrics/Gynecology	19	\$500,000	\$625,403	\$5,564,597
	Orthopedics	14	\$150,000	\$175,435	\$804,565
	Radiology	12	\$0	\$1,798	\$408,202
	Hospital	44	\$700,000	\$666,067	\$7,321,933
	Clinic/Corporation	55	\$1,002,000	\$536,561	\$3,217,439
	All Other/Unknown	10	\$0	\$89,729	\$845,271
Coverys Specials	ty Insurance Company				
	All Other/Unknown	5	\$0	\$101,140	\$250,000
Great Divide Insu	ırance Company				
	Chiropractic	7	\$2,847	\$0	\$0
MMIC Insurance	, Inc.				
	Anesthesiology	7	\$0	\$283,099	\$873,125
	Family Practice	14	\$0	\$1,050,105	\$3,813,005
	General Surgery	5	\$0	\$474,089	\$1,550,000
	Obstetrics/Gynecology	13	\$0	\$722,760	\$2,835,500
	Orthopedics	10	\$0	\$454,194	\$2,548,850
	All Other/Unknown	92	\$0	\$6,177,418	\$11,411,745
NCMIC Insuranc	e Company / Professional S	Solutions Ins	urance Compan	у	
	Chiropractic	7	\$0	\$664,758	\$935,000
	All Other/Unknown	5	\$0	\$495,916	\$675,000
ProSelect Insura	nce Company				
	All Other/Unknown	10	\$0	\$260,245	\$2,641,000
The Medical Prot			·	· ·	· · ·
	Orthopedics	7	\$0	\$37,435	\$0
	Clinic/Corporation	15	\$0	\$195,268	\$0
	All Other/Unknown	26	\$0	\$356,985	\$0
Grouped Compa			+ 5	+ 355,530	Ψ0
	All Other/Unknown	30	\$0	\$735,249	\$7,781,966
	o anon ommiown		ΨΟ	Ψ, σσ,2-τσ	Ψ7,701,000



# Iowa Insurance Division Benefits and Expenses by Company Closed Claims by Nature of Claim Calendar Year 2024

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	
Company         Cause of Loss         Number of Claims         Total of Claims         LAE + Attorney + All Other ALAE Paid         Perfit Paid         Perfit Paid         All Other ALAE Paid         Perfit Paid         All Other ALAE Paid         Perfit Paid         Per						
	All Other/Unknown	6	\$71,000	\$126,981	\$0	
<b>COPIC</b> Insu	ırance					
	Failure to Diagnose/Monitor/Treat	24	\$7,170,983	\$2,028,799	\$0	
	Inappropriate/Improper Surgical Procedure	28	\$578,432	\$487,197	\$0	
	All Other/Unknown	37	\$1,342,352	\$533,075	\$0	
Coverys Sp	ecialty Insurance Company					
	Treatment Related Cause	7	\$645,000	\$310,956	\$0	
Great Divid	e Insurance Company					
	All Other/Unknown	6	\$10,829	\$0	\$0	
The Medica	l Protective					
	Failure to Diagnose/Monitor/Treat	15	\$9,700,000	\$2,040,065	\$0	
	All Other/Unknown	1	\$0	\$71,535	\$0	
MMIC Insur	rance, Inc.					
	Failure to Diagnose/Monitor/Treat	13	\$1,007,126	\$2,447,135	\$0	
	Delay in Diagnosis	7	\$6,800,000	\$1,051,906	\$0	
	Incorrect Medication	5	\$5,000	\$180,425	\$0	
	Inappropriate/Improper Surgical Procedure	20	\$1,475,000	\$2,092,755	\$0	
	Post-Operative Complications	8	\$50,000	\$519,031	\$0	
	Fracture/Fall	6	\$2,006,479	\$1,746,990	\$0	
	Inappropriate Procedure	5	\$0	\$35,166	\$0	
	All Other/Unknown	22	\$1,752,662	\$2,064,264	\$0	
NCMIC Inst	urance Company / Professional Solutions Ins	urance Coi	mpany			
	All Other/Unknown	10	\$450,000	\$641,531	\$0	
ProSelect II	nsurance Company					
	All Other/Unknown	6	\$200,000	\$672,266	\$0	
ProAssuran	ice Companies					
	All Other/Unknown	5	\$2,300,000	\$1,036,355	\$0	
Grouped Co	ompanies					
-	All Other/Unknown	17	\$1,770,000	\$820,982	\$5,142	



# Iowa Insurance Division Benefits and Expenses by Company Open Claims by Nature of Claim Calendar Year 2024

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
Aspen Ame	erican Insurance Company				
	Inappropriate/Improper Surgical Procedure	5	\$15,000	\$24,818	\$6,000
	Instrument/Sponge Left after Surgery	8	\$0	\$837	\$1,009
	All Other/Unknown	9	\$436,267	\$94,882	\$101,053
COPIC Insu	urance				
	Failure to Diagnose/Monitor/Treat	64	\$1,775,000	\$1,354,531	\$10,779,469
	Lack of Supervision or Control	57	\$700,000	\$764,551	\$6,285,449
	Treatment Related Cause	36	\$2,000	\$315,498	\$3,284,002
	Pregnancy or Birth Related Problems	15	\$0	\$125,146	\$2,204,854
	All Other/Unknown	14	\$0	\$51,611	\$677,389
Coverys Sp	ecialty Insurance Company				
	All Other/Unknown	5	\$0	\$101,140	\$250,000
Great Divid	le Insurance Company				
	All Other/Unknown	7	\$2,847	\$0	\$0
The Medica	al Protective				
	Failure to Diagnose/Monitor/Treat	33	\$0	\$343,935	\$0
	All Other/Unknown	15	\$0	\$245,753	\$0
MMIC Insui	rance, Inc.				
	Failure to Diagnose/Monitor/Treat	29	\$0	\$1,674,655	\$4,671,060
	Delay in Diagnosis	6	\$0	\$95,610	\$660,300
	Inappropriate/Improper Surgical Procedure	35	\$0	\$1,908,534	\$7,254,653
	Post-Operative Complications	6	\$0	\$353,718	\$840,005
	Pregnancy or Birth Related Problems	26	\$0	\$3,728,445	\$7,664,010
	Inappropriate Procedure	11	\$0	\$232,634	\$851,255
	All Other/Unknown	28	\$0	\$1,168,069	\$1,090,942
NCMIC Inst	urance Company / Professional Solutions Ins	urance Con	npany		
	Treatment Related Cause	9	\$0	\$1,051,935	\$1,450,000
	All Other/Unknown	3	\$0	\$108,739	\$160,000
ProSelect I	nsurance Company		_		
	All Other/Unknown	10	\$0	\$260,245	\$2,641,000
Grouped Co	ompanies				
-	Failure to Diagnose/Monitor/Treat	11	\$0	\$112,619	\$2,153,002
	All Other/Unknown	19	\$0	\$622,630	\$5,628,964



# Iowa Insurance Division Benefits and Expenses by Company Closed Claims by Substance of Claim Calendar Year 2024

Company	Severity	Number of Claims	Total Benefits Paid	Total Allocated LAE + Attorney + All Other ALAE Paid	Additional Payments After 6 Months from Disposition
Aspen Americ	can Insurance Company				-
	All Other/Unknown	6	\$71,000	\$126,981	\$0
COPIC Insura	nce				
	Temporary - Insignificant	6	\$0	\$42,727	\$0
	Temporary - Minor	13	\$274,415	\$102,910	\$0
	Temporary - Major	5	\$25,000	\$17,699	\$0
	Permanent - Minor	8	\$325,000	\$271,433	\$0
	Permanent - Major	10	\$3,000,000	\$1,391,887	\$0
	Death	13	\$5,450,000	\$868,727	\$0
	All Other/Unknown	34	\$17,352	\$353,688	\$0
Coverys Spec	cialty Insurance Company				
	All Other/Unknown	7	\$645,000	\$310,956	\$0
Great Divide I	Insurance Company				
	Emotional Only	6	\$10,829	\$0	\$0
The Medical P	Protective				
	Death	7	\$9,500,000	\$1,410,561	\$0
	All Other/Unknown	9	\$200,000	\$701,039	\$0
MMIC Insurar	nce, Inc.				
	Temporary - Minor	11	\$259,005	\$505,319	\$0
	Temporary - Major	13	\$1,030,000	\$1,732,691	\$0
	Permanent - Minor	7	\$400,000	\$627,904	\$0
	Permanent - Significant	10	\$0	\$355,611	\$0
	Permanent - Major	9	\$5,250,000	\$1,475,832	\$0
	Death	18	\$3,200,000	\$4,358,500	\$0
	All Other/Unknown	18	\$2,957,261	\$1,081,816	\$0
NCMIC Insura	ance Company / Profession	al Solutions	Insurance Comp	any	
	Temporary - Major	8	\$450,000	\$628,339	\$0
	All Other/Unknown	2	\$0	\$13,192	\$0
ProSelect Ins	urance Company				
	All Other/Unknown	6	\$200,000	\$672,266	\$0
ProAssurance	e Companies				
	All Other/Unknown	5	\$2,300,000	\$1,036,355	\$0
Grouped Com	npanies				
•	Death	6	\$350,000	\$564,172	\$5,142
	All Other/Unknown	11	\$1,420,000	\$256,810	\$0



# Iowa Insurance Division Benefits and Expenses by Company Open Claims by Substance of Claim Calendar Year 2024

1		- Outon	ar Year 2024		
Company	Severity	Number of Claims	Total Benefits Paid	Total Allocated Loss Adjustment Expenses Paid	Reserve for Incurred and Reported but not Disposed
Aspen Ame	erican Insurance Company				
	Temporary - Major	8	\$425,000	\$19,542	\$9
	Permanent - Minor	6	\$26,267	\$21,926	\$101,036
	All Other/Unknown	8	\$0	\$79,069	\$7,017
COPIC Inst	ırance				
	Temporary - Minor	17	\$0	\$95,326	\$724,674
	Temporary - Major	15	\$150,000	\$248,729	\$921,271
	Permanent - Minor	12	\$0	\$266,273	\$1,098,727
	Permanent - Significant	5	\$0	\$97,991	\$1,242,009
	Permanent - Major	26	\$500,000	\$918,072	\$8,281,928
	Death	43	\$825,000	\$791,482	\$7,802,518
	All Other/Unknown	68	\$1,002,000	\$193,464	\$3,160,036
Coverys Sp	ecialty Insurance Company				
	Grave	5	\$0	\$101,140	\$250,000
Great Divid	le Insurance Company				
l	Emotional Only	7	\$2,847	\$0	\$0
The Medica	al Protective			·	·
	Temporary - Major	6	\$0	\$39,145	\$0
	Permanent - Minor	9	\$0	\$78,729	\$0
	Permanent - Significant	6	\$0	\$99,655	\$0
	Death	25	\$0	\$341,561	\$0
	All Other/Unknown	2	\$0	\$30,598	\$0
MMIC Insu	rance, Inc.				
	Emotional Only	5	\$0	\$356,108	\$257,005
	Temporary - Minor	12	\$0	\$587,507	\$840,023
	Temporary - Major	16	\$0	\$858,116	\$1,706,980
	Permanent - Minor	11	\$0	\$502,994	\$2,649,005
	Permanent - Significant	13	\$0	\$373,293	\$2,525,010
	Permanent - Major	28	\$0	\$3,714,600	\$6,767,005
	Death	44	\$0	\$2,505,657	\$5,498,544
	All Other/Unknown	12	\$0	\$263,390	\$2,788,653
NCMIC Inst	urance Company / Profession	al Solutions In	surance Company	1	
	Permanent - Minor	8	\$0	\$965,499	\$1,375,000
	All Other/Unknown	4	\$0	\$195,175	\$235,000
ProSelect I	nsurance Company				
	All Other/Unknown	10	\$0	\$260,245	\$2,641,000
Grouped C	ompanies				
•	Death	14	\$0	\$407,261	\$3,000,003
	All Other/Unknown	16	\$0	\$327,988	\$4,781,963
			• • • • • • • • • • • • • • • • • • • •	. ,	. , ,



# Appendix A: Grouped Companies

### **NAIC Group Number 98: WR Berkley Corp Group**

Acadia Insurance Co.

Admiral Indemnity Co.

Admiral Insurance Co.

Berkley Assurance Co.

Berkley Casualty Co.

Berkley Insurance Co.

Berkley Luxury Insurance Co.

Berkley National Insurance Co.

Berkley Prestige Insurance Co.

Berkley Regional Insurance Co.

Berkley Specialty Insurance Co
Carolina Casualty Insurance Co
Clermont Insurance Co.
Continental Western Ins Co.
Firemen's Ins Co. of WA D.C.
Gemini Insurance Co.
Great Divide Insurance Co.
Intrepid Casualty Co.
Intrepid Insurance Co.
Intrepid Specialty Ins Co.

Lbrty Mutl Mid-Atlantic Ins Co

Key Risk Insurance Co.
Midwest Employers Casualty Co.
Nautilus Insurance Co.
Preferred Employers Ins Co.
Riverport Insurance Co.
StarNet Insurance Co.
Tri-State Insurance Co. MN
Union Insurance Co.
Union Standard Lloyds

### **NAIC Group Number 111: Liberty Mutual Group**

America First Insurance Co. America First Lloyd's Ins Co. American Compensation Ins Co. American Economy Insurance Co. American Fire & Casualty Co. American States Ins Co. of TX American States Insurance Co. American States Lloyds Ins Co. American States Pfd Ins Co. Bloomington Comp Insurance Co. Colorado Casualty Insurance Co Consolidated Insurance Co. Employers Ins Co. Wausau Excelsior Insurance Co. First Liberty Insurance Corp. First National Ins Co. of Am General Insurance Co. of Am Golden Eagle Insurance Corp. Hawkeye-Security Insurance Co. Indiana Insurance Co. Insurance Co. of Illinois Ironshore Indemnity Inc. Ironshore Specialty Ins Co.

Liberty County Mutual Ins Co. Liberty Ins Underwriters Inc. Liberty Insurance Corp. Liberty Lloyds of Texas Ins Co Liberty Mutual Fire Ins Co. Liberty Mutual Insurance Co. Liberty Mutual Personal Ins Co Liberty Northwest Ins Corp. Liberty Personal Insurance Co. Liberty Surplus Insurance Corp LM General Insurance Co. LM Insurance Corp. LM P&C Insurance Co. Meridian Security Insurance Co Mid-American F&C Co. Midwestern Indemnity Co. Milbank Insurance Co. Montgomery Mutual Insurance Co National Insurance Assn. Netherlands Insurance Co. North Pacific Insurance Co. Ohio Casualty Insurance Co.

Ohio Security Insurance Co. Oregon Automobile Insurance Co Patrons Mutual Ins Co. of CT Peerless Indemnity Ins Co. Peerless Insurance Co. Plaza Insurance Co. Rockhill Insurance Co. Safeco Insurance Co Indiana Safeco Insurance Co of America Safeco Insurance Co. of IL Safeco Insurance Co. of Oregon Safeco Lloyds Insurance Co. Safeco National Insurance Co. Safeco Surplus Lines Ins Co. San Diego Insurance Co. State Auto Insurance Co. of OH State Auto Insurance Co. of WI State Auto P&C Insurance Co. State Automobile Mutual Ins Co Wausau Business Insurance Co. Wausau General Insurance Co. Wausau Underwriters Ins Co. West American Insurance Co.



### **NAIC Group Number 158: Fairfax Fin Group**

Allied World Assr Co. (U.S.) DNA Insurance Co. Seneca Insurance Co.

Allied World Insurance Co. First Mercury Insurance Co. Seneca Specialty Insurance Co.

Allied World National Assr Co. Greystone Insurance Co. TIG Insurance Co.

Allied World Specialty Ins Co. Hilltop Specialty Insurance Co. U.S. Fire Insurance Co. Allied World Surplus Lines Ins Hudson Excess Insurance Co. Vantapro Specialty Ins Co.

American Underwriters Ins Co. Hudson Insurance Co. Zenith Insurance Co. Crum & Forster Indemnity Co. MTAW Insurance Co. ZNAT Insurance Co.

Crum & Forster Insurance Co. North River Insurance Co. Crum & Forster Spclty Ins Co. Odyssey Reinsurance Co.

### NAIC Group Number 184: Curi Holdings Grp (Previously MMIC Group with NAIC group code 4790)

Arkansas Mutual Insurance Co. Michigan Prof Ins Exchange UMIA Insurance Inc.

Medical Mutual Ins Co. of NC MMIC Insurance Inc.

Medical Security Insurance Co. MMIC RRG Inc.

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

American Cas Co. Reading PA Continental Insurance Co. Transportation Insurance Co. Bantry Insurance Co. Inverin Insurance Co. Universal Surety America

Columbia Casualty Co. Lismore Insurance Co. Valley Forge Insurance Co. Continental Casualty Co. Natl Fire Ins Co. of Hartford Western Surety Co.

Continental Ins Co. NJ Surety Bonding Co. America

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

Cincinnati Casualty Co. Cincinnati Insurance Co.

Cincinnati Indemnity Co. Cincinnati Spclty Underwriters

#### NAIC Group Number 413: MAG Mut Ins Group

MAG Mutual Insurance Co. MDAdvantage Insurance Co of NJ West Virginia Mutual Ins Co.

MagMutual RRG Inc. Professional Security Ins Co

#### **NAIC Group Number 508: National Group**

Dental Prof SpcIty Risk Fortress Insurance Co. OMS National Insurance Co. RRG

### **NAIC Group Number 831: Doctors Co Group**

Doctors Co. RRG A Reciprocal TDC National Assurance Co. The Doctors Co. an Interinsura

Hospitals Insurance Co. TDC Specialty Insurance Co.

#### **NAIC Group Number 1154: Coverys Group**

Coverys RRG Inc. Medical Prof Mutual Ins Co. ProSelect Insurance Co.

Coverys Specialty Insurance Co Preferred Professional Ins Co.



**NAIC Group Number 2358: ISMIE Group** 

ISMIE Indemnity Co. ISMIE Mutual Insurance Co. ISMIE RRG Inc.

**NAIC Group Number 2638: NCMIC Group** 

NCMIC Insurance Co. NCMIC Risk Retention Group Inc Professional Solutions Ins Co.

**NAIC Group Number 2698: ProAssurance Corp Group** 

Allied Eastern Indemnity Co. Medmarc Casualty Insurance Co. ProAssurance Indemnity Co.

Eastern Advantage Assurance Co NORCAL Insurance Co. ProAssurance Ins Co. of Am

Eastern Alliance Insurance Co. NORCAL Specialty Insurance Co. ProAssurance Spclty Ins Co. FD Insurance Co. Pfd Physicians Med RRG a Mutl

Medicus Insurance Co. ProAssurance Amer Mutl A RRG

NAIC Group Number 4734: Apollo Global Mgmt Grp

Alea North America Ins Co. Aspen Specialty Insurance Co. ProBuilders Spclty Ins Co. RRG

Aspen American Insurance Co. National American Ins Co of CA SPARTA Insurance Co.

**NAIC Group Number 4902: COPIC Group** 

Alestri Insurance Co. COPIC A RRG COPIC Insurance Co.



# Appendix B:

# **Annual Report Instructions**





#### Insurance Division

DOUG OMMEN, INSURANCE COMMISSIONER

DATE: April 30, 2025

FROM: Iowa Department of Insurance & Financial Services - Iowa Insurance Division TO: All Admitted Insurance Companies Writing Medical Malpractice Insurance 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, 2024, through

December 31, 2024.

DATA REQUESTED: Regarding closed claims and open claims.

DUE DATE: Monday, June 2, 2025

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 Monday, June 2, 2025.

1963 Bell Avenue | Des Moines, IA 50315 | 515-654-6600 | iid.iowa.gov



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

- Please provide data for all medical professional liability, medical malpractice, insurance claims, and lawsuits closed or disposed of on or after January 1, 2024, through December 31, 2024. Also, please provide data for all medical professional liability, medical malpractice, insurance claims, and lawsuits open as of December 31, 2024.
- 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.
- 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.
- If more than one insured is associated with an incident, report separately for each insured.
- If more than one injured party is associated with an incident, report separately for each injured party.
- If a claimant filed claims for the same injury under more than one policy, report separately for each policy.
- Include only direct business.
- If a claim has been reopened, but had not yet closed as of December 31, 2024, report this only within the open claims report.
- If a claim was reopened and then closed within the period from January 1, 2024, through December 31, 2024, only include in the closed claims report.
- 10. Submit information for each closed claim, whether closed with or without payment.
- 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

- Please provide data in an EXCEL spreadsheet in accordance with the attached open and closed record layouts.
- Please provide a separate spreadsheet for the closed claims report and a separate spreadsheet for the open claims report.
- Companies within a group may report as a group rather than submitting separate reports for each company.
- Each claim should be reported on one row within the appropriate spreadsheet, either the open claims spreadsheet or the closed claims spreadsheet.
- 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 alphanumeric format for other entries. For any columns where "Other" is chosen, enter in alphanumeric format. Do not use formulas in the cells.
- Please submit your completed Excel spreadsheets and a copy of the Contact Information sheet via e-mail to Travis Grassel at <a href="medmal@iid.iowa.gov">medmal@iid.iowa.gov</a>. The Excel spreadsheets may be zipped using the WinZip program if the file is too large for e-mail.
- The report is due Monday, June 2, 2025.
- If you have any questions, please feel free to e-mail or call Travis Grassel at Travis.Grassel@iid.iowa.gov, (515) 654-6570.



#### **DEFINITIONS**

Admitted Insurance Company – An insurer who has been licensed by the insurance division within the state of lowa 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 of 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 lowa 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:
E-mail:
E-mail:
Company:
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, 2024.
Person Responsible for Data Call:
Date:
We thank you for your prompt attention to this matter!  The lowa Insurance Division



## **Appendix C:**

# Iowa Medical Malpractice Supplemental Multistate Regional Experience 2020 – 2024

### **Iowa Department of Insurance & Financial Services**

### **Iowa Insurance Division**

## Medical Malpractice

**Multistate Regional Experience Analysis** 

Direct Internal Expense Ratio: (Direct ULAE Incurred + Direct General Expenses)/Direct Premium Earned + Direct Other Acquisition/Direct Premium Written

<u>Direct Acquisition Expense Ratio:</u> (Direct Commissions & Brokerage + Direct Taxes, Licenses, and Fees)/(Direct Premiums Written)

Direct Loss & ALAE Ratio: (Direct Losses Incurred + Direct DCC Incurred)/Direct Premiums Earned

Direct Combined Ratio: Direct Loss & ALAE Ratio + Direct Internal Expense Ratio + Direct Acquisition Expense Ratio

DCC: Defense Cost & Containment

LAE: Loss Adjustment Expenses are all costs incurred by a company during the claim settlement process. Claim adjusters' fees, claim department overhead, and legal defense costs are examples of LAE.

ALAE: Allocated Loss Adjustment Expense are those costs that can easily be related to individual claims. Legal fees to defend against a specific claim or costs incurred by a claim adjuster assigned to one claim are ALAE.

ULAE: Unallocated Loss Adjustment Expense are those costs that are more difficult to assign to particular claims, such as claim department salaries.

Defense & Cost Containment: Include costs incurred in defending claims, including expert witness fees and other legal fees.

Adjusting & Other (A&O) Expenses: A&O includes all other expenses.

Note of explanation: In 1998, the insurance industry introduced new LAE definitions in an attempt to improve financial reporting consistency between companies in the US. Instead of categorizing loss adjustment expenses by allocated or unallocated for financial reporting purposes, costs are now split into defense cost and containment (DCC) and adjusting and other (A&O) expenses. Prior to the switch, companies with in-house attorneys sometimes coded legal expenses as ULAE, while companies using outside legal counsel coded these expenses as ALAE. This historic difference made comparing operations metrics across companies difficult. The new standardization of the definitions makes these comparisons more meaningful.

General Expense: General expenses include the remaining expenses associated with insurance operations and any other miscellaneous costs, excluding investment income expenses. Examples include overhead associated with the insurer's home office (e.g. building maintenance) and salaries of certain employees (e.g. actuaries).

Other Acquisition: Other acquisition costs are expenses that are paid to acquire business other than commissions and brokerage expenses. Costs associated with media advertisements, mailings to propsective insureds, and salaries of sales employees who do not work on a commission basis are included in

Commission & Brokerage: Commission and brokerage are amounts paid to agents or brokers as compensation for generating business. Typically, these amounts are paid as a percentage of premiums written. Commission rates may vary between new and renewal business. In addition, contingent commissions vary the commission based on the quality (e.g. loss ratio) or amount of business written (e.g. predetermined volume goals).

Taxes, Licenses, and Fees: Taxes, licenses, and fees include all taxes and miscellaneous fees due from the insurer excluding federal income taxes. Premium taxes and licensing fees are examples that would be included here.

## **Iowa Department of Insurance & Financial Services**

### **Iowa Insurance Division**

# Medical Malpractice Multistate Regional Experience Analysis 2020-2024

	<b>Grand Total</b>	<u>lowa</u>	<u>Illinois</u>	<u>Kansas</u>	Minnesota	<u>Missouri</u>	<u>Nebraska</u>	South Dakota	Wisconsin
5-Year Average Direct Loss & ALAE Ratio	74.4%	80.9%	75.8%	73.5%	63.8%	72.9%	72.6%	79.9%	54.0%
5-Year Average Direct Internal Expense Ratio	17.3%	18.4%	17.2%	18.0%	17.2%	17.4%	17.6%	17.5%	17.3%
5-Year Average Direct Acquisition Expense Ratio	11.0%	11.2%	12.2%	11.8%	12.8%	10.3%	11.6%	13.6%	9.8%
5-Year Average Combined Ratio	102.7%	110.5%	105.2%	103.4%	93.9%	100.6%	101.8%	111.0%	81.1%
Direct Loss & ALAE Ratios									
2020	78.8%	107.7%	88.4%	118.8%	63.3%	81.9%	96.9%	120.2%	62.5%
2021	74.2%	70.9%	74.7%	83.1%	41.8%	70.3%	80.3%	81.9%	16.3%
2022	73.1%	99.9%	62.2%	50.6%	65.6%	82.2%	65.9%	87.8%	68.5%
2023	74.4%	96.5%	89.7%	33.0%	88.4%	55.4%	43.2%	93.8%	64.7%
2024	71.5%	29.6%	63.9%	82.1%	59.9%	74.5%	77.0%	15.6%	57.9%
Direct Internal Expense Ratios									
2020	18.4%	18.9%	18.0%	19.3%	17.9%	18.3%	18.7%	19.4%	18.1%
2021	17.4%	18.6%	17.4%	18.1%	17.0%	17.3%	17.4%	17.6%	17.1%
2022	17.2%	17.9%	16.7%	17.7%	16.9%	<b>17.2</b> %	17.3%	17.0%	17.1%
2023	16.5%	18.0%	16.7%	17.3%	17.0%	17.0%	17.1%	17.0%	16.9%
2024	17.2%	18.5%	17.2%	17.8%	17.3%	17.3%	17.5%	16.8%	17.3%
Direct Acquisition Expense Ratios									
2020	10.7%	10.3%	12.0%	12.0%	12.6%	10.4%	11.4%	13.0%	9.4%
2021	11.0%	10.4%	12.7%	12.5%	12.8%	10.6%	11.0%	13.7%	9.8%
2022	10.9%	11.6%	12.3%	12.2%	12.7%	9.9%	12.8%	13.9%	9.7%
2023	11.2%	11.6%	11.8%	11.2%	13.0%	10.1%	11.8%	13.4%	9.8%
2024	11.3%	12.0%	12.4%	11.2%	13.1%	10.4%	10.9%	13.8%	10.2%
Combined Ratios									
2020	107.9%	136.8%	118.3%	150.1%	93.7%	110.6%	126.9%	152.6%	89.9%
2021	102.6%	99.8%	104.7%	113.7%	71.6%	98.2%	108.6%	113.2%	43.1%
2022	101.2%	129.4%	91.2%	80.5%	95.2%	109.4%	96.0%	118.7%	95.3%
2023	102.0%	126.2%	118.2%	61.5%	118.3%	82.5%	72.1%	124.2%	91.5%
2024	100.0%	60.1%	93.5%	111.1%	90.4%	102.2%	105.4%	46.1%	85.4%

