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Missouri

Medical Professional Liability Insurance Report

Statistics Section
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DIFP

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Other Publications

Available from the Missouri Department of Insurance, Financial Institutions & Professional Registration

The following reports are also available:

- Missouri Market Share Report
- Missouri Real Estate Malpractice (Closed Claim Report)
- Missouri Legal Malpractice (Closed Claim Report)
- Missouri Products Liability (Closed Claim Report)
- Missouri Medical Malpractice Insurance Report
- Missouri Health Maintenance Organization Report
- Missouri Life, Accident & Health Supplement Report
- Missouri Property and Casualty Supplement Report
- Missouri Commercial Liability Report
- Missouri Mortgage Guaranty Report
- Missouri Uninsured Automobile Report

Databases: For data requests, contact the Statistics Section at 573-751-3163. Some data are available for a fee.

- Medicare Supplement Experience Data
- Property and Casualty Supplement Data
- Missouri Zip Code data for homeowners/dwelling fire, farmowners (dwelling only, mobile home, earthquake, and private passenger automobile insurance.

Many reports, including this complaint report, are available at no cost on the DIFP website, at <http://insurance.mo.gov/reports/> For paper copies, inquire with the Statistics Section at the above number.

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Executive Summary

Data Sources

This report is based upon data provided by insurers and self-insured hospitals to the Missouri Department of Insurance, Financial Institutions and Professional Registration (DIFP). These data include open and closed claims that insurance companies and self-insured hospitals are required to report under Section 383.105 RSMo. The DIFP makes every possible effort to make sure these data are accurate and complete. However, the accuracy of this report depends largely upon the accuracy of the data filed by insurers and self-insured hospitals.

Additional information is derived from the Missouri “supplement to the annual statement” (see <http://insurance.mo.gov/reports/suppdata>). These data contain information about market segment, volume of business, market share, losses and expenses.

Changes to Report

Beginning last year, the format of this report departed substantially from prior reports. The most significant change was that individual claims are no longer reported, but rather counts and other statistics are displayed for *claimants* and *defendants*. A comparison of these various methods of aggregation is presented in the following table.

Historically, the DIFP data consisted of one record for each claim. In many instances, a single injury will produce multiple defendants. In addition, a single defendant may have multiple insurance coverages implicated in a single claim (for example, basic and excess policies), and each coverage counted as a single claim. Until recently, all data, such as average awards and the number of claims, were presented solely on a *per claim* basis, since the data did not possess a unique identifier to link claims associated with a single injury or claimant. Recently, the DIFP developed methods to link associated claims for each defendant and each claimant.

The scenario in the following table illustrates how a single legal action spawns 6 claims, even though there are only three defendants. As aggregation on a *per claimant* and a *per defendant* basis is much more meaningful than the traditional *per claim* aggregation, the latter has been dropped from the report. Individuals interested in the traditional claim counts should contact the department.

Comparison of Occurrences, Defendants, and Claims					
Claimant	Count	Defendants	Count	Claims	Count
An individual brings a claim against a physician, a radiologist, and a hospital, all of whom are alleged to have contributed to a given injury or related injuries	1	Physician	1	Physician's primary carrier reports a claim	1
				Physician's excess carrier reports a claim	1
		Radiologist	1	Original claim against a radiologist is closed due to inactivity	1
				The claim against the radiologist is subsequently reopened due to the filing of a lawsuit	1
		Hospital	1	Hospital reports a claim against its self-insured funds	1
				Hospital's excess carrier reports a claim	1
Total	1		3		6

Highlights

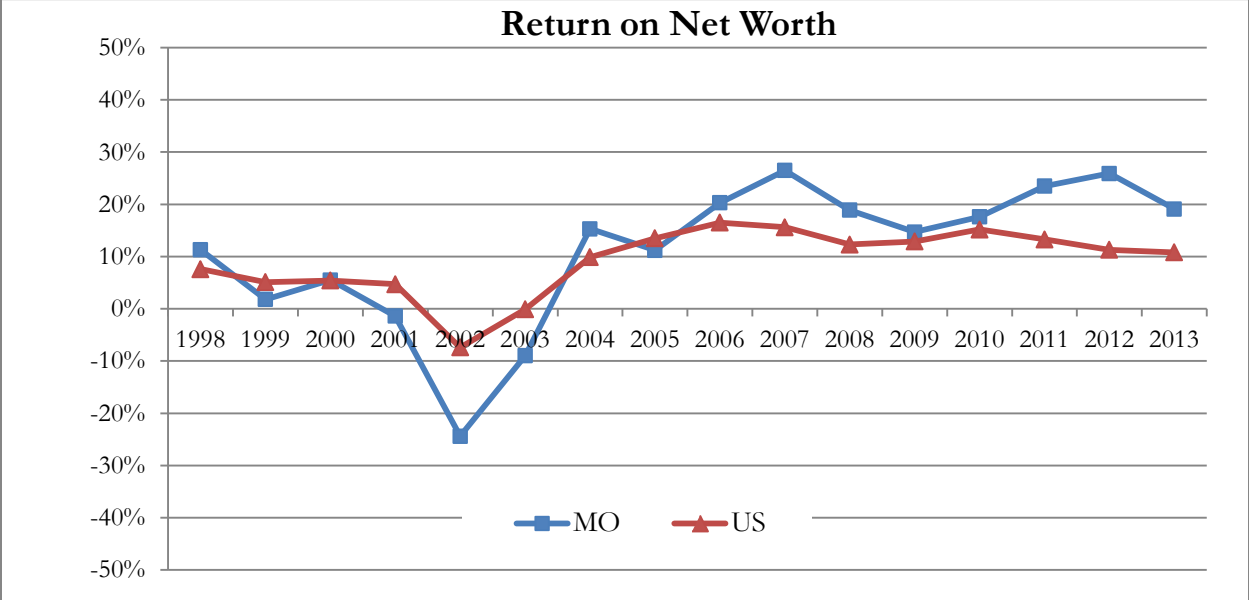
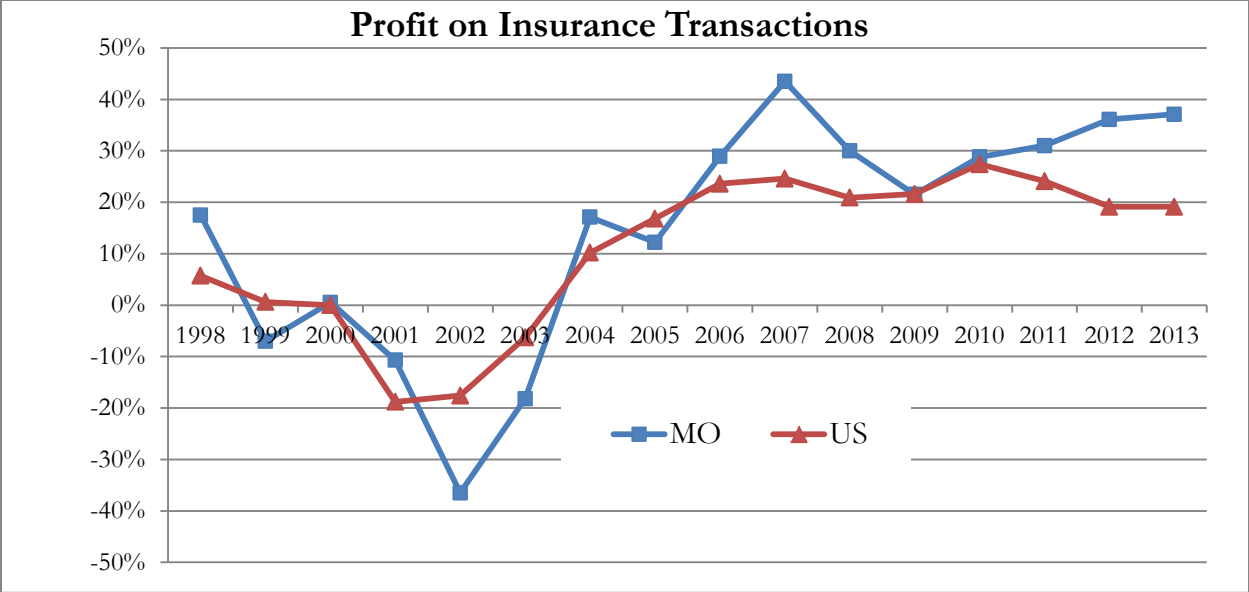
Data for physicians and surgeons, hospitals and other medical care providers are summarized in this report. The category of “other medical care providers” includes, but is not limited to, dentists, nurses, nursing homes, chiropractors, pharmacies, optometrists, podiatrists/chiropractists, clinics, and corporations.

Among the findings of the report are:

■ **Profitability** Medical professional liability insurers in Missouri returned a profit for a tenth consecutive year, following depressed returns for the period of 1999-2003. Claims incurred plus loss adjustment and administrative costs amounted to 62.8 percent of earned premium in 2013. These costs had exceeded 100 percent of premium during seven of the eight years preceding 2004 (see page 6).

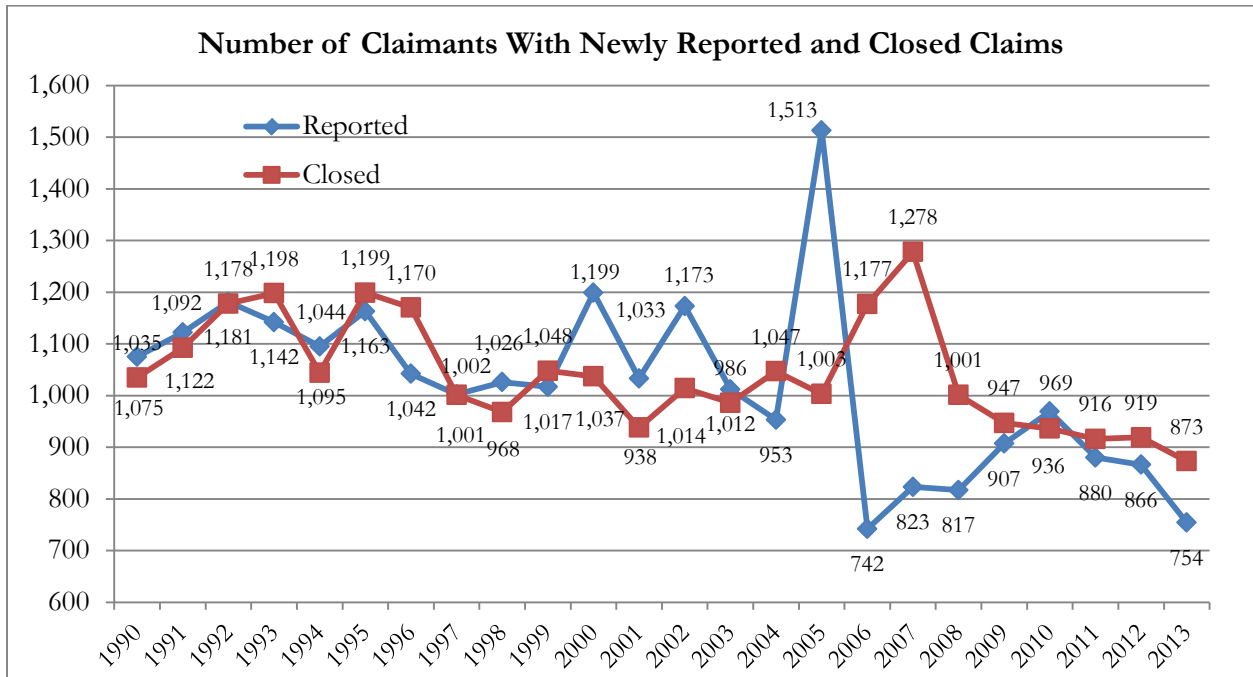
Overall profitability for a line of insurance may be assessed by adjusting Missouri underwriting results to account for expenses and revenues that are not state or line specific, such as investment returns, various unallocated costs, and federal taxes. Estimates produced by DIFP, using the NAIC profitability formula, indicate a profit rate of declined slightly from 25.9 to 19.1 percent of net worth between 2012 and 2013 (pages 6-7).

Incurred claims declined from \$206 million to \$38.5 million between 2004 and 2008, but increased somewhat in subsequent years. In 2013, insurers incurred \$41 million in claims, which amounted to 22.7% of premium. Defense and adjustment expenses related to settling claims, the largest expense component for medical professional liability insurance aside from claim payments, represent an additional 11.6% of premium (page 6).



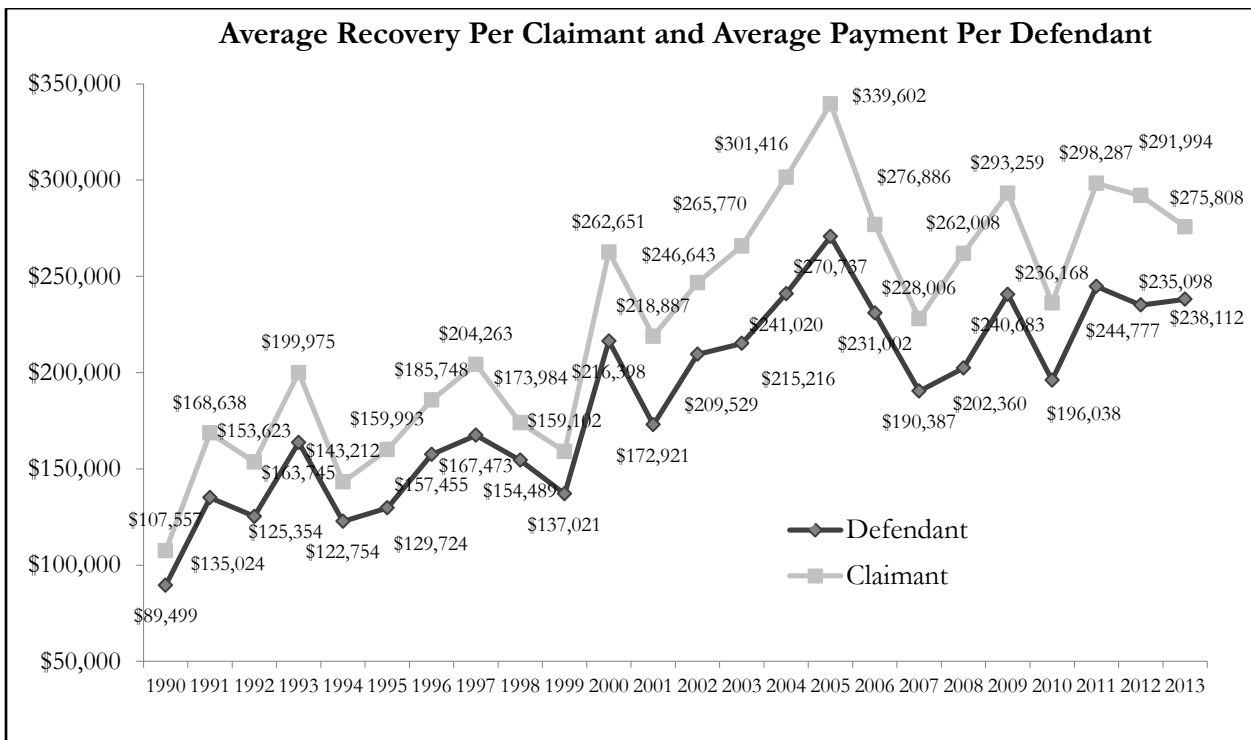
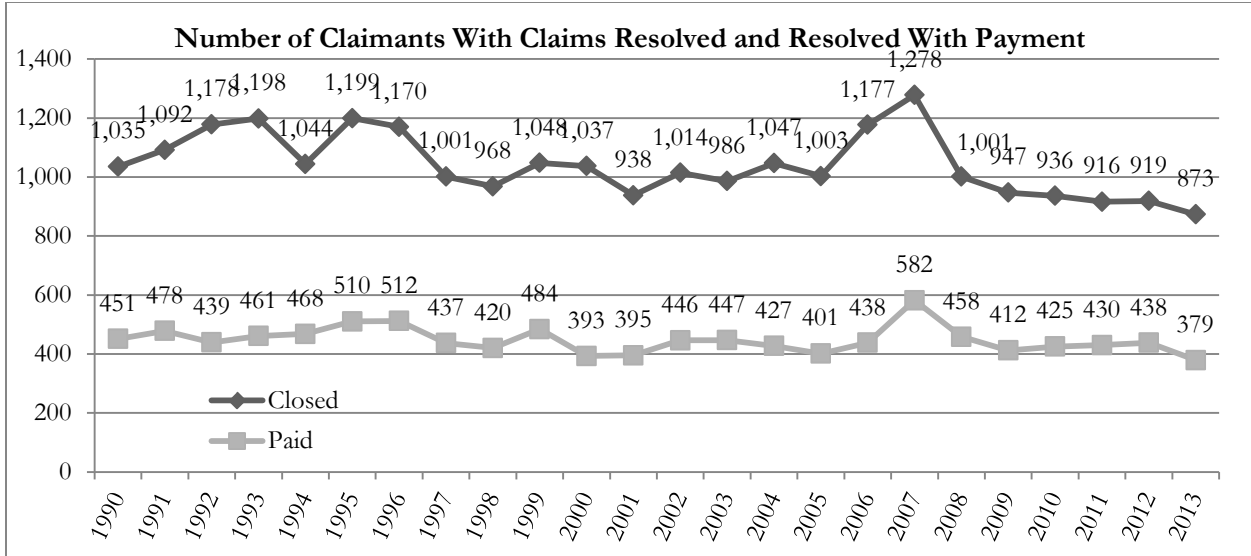
New Incidents Reported and Closed

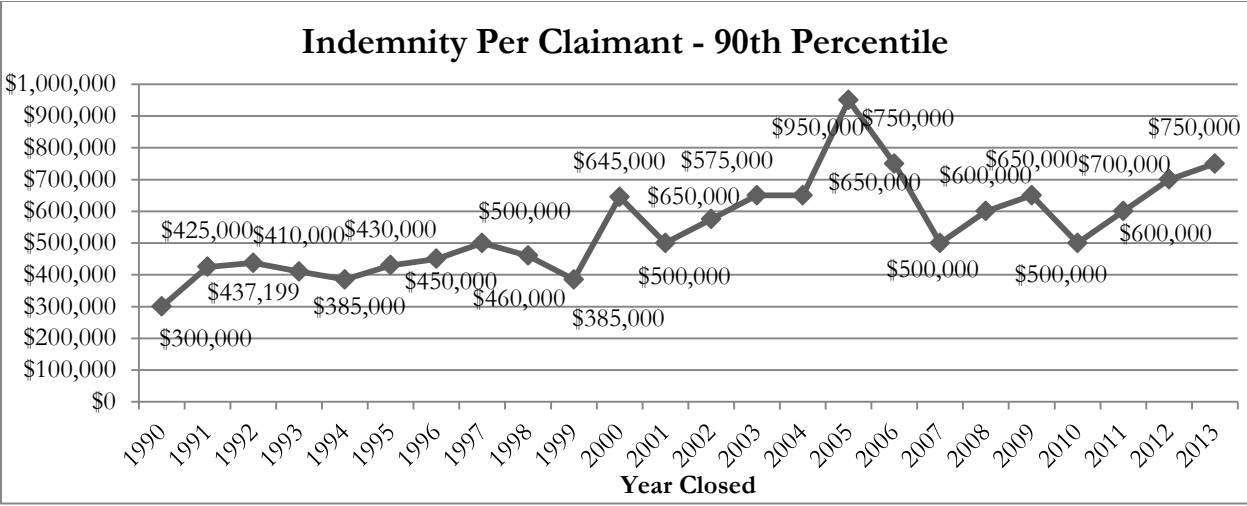
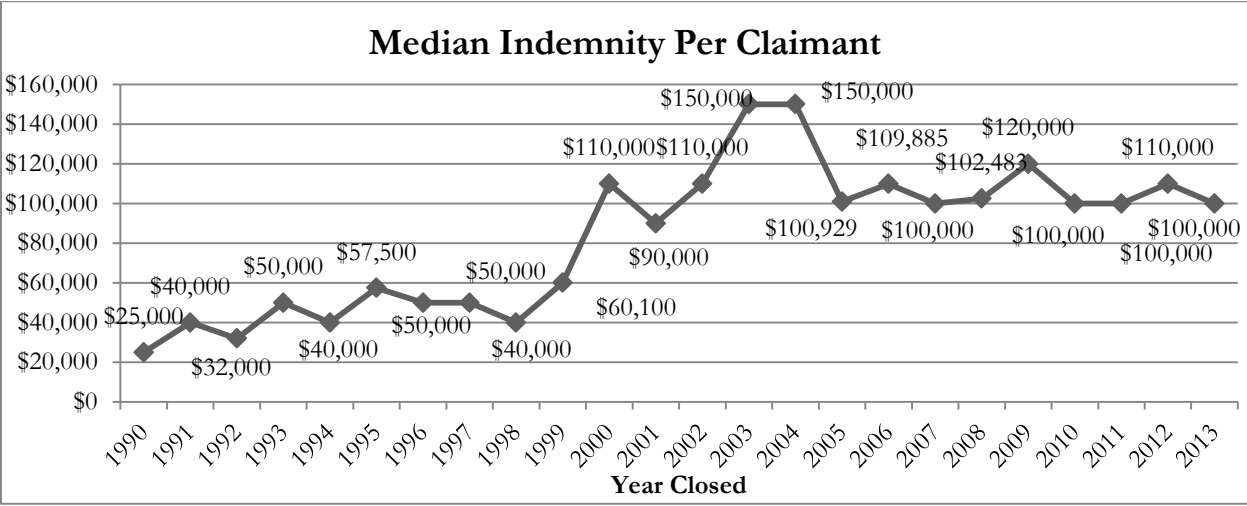
■ After new claims spiked sharply in 2005, newly-opened claims declined substantially in subsequent years. Aside from the anomalous 2005 spike in new claims (a direct result of legal changes implemented in that year), the number of claims reported has declined substantially in recent years, and by 2013 stood at 754.

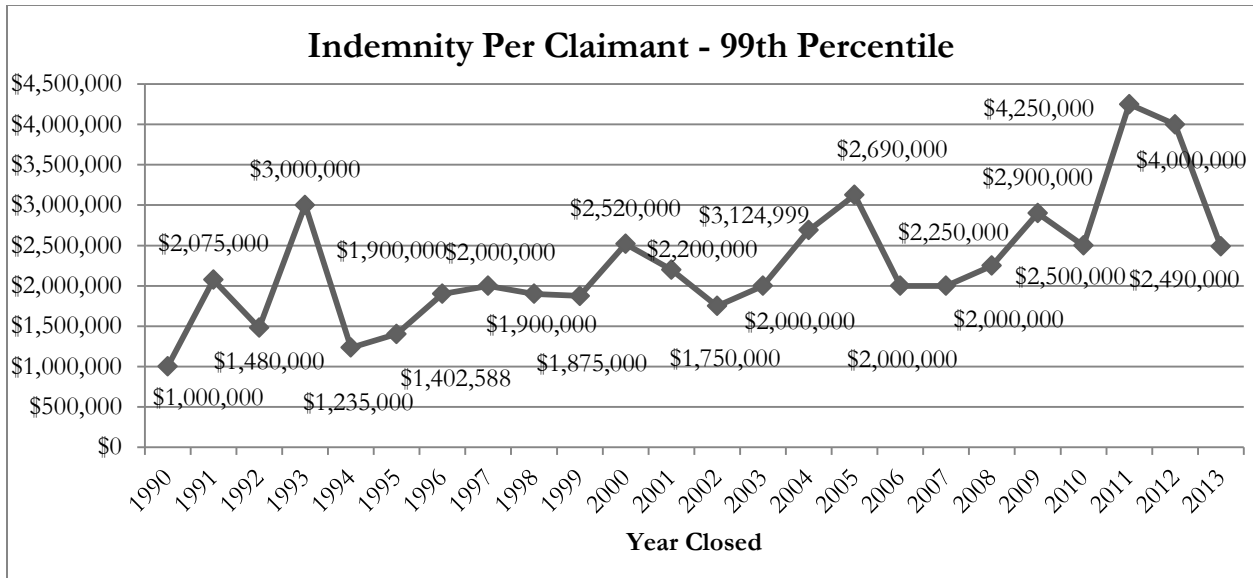


■ After a significant increase in 2007, the number of claimants receiving a recovery subsequently declined. The average award per claimant stood at \$275,808 in 2013.

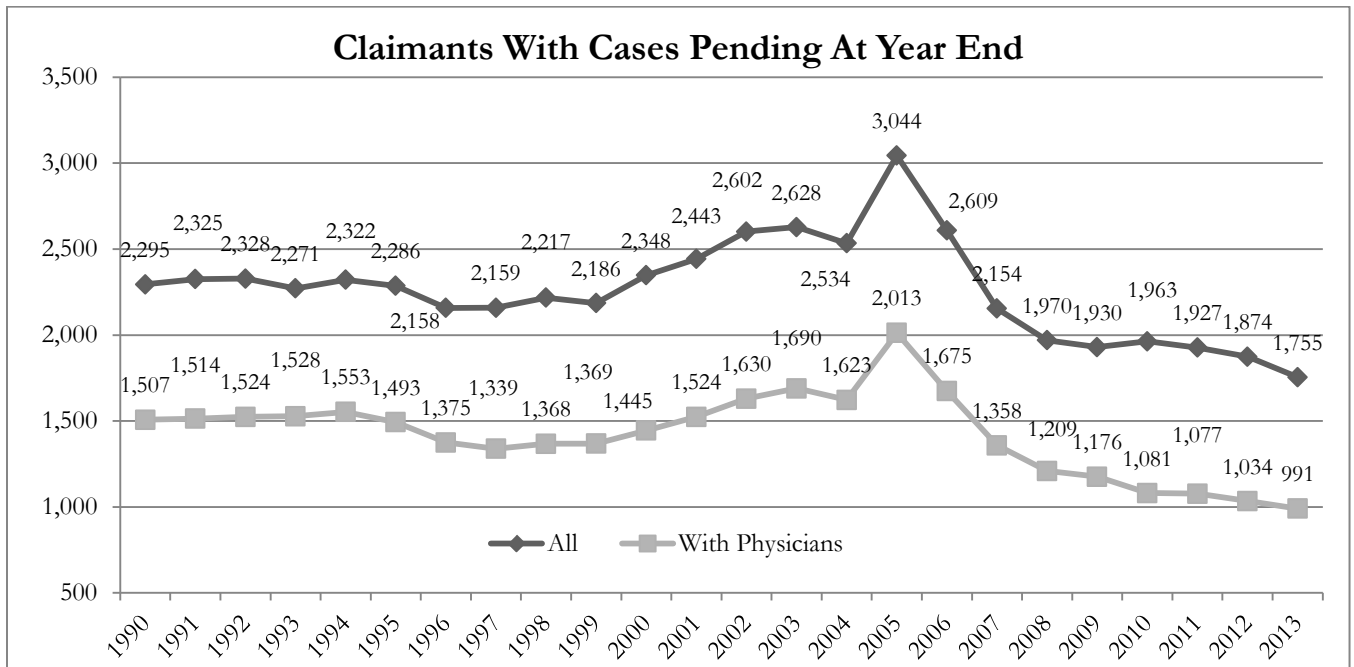
The median amount received by each claimant has remained at or near \$100,000 since 2005. Recoveries at the 90th and 99th percentiles have not exhibited any clear trends in recent years.







■ The number of claimants with pending actions at the end of a year has declined substantially since 2005, reaching historic lows.



Factors Impacting the Price of Medical Professional Liability Insurance

Many factors affect the cost of claims. Until recently, average payments have tended to rise significantly more rapidly than the overall rate of inflation. This report does not undertake a comprehensive, rigorous analysis of various cost factors. Past reports have highlighted inflationary pressures on claim costs. The economic component of indemnity payments consists primarily of lost wages and incurred medical costs, both of which have tended to increase more rapidly than the general rate of inflation.

No conclusions are presented in this report about possible future trends. Given the large annual fluctuations in average payments, several years of data are necessary to make credible future projections. Even with a sufficient time series, analyses are difficult when costs are impacted by moving and contrary forces. The difficulty is augmented by the significant changes that have occurred in Missouri's tort environment, such that prior trends may no longer be operative, and possible emerging new trends are too recent to provide a credible basis for projections. For example, several significant changes occurred with respect to the tort environment over the last decade. Prior to 2002, a single inflation-adjusted cap limited the amount each plaintiff could recover for non-economic damages in a medical liability action. In January of 2002, the Missouri Court of Appeals, Eastern District, ruled that the cap could be "stacked" across defendants (*Scott vs. SSM Healthcare*). In 2005, the legislature lowered the cap to a non-inflation-adjusted amount of \$350,000, and applied it to all defendants party to a single liability action. More recently, the Missouri Supreme Court ruled that the cap on non-economic damages was an unconstitutional infringement on the right to a jury trial (*Watts vs. Cox*).

The Missouri Medical Malpractice Joint Underwriting Association (MMMJUA)

As a residual market mechanism, the Missouri Medical Malpractice Joint Underwriting Association (MMMJUA) was not created to compete with private insurance companies in the voluntary insurance market. Instead, the MMMJUA serves to provide access to individuals who are unable to secure insurance coverage in the voluntary market. It is what is commonly referred to as a "market of last resort" for insurance coverage.

Between August 2001 and May 2002, more than half of the carriers in the medical malpractice insurance market in Missouri – 57 percent – ceased writing medical malpractice insurance coverage. For all practical purposes, during this same period, only three insurance companies were accepting new business. Because of these market contractions, coverage for medical professionals was difficult to find and increasingly expensive.

In October, 2002, the Missouri Department of Insurance held a public hearing and received testimony from the insurance industry and medical providers regarding the market contraction. The Department subsequently issued a report in February, 2003 entitled, “Medical malpractice in Missouri – the current difficulties in perspective”. In this report, the Department recommended the creation of a “workable, limited-scope joint underwriting association”. The Department also noted that “a [joint underwriting association] is expected to have a rather short life span after which most of the state’s insurers believe the hard market for pricing and availability should ease.”

In July 2003, the Governor of Missouri requested that the Director of Insurance hold a public hearing to make a formal determination as to whether medical malpractice insurance was reasonably available in the state. On the basis of information presented at the hearing, the Director determined that coverage was not reasonably available. This determination allowed the Director to form a Joint Underwriting Association (JUA) for the purpose of providing medical malpractice insurance coverage to Missouri health care providers. The MMMJUA began issuing new policies of insurance effective June 2004.

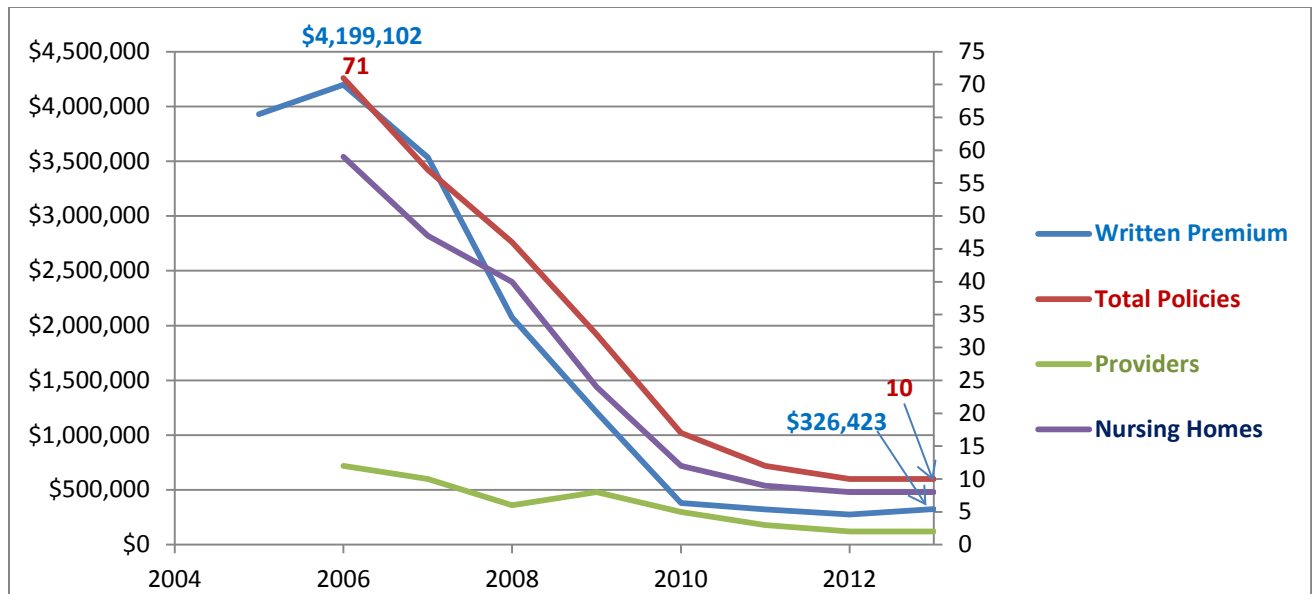
The enabling state laws for the MMMJUA can be found in Chapter 383 – Sections 383.150 to 383.195 RSMo. All insurance companies reporting casualty insurance premium in the State of Missouri are members of the MMMJUA under state law. The MMMJUA is overseen by an eight-member Board of Directors appointed by the Director of the Department of Insurance and drawn from specified segments of the insurance industry as specified under Section 383.175 RSMo.

The MMMJUA is operated pursuant to a Plan of Operation which is subject to approval by the Director of the Department of Insurance. Rates are required to be actuarially sound and calculated to be self-supporting. In the event sufficient funds are not available for the sound financial operation of the MMMJUA, assessments may be made to member insurance companies. Those assessments may be deducted from past or future premium taxes due but not yet paid to the State.

The Future of the MMMJUA

After commencing operations in June, 2004, the MMMJUA saw a rapid growth in size throughout its initial two years of operation. However, since 2006, there has been a dramatic and marked decrease in its size – both in terms of the number of policies issued and in written premium. The highest number of policies written through the MMMJUA was 71 policies written in 2006. Of those, the majority (59) were nursing home risks rather than physicians or other individual health care professionals. Conversely, in 2013, only 10 policies were issued of which eight were nursing home risks and only two were for physicians or other health care professionals.

The following chart provides a visual overview of activity in the MMMJUA, from its first full year of operation in 2005 through 2013.



There are potentially several reasons for the steep decline in activity in the MMMJUA. Arguably, the voluntary market for medical malpractice insurance is different than it was in 2003 or 2004. In 2003, the top five companies represented over 59.5% of the market in terms of written premium. The Department noted a significant market contraction in 2003, with several large and notable writers exiting the medical malpractice insurance market. In addition, a number of other companies non-renewed large portions of their books of business or filed significant rate increases. Complaints regarding both the availability and affordability of medical malpractice insurance were widespread.

Within the past several years, the Department has not received any complaints regarding the availability or affordability of medical malpractice insurance. The Department has also not received any notifications of significant market actions such as withdrawals or large non-renewal or cancellation activity. Comparing 2004 to 2013, the state has seen a slight increase in the number of insurance companies reporting written premium for medical malpractice insurance. There were 46 companies reporting written premium in 2004 while there were 51 companies in 2013. In terms of market share, the top five companies represented over 56% of the market's written premium in 2004. In 2013, the top five companies represented 45.84% of the state's written premium.

Competitive forces may also be placing downward pressure on rates, which obviously impacts the perception of affordability in the medical malpractice insurance market. While the Department is limited in the data it can review and analyze regarding rates and rate trends for medical malpractice insurance, it does collect information about annual written premiums. There has been a marked decrease in total written premium volumes since 2004. Total earned premium (including admitted and non-admitted markets) in 2004 totaled \$243 Million. Comparatively, the total earned premiums in 2013 (including admitted and non-admitted markets) totaled \$157.5 Million. During this same

time period, premiums through the non-admitted markets also decreased. In 2004, the non-admitted market accounted for roughly \$41 Million in earned premium while in 2013, the non-admitted market accounted for \$31 Million in earned premium. These figures all suggest the medical malpractice market is more competitive than it was in 2004.

Compounding the competitive forces which may be at work in the voluntary market, the MMMJUA operates within significant statutory limitations. Under current state law, the MMMJUA is limited in the amount of and types of coverage it can issue. The MMMJUA is restricted to writing coverage on an occurrence basis, rather than a claims-made basis. Claims-made based coverage is the most common type of coverage in the physicians and other health care professionals markets. Notably, there is also a statutory requirement for the MMMJUA to collect a surcharge from first year policyholders that is equal to the first years' premium.

While competition is positive for health care professionals seeking coverage in the voluntary market, the impact on the finances of the MMMJUA is not as positive. Of growing concern is the issue of administrative costs for the MMMJUA in relation to premiums. While premium volumes can fluctuate with the ebbs and flows of the market, there are certain fixed administrative expenses that are incurred, regardless of how many policies are issued. As a consequence, the ratio of expenses to premiums collected can appear imbalanced when premium volumes are low. In that regard, administrative costs for the MMMJUA in the last few years have exceeded written premiums. For the year ending 2013, the total administrative expense for the MMMJUA in 2013 totaled \$485,000. Of that total, the fixed management fees paid to the contractor totaled \$335,000. The remainder of the administrative expenses (roughly \$150,000) reflected routine underwriting and loss adjustment expenses that fluctuate with written business.

The statutory restrictions, the apparent low demand for coverage in the residual market and high administrative costs relative to the size of the JUA raise concern as to the continued viability of the MMMJUA. The Department is closely monitoring the operations of the MMMJUA and analyzing the medical malpractice market to determine if there is a continued need for this residual market mechanism.

Section 383.195 RSMo. provides that the termination of the MMMJUA shall be made by the Director following a public hearing at which it is determined that medical malpractice liability insurance is reasonably available to health care providers in the voluntary market.

Nature and Substance of Allegations and Health Outcomes

Allegation and health outcome data are derived from the narrative of events alleged to have caused an injury that are submitted with each claim form. Narratives are coded according to taxonomies developed by the DIFP. Every effort was made to code each occurrence according to the most proximate cause of the alleged medical injury, rather than the actions of defendants whose involvement was less central. For example, if an individual received an unintentional cut during surgery, which subsequently led to an undiagnosed infection, the case would be coded as “cut, puncture or tear during surgery.” To date, the DIFP has coded nearly 11,000 medical professional liability actions extending back to 2002, encompassing over 19,000 medical practitioners.

Following the categories of the National Practitioner Data Bank (NPDB), allegations are grouped into the following eight categories:

Allegations by Category 2002-2013		
Category of Alleged Medical Error	Occurrences	Paid Occurrences
Surgery	31.5%	30.5%
Non-Surgical Treatment	18.0%	17.5%
Diagnosis	17.9%	18.5%
Patient Safety / Ethical Issue	13.8%	14.1%
Medication	9.1%	8.8%
Pregnancy & childbirth	6.3%	6.8%
IV & Blood Products	1.6%	2.0%
Anesthesia	1.6%	1.6%

Across all categories, just a few general types of allegations accounted for more than 85 percent of cases. Interestingly, injuries unrelated to medical treatment were among the largest sources of claims, with 1,000 claimants seeking compensation for falls on hospital grounds, assaults from medical staff or other patients, injuries during transport, among other causes. Over the period 2002-2013, insurers paid out \$82 million as a result of such claims. Pregnancy and birth-related claims accounted for 6.1 percent of all claims, but over 16% of total claim payments. Injuries sustained during surgery or non-surgical treatment account for a high volume of cases. Among this class of injuries, the most common was *unintentional cut or tear* during the procedure (985 cases). Additional types of injuries of this class include cardiovascular side-effects, such as heart attack, stroke, or embolism (576 cases), respiratory side-effect (158 cases), and an assortment of other types of less-defined injuries (716, classed as “Other injury during or as a result of procedure”).

This category excludes other specific types of injuries, such as retained surgical materials (276 cases), and surgeries or other procedures performed on the wrong patient or the wrong body part (390 cases). Claims involving misdiagnoses and other diagnostic issues (excluding injuries incurred during a diagnostic test) accounted for 1,359 cases and \$196.5 million in payments.

The following tables include only the broadest classifications of alleged medical errors. Much more detailed tables are included in the body of the report.

Most Common Types of Allegations Medical Professional Liability Closed Claims, 2002-2013				
Allegation Type	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
All birth related injuries	697	339	\$713,592	6.5
Physical injuries unrelated to medical procedure (falls, etc)	974	602	\$136,361	5.0
Unintentional cut or tear during procedure	985	495	\$274,799	5.0
Cardiovascular complication of procedure (heart attack, stroke, embolism, etc)	576	288	\$503,573	7.3
Respiratory complication of procedure	158	81	\$519,101	7.6
Other injury during procedure	716	326	\$173,244	4.3
Surgical or other foreign body retained	276	160	\$111,251	3.9
Pressure ulcers during care	254	137	\$160,178	6.3
Acquired infection	689	250	\$341,441	5.3
Wrong dose / wrong medication or substance employed	554	375	\$189,161	4.6
Negative reaction to correct medication or substance	588	150	\$184,992	5.0
Ethical problem, breach of regulation	279	92	\$55,688	1.9
Procedure performed on wrong body part or wrong patient	390	180	\$208,514	4.5
Post-operative bleeding or other problem with surgical wound	228	106	\$527,496	5.9
Unnecessary or inefficacious procedure / lack of informed consent	582	165	\$184,653	4.6
Delay in treatment / failure to respond	436	191	\$449,389	6.3
All remaining diagnostic problems not included in a category above	1,359	592	\$332,050	6.2
All Other	1,752	601	\$258,739	4.9

Allegation Type	Total Paid	% of Claimants	% of Claimants Receiving Payment	% of Total Payments
All birth related injuries	\$241,907,797	6.1%	6.6%	16.2%
Physical injuries unrelated to medical procedure (falls, etc.)	\$82,089,430	8.5%	11.7%	5.5%
Unintentional cut or tear during procedure	\$136,025,362	8.6%	9.6%	9.1%
Cardiovascular complication of procedure (heart attack, stroke, embolism, etc.)	\$145,029,012	5.0%	5.6%	9.7%
Respiratory complication of procedure	\$42,047,184	1.4%	1.6%	2.8%
Other injury during procedure	\$56,477,583	6.2%	6.4%	3.8%
Surgical or other foreign body retained	\$17,800,163	2.4%	3.1%	1.2%
Pressure ulcers during care	\$21,944,420	2.2%	2.7%	1.5%
Acquired infection	\$85,360,192	6.0%	4.9%	5.7%
Wrong dose / wrong medication or substance employed	\$70,935,515	4.8%	7.3%	4.7%
Negative reaction to correct medication or substance	\$27,748,734	5.1%	2.9%	1.9%
Ethical problem, breach of regulation	\$5,123,279	2.4%	1.8%	0.3%
Procedure performed on wrong body part or wrong patient	\$37,532,475	3.4%	3.5%	2.5%
Post-operative bleeding or other problem with surgical wound	\$55,914,573	2.0%	2.1%	3.7%
Unnecessary or inefficacious procedure / lack of informed consent	\$30,467,809	5.1%	3.2%	2.0%
Delay in treatment / failure to respond	\$85,833,222	3.8%	3.7%	5.7%
All remaining diagnostic problems not included in a category above	\$196,573,854	11.8%	11.5%	13.2%
All Other	\$155,502,189	15.2%	11.7%	10.4%

Among all diagnostic-related cases (most of which involve misdiagnoses), most involved cancers of various forms (463 cases), of which the most common was breast cancer (103 cases). This category was followed by heart conditions (195 cases), digestive disorders (151 cases), fractures (148 cases), and strokes (113 cases) comprising the top 5. Diagnosing a healthy patient with a condition was the 7th most common diagnostic error, with 54 cases during the period.

Diagnostic-Related Claims, 2002-2013 By Medical Condition						
Infectious / Non-infectious Condition Indicator	Medical Condition	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)	
NI	All Cancers	463	209	\$375,942	6.8	
NI	Heart Condition	195	103	\$401,562	7.9	
NI	Digestive disorders	151	73	\$335,672	6.0	
NI	Fractures	148	47	\$111,987	3.7	
NI	Stroke	113	55	\$437,474	6.5	
NI	Embolism/ thrombosis	60	33	\$322,580	7.6	
NI	Healthy patient misdiagnosed with condition	54	21	\$159,485	3.6	
NI	Trauma - injury to internal organs	50	28	\$393,125	7.3	
NI	Hematoma / aneurysm	48	30	\$449,775	8.0	
NI	Spinal cord disorder	43	16	\$607,583	6.0	
I	Respiratory	41	22	\$248,125	6.8	
NI	Benign or unknown neoplasms	40	17	\$414,237	5.6	
I	Central nervous system, including meningitis,	34	22	\$1,094,904	7.9	
NI	Trauma - spine	34	15	\$1,202,456	6.0	
NI	Trauma - injury to tendons or muscle	30	7	\$91,143	3.9	
NI	Nervous system disorders	27	10	\$635,505	6.3	
NI	Endocrine, nutritional, and metabolic	24	16	\$365,583	7.4	
NI	Diseases of the genitourinary system	23	13	\$375,192	6.1	
NI	Diseases of the reproductive system	21	11	\$236,023	5.2	
I	Digestive system	20	7	\$60,929	5.2	
NI	Visual condition	16	10	\$587,110	6.2	
NI	Blood and immune disorders	14	8	\$660,208	7.1	
NI	Musculoskeletal disorder - excluding spine	13	5	\$538,000	3.8	
I	Spine / spinal cord	12	6	\$888,889	6.7	
I	Other skeletal	11	6	\$834,167	5.6	
Top 25		1,685	790	\$406,996	6.4	
All Diagnostic		1,989	932	\$391,823	6.4	

Additional tables display data on the most common initial conditions ultimately leading to a claim.

Patient Outcomes

The final tables in Section VIII display data on health outcomes attributable to an alleged error. As would be expected, the most severe injuries are associated with the highest payouts. The following table includes all outcomes for which the average indemnity amount exceeded \$500,000. Almost all injuries in this category entail significant life-long impairment, such as significant neurological or spinal injury, loss of limb or organ function, or vision or hearing.

Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Quadriplegia	42	30	\$1,898,397	8.0
Cerebral palsy	50	36	\$1,604,385	7.7
Contraction of meningitis	11	1	\$1,600,000	4.9
Paraplegia	92	55	\$1,137,133	7.0
Progression of meningitis	8	5	\$1,080,600	6.1
Loss of hearing	2	2	\$1,037,500	6.0
Other cognitive or neurological deficit	454	229	\$930,621	6.3
Coma	7	5	\$930,000	5.6
Full loss of vision	41	23	\$809,376	6.6
Loss of organ	24	14	\$706,310	6.2
Cauda equine syndrome	13	9	\$634,169	6.0
Hemiplegia	20	10	\$624,130	6.9
Amputation of hands/feet	27	11	\$620,423	5.6
Stroke	83	40	\$532,942	6.2
Amputation of two or more limbs	10	6	\$528,064	7.1
Amputation of one limb	117	66	\$519,449	6.1
Contraction of septic condition	40	17	\$502,816	4.5

Generally, average indemnity closely follows the severity of injury attributable to an alleged medical error. However, in interpreting average payments by injury severity, readers should recognize that cases departing from this pattern may be explicable by other factors. For example, economic damages, or compensation for monetary losses such as additional medical costs and lost wages, can vary considerably across cases that readers may believe are otherwise comparable. Non-debilitating cases, such as accidental sterilization or cosmetic issues, may entail little or no lost wages or additional medical expense. In these instances, economic damages would be minimal. Indemnity payments would primarily consist of compensation for non-economic injury (pain and suffering, diminished quality of life, loss of consortium, etc). On the other hand, awards for cases involving minimal physical injury can be substantially higher than might be expected. For example, a healthy person misdiagnosed with a terminal cancer would likely be traumatized, perhaps to the point of making life-altering decisions. Even though no *physical* injury has occurred (this case would be coded

“1,” or the least severe category on the nine-point injury severity scale), both economic and non-economic damages could be considerable.

Lastly, it is worth emphasizing that the allegation codes represent a claimant’s version of events (as relayed to DIFP by an insurer). In some instances, events can be readily verified by an insurer. For example, concrete outcomes such as retained surgical material or operations on the wrong patient can be known with a high degree of certainty by all parties. However, fundamental facts of a case may be in dispute in many instances. Whether a patient contracted an infection while under care, or whether it was a pre-existing condition, may not be known with certainty by any of the parties involved in a dispute. Readers should exercise a degree of critical judgment when interpreting the data displayed in the allegation tables.

Concepts and Definitions

Every attempt was made to make this report accessible to a broad readership. As such, technical terminology has been avoided where possible. However, readers should familiarize themselves with a few basic insurance terms.

Premium Written vs. Premium Earned

Premium Written: The cost of coverage for the full policy term, reported as of December 31st of the year in which a policy is issued, regardless of whether the policy term extends to future years. Written premium for a year includes premium adjustments, such as cancellations and changes in coverage, during the year for policies issued in the prior year.

Premium Earned: The dollar amount associated with the portion of the policy term that has elapsed by year-end.

The difference between written and earned premium can be better illustrated by example. Assume a one-year policy is issued on July 1, 2006, at a cost of \$1,000. At the end of the calendar year, the insurer will report \$1,000 of **written** premium on their financial annual statement. However, only half of the policy term will have elapsed at year-end. As such, only \$500, or one-half of the written premium amount, will be reported as **earned** premium. Earned premium is thus the amount of premium corresponding to the coverage actually offered during the year, since at year-end, half of the policy term will provide coverage in the future. For this reason, **earned premium** is the appropriate figure to use for assessing the performance of policy. For example, losses incurred during a reporting period correspond to elapsed coverage, and (obviously) not to coverage that will be extended at some future date.

Paid Losses vs. Incurred Losses

Paid Losses: The amount of claims payments distributed during the year. In many instances, especially for “long tailed” lines such as medical professional liability, paid losses may correspond to claims that were first opened perhaps many years prior to the date of payment. They may also represent payments on structured settlements for claims closed in prior years.

Incurred Losses: Paid losses plus the change in loss reserves for the year. Reserves are insurers’ expectations about how much will eventually be paid out on claims incurred during the year. This amount includes estimates about the eventual cost of pending claims. Incurred losses also include estimates of losses that have been incurred but not yet reported to the insurer (called “incurred but not reported,” or IBNR). Lastly, incurred loss amounts may reflect adjustments to estimates from prior years, since the true cost of a claim will become clearer as time passes.

The amount of **incurred losses** is the measure of underwriting performance in a given year, since paid losses typically represent losses incurred in prior years. However, it is important to stress that **incurred losses** are *estimates*. The actual amount of total losses incurred during a year won’t be known with certainty until many years in the future, when all pending claims are closed.

Components of Profitability

Loss Ratio: The ratio of incurred losses to earned premium.

Loss adjustment expenses: Defense and cost containment expenses plus adjusting and other expenses. Loss adjustment costs are the most significant expense component for medical liability insurance, and in some years exceeds even the amount of indemnity going to claimants.

Other Expenses: Other expenses consist of sales costs, general business expenses, taxes and fees, and dividends.

Other Revenue and Expenses: This category includes revenue streams other than premium, losses and expenses, such as investment returns, taxes, and fees. Medical professional liability insurance is a “long tailed” line, meaning that premiums are collected perhaps many years before claims payments will be made. This time lag creates opportunities for significant investment gains, which in turn can partially offset the cost of coverage. Investment returns are thus a significant component of revenue for insurers.

Profitability: Insurers are required to annually file a financial statement. This statement contains a “state page,” on which is reported claim costs and expenses directly tied to the operations in each state. However, some expenses and revenues, such as federal taxes and investment returns, are not intrinsically tied to state operations, and are reported as national aggregates. To assess true profitability in a state, national expenses and revenues must be allocated to a state in some non-arbitrary manner. The National Association of Insurance Commissioners (NAIC) has developed a widely-accepted profitability formula that performs these allocations. The NAIC figures through 2010 are reproduced in this report. The 2011 figure was calculated by the DIFP in accordance with the NAIC formula.

Claimants with Claims Reported: The number of claimants that have initiated a claim with insurers during a year, plus prior claims that are reopened. For claimants with multiple claims, the case is considered opened only for the year the initial claim is filed.

Claimants with Cases Closed: The number of cases brought to final settlement during the course of a year. A case is considered closed during the year that the final claim is concluded.

Claimants Receiving a Payment: For closed cases, the number of claimants that received and indemnity payment.

Claimants with Pending Actions: Total number of claimants with at least one claim unresolved at year end, regardless of when the claim was first reported.

Average Indemnity: The average amount paid either to claimants (total claim indemnity / total number of claimants) or the average paid on behalf of defendants (total indemnity / total number of defendants). Average indemnity amounts exclude loss adjustment expenses, such as legal and defense fees.

Section I

Historical Trends

This section contains graphs depicting trends in professional medical liability insurance for:

- All medical providers combined
- Claims involving at least one physician & surgeon
- Claims involving at least one hospital

The tables and graphs are further categorized by:

Market Trends

- Licensed and non-admitted premium
- Analysis of carriers
- Profitability
- Historical premium and losses
- Missouri loss ratios
- Number of medical professional liability writers in Missouri

Frequency and Severity

- Number of new claims reported to insurers
- Average injury severity of new claims reported to insurers
- Number of closed claims
- Average injury severity of closed claims
- Average indemnity of closed claims
- Average loss adjustment expense of closed claims
- Claim by county of jurisdiction

Claim Disposition

- Number of months for paid claims from incident to disposition
- Number of months by injury severity from incident to disposition

Medical Professional Liability Insurance Licensed and Non-Admitted Premium, 2000-2013					
Year	Market	Premium Written	Percent of Written Market	Premium Earned	Percent of Earned Market
2001	Licensed	\$109,081,420	81.6%	\$97,022,488	81.3%
	Non-Admitted	\$24,602,498	18.4%	\$22,272,120	18.7%
	Total	\$133,683,918	100.0%	\$119,294,608	100.0%
2002	Licensed	\$171,916,338	83.9%	\$156,095,527	85.2%
	Non-Admitted	\$33,103,146	16.1%	\$27,180,935	14.8%
	Total	\$205,019,484	100.0%	\$183,276,462	100.0%
2003	Licensed	\$186,479,369	82.2%	\$169,969,626	81.6%
	Non-Admitted	\$40,481,669	17.8%	\$38,289,902	18.4%
	Total	\$226,961,038	100.0%	\$208,259,528	100.0%
2004	Licensed	\$205,581,129	83.3%	\$202,932,568	83.4%
	Non-Admitted	\$41,074,434	16.7%	\$40,460,141	16.6%
	Total	\$246,655,563	100.0%	\$243,392,709	100.0%
2005	Licensed	\$190,032,878	81.7%	\$192,374,067	82.7%
	Non-Admitted	\$42,471,266	18.3%	\$40,308,168	17.3%
	Total	\$232,504,144	100.0%	\$232,682,235	100.0%
2006	Licensed	\$189,392,764	79.4%	\$191,237,043	79.8%
	Non-Admitted	\$49,120,606	20.6%	\$48,367,524	20.2%
	Total	\$238,513,370	100.0%	\$239,604,567	100.0%
2007	Licensed	\$169,414,624	78.2%	\$173,194,677	78.2%
	Non-Admitted	\$47,184,656	21.8%	\$48,402,085	21.8%
	Total	\$216,599,280	100.0%	\$221,596,762	100.0%
2008	Licensed	\$164,271,453	79.4%	\$167,194,346	79.4%
	Non-Admitted	\$42,535,711	20.6%	\$43,249,094	20.6%
	Total	\$206,807,164	100.0%	\$210,443,440	100.0%
2009	Licensed	\$155,867,385	76.9%	\$159,184,440	78.4%
	Non-Admitted	\$46,857,733	23.1%	\$43,862,648	21.6%
	Total	\$202,725,118	100.0%	\$203,047,088	100.0%
2010	Licensed	\$145,448,052	76.1%	\$145,359,818	75.8%
	Non-Admitted	\$45,600,922	23.9%	\$46,510,481	24.2%
	Total	\$191,048,974	100.0%	\$191,870,299	100.0%
2011	Licensed	\$138,335,771	78.4%	\$142,554,798	76.6%
	Non-Admitted	\$38,175,180	21.6%	\$43,605,934	23.4%
	Total	\$176,510,951	100.0%	\$186,160,732	100.0%
2012	Licensed	\$129,221,773	80.06%	\$131,620,895	79.9%
	Non-Admitted	\$32,177,497	19.94%	\$33,151,848	20.1%
	Total	\$161,399,270	100.0%	\$164,772,743	100.0%
2013	Licensed	\$120,659,064	79.43%	\$126,106,473	80.1%
	Non-Admitted	\$31,244,977	20.57%	\$31,427,685	19.9%
	Total	\$151,904,041	100.0%	\$157,534,158	100.0%

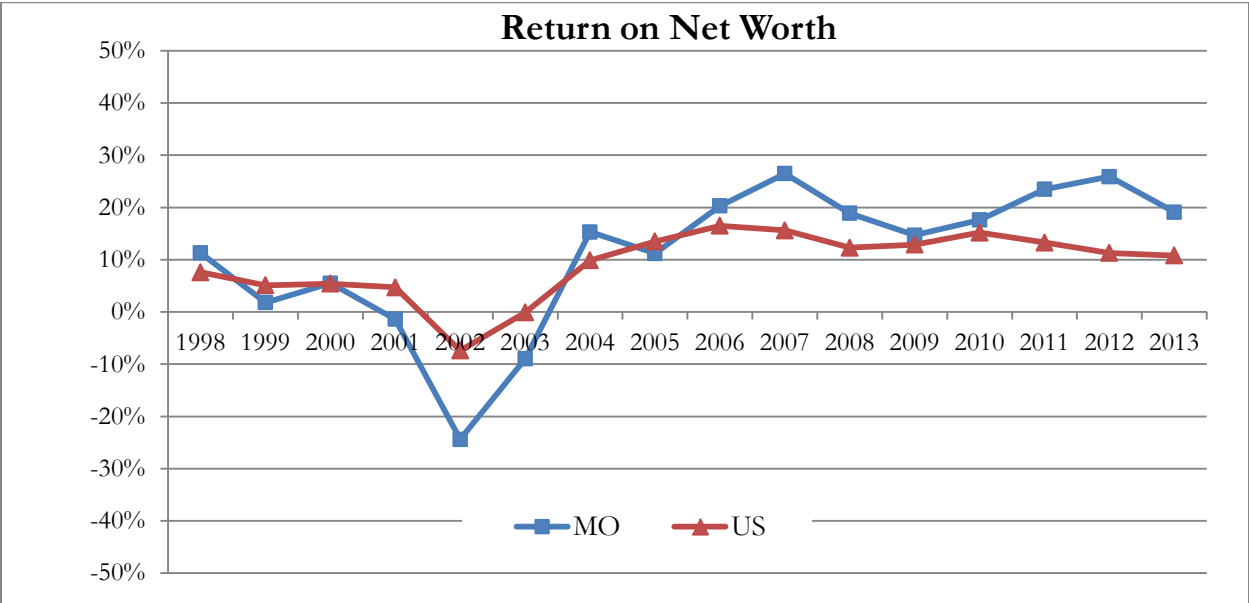
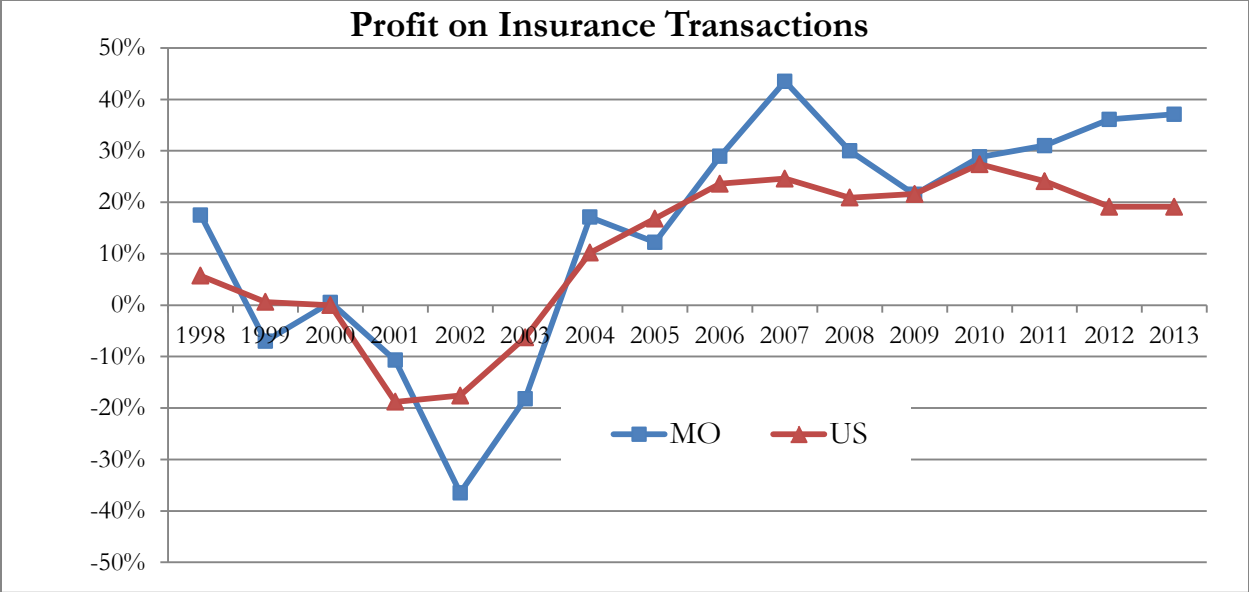
Market Share, All Companies With > 0.1% Market Share					
Admitted or Licensed Companies			Surplus Lines and Risk Retention Groups		
Company	Premium Written, 2013	Market Share	Company	Premium Written, 2013	Market Share
Missouri Hospital Plan	\$25,185,824	16.58%	Columbia Casualty Co	\$2,835,465	1.87%
Medical Protective Company	\$13,670,881	9.00%	National Guardian RRG	\$2,444,118	1.61%
Medical Liability Alliance	\$10,652,618	7.01%	Saint Lukes Health System RRG	\$2,393,503	1.58%
Missouri Professionals Mutual	\$10,174,172	6.70%	Steadfast Ins Co	\$2,068,850	1.36%
Proassurance Indemnity Company Inc.	\$9,952,513	6.55%	Caring Communities Reciprocal RRG	\$1,842,588	1.21%
Medicus Insurance Company	\$9,172,058	6.04%	Evanston Ins Co	\$1,526,096	1.00%
Doctors Company An Inter-insurance Exchange	\$8,986,121	5.92%	Endurance America Specialty Ins Co	\$1,395,000	0.92%
Missouri Doctors Mutual Insurance Company	\$4,322,589	2.85%	Lexington Ins Co	\$1,386,045	0.91%
Physicians Professional Indemnity Association	\$4,050,504	2.67%	Illinois Union Ins Co	\$1,355,720	0.89%
American Casualty Company Of Reading PA	\$2,630,887	1.73%	Homeland Ins Co Of NY	\$1,175,275	0.77%
MMIC Insurance Inc.	\$2,466,035	1.62%	Ophthalmic Mutual Ins Co RRG	\$1,169,580	0.77%
Preferred Physicians Medical RRG Inc.	\$1,833,391	1.21%	Ironshore Specialty Ins Co	\$959,730	0.63%
Capson Physicians Insurance Company	\$1,793,715	1.18%	Oceanus Ins Co A RRG	\$951,610	0.63%
Galen Insurance Company	\$1,753,342	1.15%	Hudson Specialty Ins Co	\$938,119	0.62%
Health Care Indemnity Inc.	\$1,588,414	1.05%	Southwest Physicians RRG Inc.	\$893,383	0.59%
NCMIC Insurance Company	\$1,537,450	1.01%	Health Care Industry Liability	\$868,512	0.57%
Keystone Mutual Insurance Company	\$1,493,242	0.98%	Proassurance Specialty Ins Co	\$802,758	0.53%
Ace American Insurance Company	\$1,011,954	0.67%	OMS National Ins Co RRG	\$779,239	0.51%
Kansas Medical Mutual Insurance Company	\$928,358	0.61%	Admiral Ins Co	\$714,194	0.47%
Physicians Insurance Mutual	\$865,177	0.57%	Orthoforum Insurance Co RRG	\$554,338	0.36%
Professional Solutions Insurance Company	\$860,163	0.57%	Landmark American Ins Co	\$474,183	0.31%
Liberty Insurance Underwriters Inc.	\$848,898	0.56%	Darwin Select Ins Co	\$411,512	0.27%
Fair American Insurance & Reinsurance Company	\$832,357	0.55%	Emergency Physicians Ins Co RRG	\$373,565	0.25%
Podiatry Insurance Company Of America	\$777,212	0.51%	Arch Specialty Ins Co	\$360,360	0.24%
Pharmacists Mutual Insurance Company	\$588,564	0.39%	American Safety Indemnity Co	\$334,833	0.22%
MPM Insurance Company Of Kansas	\$427,710	0.28%	Princeton Excess & Surplus Lines Ins	\$216,754	0.14%
Darwin National Assurance Company	\$327,207	0.22%	Torus Specialty Ins Co	\$214,105	0.14%
National Union Fire Insurance Company Of Pitt	\$319,061	0.21%	General Star Indemnity Co	\$204,077	0.13%
Cincinnati Insurance Company The	\$259,226	0.17%	Allied Professionals Ins Co RRG	\$157,900	0.10%
American Alternative Insurance Corporation	\$219,403	0.14%			
Continental Casualty Company	\$202,067	0.13%			
Church Mutual Insurance Company	\$166,165	0.11%			

**Market Share – Physicians & Surgeons Coverage
(Companies with greater than 0.1% market share)**

Company	Premium Written, 2013	Market Share
Medical Protective Company	\$10,479,522	12.76%
Medical Liability Alliance	\$10,189,019	12.41%
Missouri Professionals Mutual	\$10,174,172	12.39%
Proassurance Indemnity Company Inc	\$9,247,769	11.26%
Medicus Insurance Company	\$9,172,058	11.17%
Doctors Company An Interins Exchange	\$8,986,121	10.94%
Missouri Doctors Mutual Insurance Company	\$4,322,589	5.26%
Physicians Professional Indemnity Association	\$4,050,504	4.93%
MMIC Insurance Inc	\$2,446,035	2.98%
Preferred Physicians Medical RRG Inc	\$1,833,391	2.23%
Capson Physicians Insurance Company	\$1,793,715	2.18%
Galen Insurance Company	\$1,753,342	2.13%
Keystone Mutual Insurance Company	\$1,493,242	1.82%
American Casualty Company Of Reading PA	\$1,034,279	1.26%
Kansas Medical Mutual Insurance Company	\$928,358	1.13%
Physicians Insurance Mutual	\$865,177	1.05%
Liberty Insurance Underwriters Inc.	\$848,898	1.03%
Fair American Insurance And Reinsurance Company	\$832,357	1.01%
Professional Solutions Insurance Company	\$721,213	0.88%
MPM Insurance Company Of Kansas	\$427,710	0.52%
Darwin National Assurance Company	\$327,207	0.40%
Atlantic Specialty Insurance Company	\$111,635	0.14%

Medical Professional Liability Profitability in Missouri, 1993-2013 All Writers, Including Excess and Surplus Lines Companies							
Year	Premium Earned	Direct Losses Incurred	Defense and Cost Containment Expenses	Other Expenses	Claims + Expenses	Profit on Insurance Transactions	Return on Net Worth
1993	\$115,261,205	54.6%	18.0%	17.2%	89.8%	28.1%	20.3%
1994	\$125,358,976	54.7%	25.6%	18.2%	98.5%	15.4%	12.9%
1995	\$128,910,099	50.9%	30.7%	18.0%	99.6%	16.0%	13.0%
1996	\$130,187,481	92.4%	35.6%	18.1%	146.4%	-11.9%	-1.5%
1997	\$114,373,044	48.4%	16.8%	18.9%	84.1%	30.9%	17.1%
1998	\$102,963,001	59.6%	25.2%	21.6%	106.4%	17.5%	11.3%
1999	\$106,235,829	72.5%	39.3%	23.1%	134.9%	-7.0%	1.8%
2000	\$108,481,154	69.4%	36.6%	22.2%	128.2%	1.5%	5.5%
2001	\$119,299,710	85.9%	30.6%	22.7%	139.2%	-10.7%	-1.4%
2002	\$183,287,756	112.2%	35.5%	19.8%	167.5%	-36.5%	-24.4%
2003	\$208,731,981	89.9%	38.6%	15.7%	144.2%	-18.2%	-9.0%
2004	\$243,395,277	52.0%	24.5%	13.8%	90.3%	17.1%	15.3%
2005	\$232,681,166	49.3%	34.9%	15.7%	99.9%	12.2%	11.2%
2006	\$240,333,213	30.3%	26.6%	18.6%	75.5%	28.9%	20.3%
2007	\$221,616,727	12.9%	17.5%	22.0%	52.4%	43.5%	26.5%
2008	\$210,448,610	18.3%	18.7%	24.5%	61.5%	30.0%	18.9%
2009	\$202,870,012	33.4%	17.9%	25.7%	77.0%	21.5%	14.7%
2010	\$191,884,450	27.3%	14.6%	28.5%	70.4%	28.8%	17.6%
2011	\$186,318,640	21.8%	16.8%	27.8%	66.4%	26.2%	25.1%
2012	\$164,784,580	13.0%	19.9%	28.6%	61.5%	36.1%	25.9%
2013	\$157,541,853	22.7%	11.6%	28.6%	62.9%	37.1%	19.1%

*Source: Data years 1998 – 2011 are from the NAIC, *Profitability by Line by State*. Data years 2012-2013 produced by the DIFP, estimates based on the NAIC profitability formula.



**Licensed Market
Medical Professional Liability
Data from the Financial Annual Statement**

Year	Premium Written	Losses Paid	Premium Earned	Losses Incurred	Defense & Cost Containment Expenses Incurred	Dividends	Commission & Brokerage Expense	Taxes & Fees
1998	\$81,825,564	\$70,662,769	\$88,726,009	\$48,377,778	\$19,040,801	\$1,295,442	\$5,388,405	\$2,007,299
1999	\$94,908,930	\$64,440,159	\$93,676,070	\$68,353,075	\$34,866,139	\$1,751,359	\$6,930,847	\$1,951,921
2000	\$92,838,702	\$63,822,268	\$91,969,349	\$65,056,683	\$29,395,964	\$1,765,029	\$6,036,540	\$2,232,929
2001	\$109,081,420	\$76,730,820	\$97,027,591	\$79,038,068	\$25,505,859	\$2,032,104	\$9,442,445	\$2,583,310
2002	\$171,916,338	\$108,669,530	\$156,106,363	\$167,928,367	\$43,358,216	\$2,026,706	\$13,265,133	\$4,307,119
2003	\$186,479,369	\$83,749,882	\$169,970,364	\$164,309,442	\$63,162,582	\$125,396	\$10,516,274	\$2,937,402
2004	\$205,581,129	\$110,138,156	\$202,933,058	\$100,898,891	\$45,574,802	\$115,005	\$12,195,515	\$2,748,213
2004	\$205,581,129	\$110,138,156	\$202,933,058	\$100,898,891	\$45,574,802	\$115,005	\$12,195,515	\$2,748,213
2006	\$189,392,764	\$71,311,677	\$191,945,067	\$64,755,502	\$54,460,185	\$6,917,834	\$12,008,414	\$2,300,687
2007	\$169,414,624	\$79,077,894	\$173,191,830	\$21,078,129	\$30,589,894	\$9,919,356	\$12,054,024	\$1,745,597
2008	\$164,271,453	\$52,799,665	\$167,197,841	\$26,633,904	\$30,723,882	\$12,650,632	\$11,734,877	\$1,954,845
2009	\$155,867,385	\$76,864,434	\$159,189,836	\$47,022,583	\$23,444,743	\$12,713,160	\$11,147,292	\$1,966,249
2010	\$145,448,052	\$44,688,166	\$145,360,026	\$44,309,036	\$17,175,262	\$17,876,034	\$10,177,819	\$1,537,348
2011	\$138,335,771	\$54,208,628	\$142,561,035	\$30,166,874	\$20,619,085	\$12,465,594	\$10,755,805	\$1,254,529
2012	\$129,221,773	\$39,892,506	\$131,629,362	\$12,976,307	\$24,519,084	\$12,141,309	\$9,898,117	\$1,576,914
2013	\$120,659,064	\$45,354,474	\$126,114,168	\$28,725,216	\$11,828,893	\$11,445,600	\$9,342,925	\$1,319,381

Year	% of Written Premium	% of Earned Premium			
	Direct Losses Paid	Direct Losses Incurred	Defense & Cost Containment Expenses Incurred	Other Underwriting Expenses	Underwriting Results
1998	86.4%	54.5%	21.5%	9.8%	85.8%
1999	67.9%	73.0%	37.2%	11.4%	121.5%
2000	68.7%	70.7%	32.0%	10.9%	113.6%
2001	70.3%	81.5%	26.3%	14.5%	122.2%
2002	63.2%	107.6%	27.8%	12.6%	147.9%
2003	44.9%	96.7%	37.2%	8.0%	141.8%
2004	53.6%	49.7%	22.5%	7.4%	79.6%
2004	53.6%	49.7%	22.5%	7.4%	79.6%
2006	37.7%	33.7%	28.4%	11.1%	73.2%
2007	46.7%	12.2%	17.7%	13.7%	43.5%
2008	32.1%	15.9%	18.4%	15.8%	50.1%
2009	49.3%	29.5%	14.7%	16.2%	60.5%
2010	30.7%	30.5%	11.8%	20.4%	62.7%
2011	39.2%	21.2%	14.5%	17.2%	52.8%
2012	30.9%	9.9%	18.6%	17.9%	46.4%
2013	37.6%	22.8%	9.4%	17.5%	49.7%

**Excess/Surplus Lines Market
Medical Professional Liability
Data from the Financial Annual Statement**

Year	Written Premium	Losses Paid	Premium Earned	Losses Incurred	Defense & Cost Containment Expenses Incurred	Dividends	Commission & Brokerage Expenses	Taxes and Fees
1998	\$15,870,718	\$11,380,508	\$14,403,279	\$13,185,053	\$153,478	\$11,177	\$1,450,699	\$74,218
1999	\$10,010,000	\$6,409,396	\$12,559,760	\$8,669,845	\$1,978,069	\$25,337	\$1,061,021	\$104,292
2000	\$20,739,467	\$6,755,710	\$16,511,806	\$10,243,905	\$4,657,976	\$58,534	\$2,568,781	\$108,710
2001	\$24,602,498	\$10,015,312	\$22,272,120	\$23,432,287	\$4,958,791	\$43,698	\$2,398,572	\$149,059
2002	\$33,103,146	\$13,675,522	\$27,181,392	\$37,763,520	\$11,665,223	\$36,996	\$2,628,930	\$258,908
2003	\$40,481,669	\$9,841,245	\$38,761,618	\$25,388,834	\$7,648,244	\$0	\$2,511,248	\$525
2004	\$41,074,434	\$11,967,015	\$40,462,218	\$25,144,578	\$4,811,445	\$0	\$2,955,713	\$201,120
2004	\$41,074,434	\$11,967,015	\$40,462,218	\$25,144,578	\$4,811,445	\$0	\$2,955,713	\$201,120
2006	\$49,120,606	\$21,272,422	\$48,388,148	\$11,085,405	\$2,439,533	\$9,228	\$3,378,131	\$431,077
2007	\$47,184,656	\$9,968,066	\$48,424,897	\$10,109,947	\$6,409,250	\$200,498	\$3,599,954	\$309,966
2008	\$42,535,711	\$11,435,862	\$43,250,769	\$12,651,844	\$4,214,592	\$243,800	\$4,655,756	\$363,755
2009	\$46,857,733	\$26,507,125	\$43,862,648	\$47,916,060	\$51,262,415	\$510,763	\$4,049,988	\$367,119
2010	\$45,600,922	-\$4,315,363	\$46,549,816	-\$19,076,608	-\$43,289,983	\$970,054	\$3,651,213	\$337,354
2011	\$38,175,180	\$9,765,893	\$43,757,605	\$10,532,328	\$4,817,558	\$615,634	\$3,299,246	\$325,939
2012	\$32,177,497	\$16,175,954	\$33,155,218	\$8,190,662	\$4,263,427	\$730,557	\$2,821,852	\$289,710
2013	\$31,224,977	\$11,163,562	\$31,427,685	\$6,958,428	\$1,764,929	\$771,118	\$2,580,077	\$289,710

% of Written Premium		% of Earned Premium			
Year	Direct Losses Paid	Direct Losses Incurred	Defense & Cost Containment Expenses Incurred	Other Underwriting Expenses	Underwriting Results
1998	71.7%	91.5%	1.1%	10.7%	103.3%
1999	64.0%	69.0%	15.7%	9.5%	94.3%
2000	32.6%	62.0%	28.2%	16.6%	106.8%
2001	40.7%	105.2%	22.3%	11.6%	139.1%
2002	41.3%	138.9%	42.9%	10.8%	192.6%
2003	24.3%	65.5%	19.7%	6.5%	91.7%
2004	29.1%	62.1%	11.9%	7.8%	81.8%
2004	29.1%	62.1%	11.9%	7.8%	81.8%
2006	43.3%	22.9%	5.0%	7.9%	35.8%
2007	21.1%	20.9%	13.2%	8.5%	42.6%
2008	26.9%	29.3%	9.7%	12.2%	51.2%
2009	56.6%	109.2%	116.9%	11.2%	237.3%
2010	-9.5%	-41.0%	-93.0%	10.7%	-123.3%
2011	25.6%	24.1%	11.0%	9.7%	44.8%
2012	50.3%	24.7%	12.9%	11.5%	49.1%
2013	35.7%	22.1%	5.6%	11.6%	39.4%

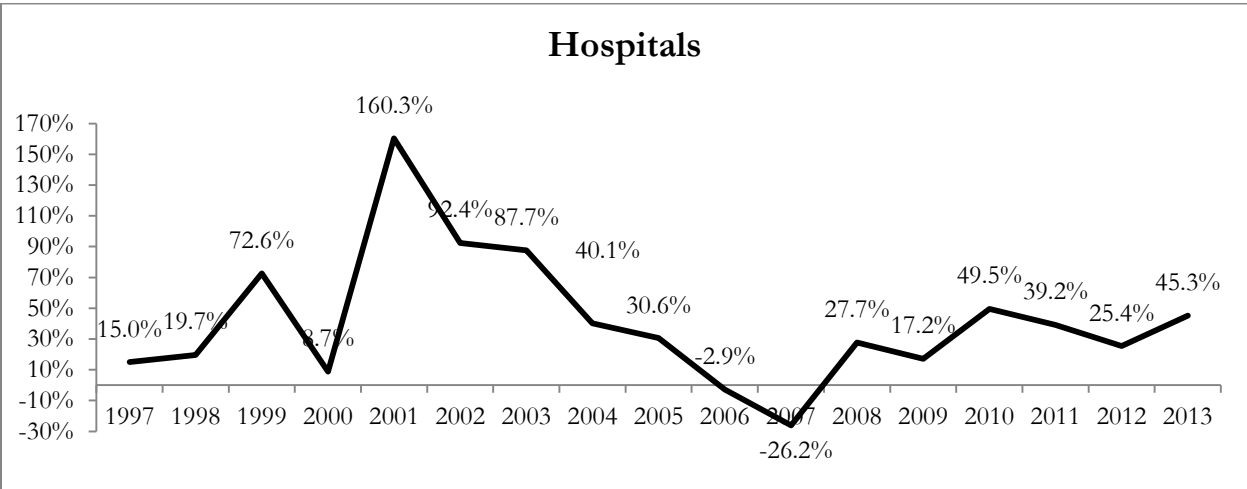
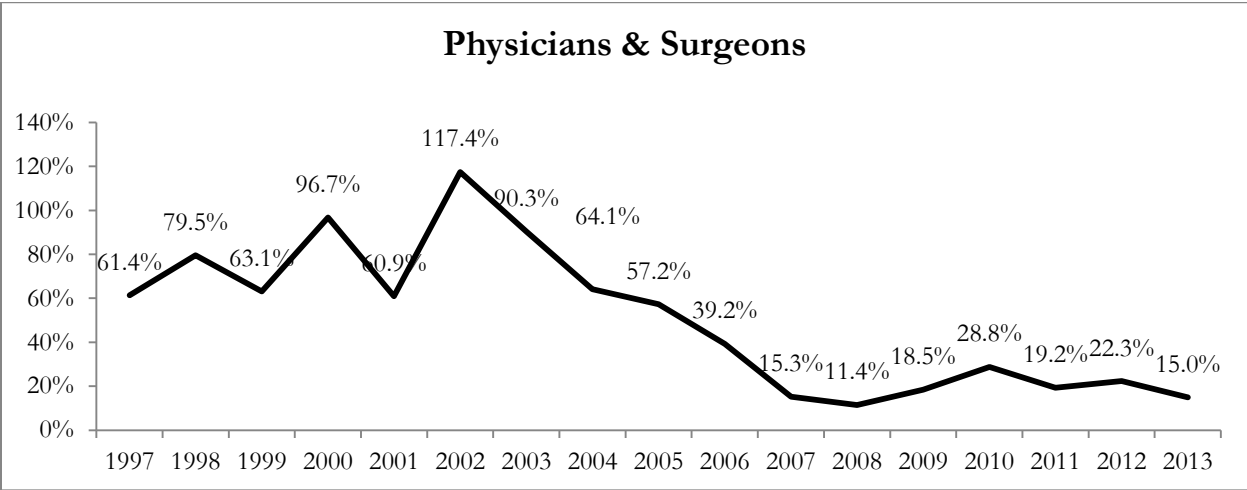
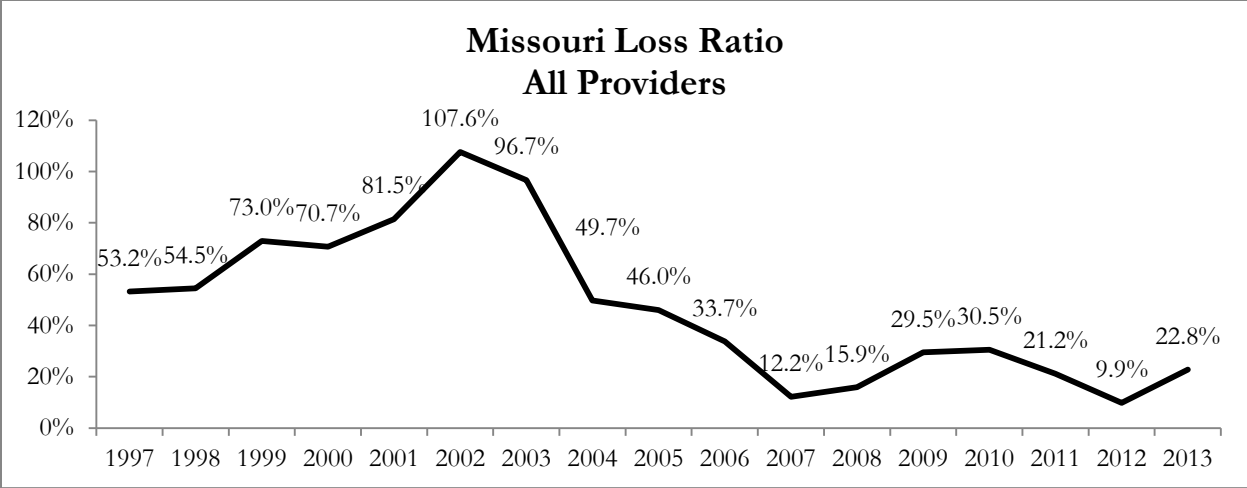
Licensed Medical Professional Liability Market – Physicians & Surgeons							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$62,780,784	\$44,893,158	71.5%	\$63,904,882	\$39,240,977	61.4%	
1998	\$55,760,257	\$50,609,999	90.8%	\$57,215,107	\$45,501,593	79.5%	-11.8%
1999	\$64,853,222	\$43,998,372	67.8%	\$63,998,070	\$40,408,719	63.1%	16.3%
2000	\$61,518,461	\$46,389,410	75.4%	\$62,776,133	\$60,727,760	96.7%	-5.1%
2001	\$77,092,452	\$53,869,948	69.9%	\$67,579,007	\$41,141,286	60.9%	25.3%
2002	\$114,887,033	\$79,431,185	69.1%	\$104,672,745	\$122,930,348	117.4%	49.0%
2003	\$136,418,623	\$52,870,665	38.8%	\$121,324,955	\$109,538,169	90.3%	18.7%
2004	\$142,627,100	\$81,076,868	56.9%	\$142,262,082	\$91,237,441	64.1%	4.6%
2005	\$133,799,432	\$49,802,894	37.2%	\$134,869,365	\$77,185,727	57.2%	-6.2%
2006	\$133,792,923	\$60,700,054	45.4%	\$134,958,248	\$52,960,943	39.2%	0.0%
2007	\$125,881,868	\$53,940,208	42.9%	\$128,191,866	\$19,554,674	15.3%	-5.9%
2008	\$120,777,660	\$41,025,516	34.0%	\$123,366,930	\$14,102,358	11.4%	-4.1%
2009	\$116,573,724	\$45,905,797	39.4%	\$118,482,242	\$21,899,600	18.5%	-3.5%
2010	\$106,905,417	\$31,565,514	29.5%	\$106,166,291	\$30,573,532	28.8%	-8.3%
2011	\$100,511,107	\$36,323,679	36.1%	\$104,503,104	\$20,097,063	19.2%	-6.0%
2012	\$90,030,972	\$29,093,806	32.3%	\$92,044,066	\$20,512,799	22.3%	-10.4%
2013	\$82,134,108	\$31,410,723	38.2%	\$87,679,728	\$13,143,343	15.0%	-8.8%

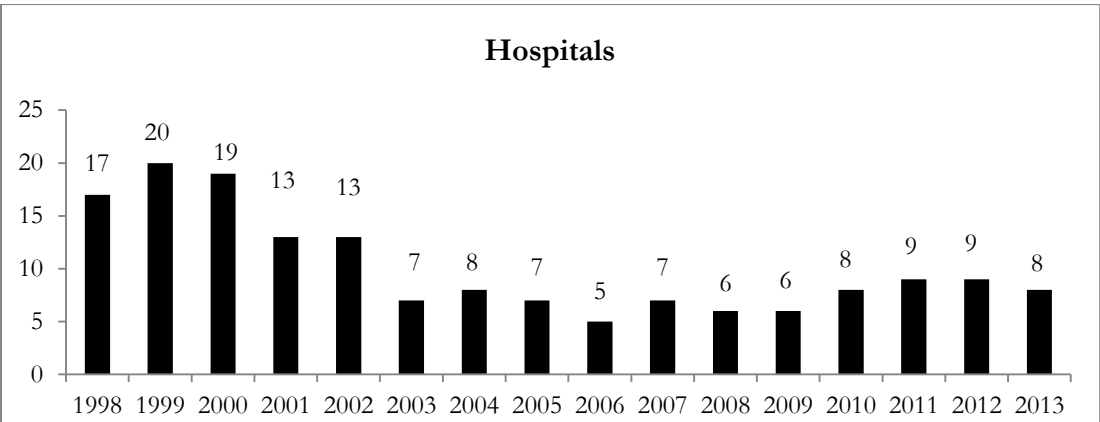
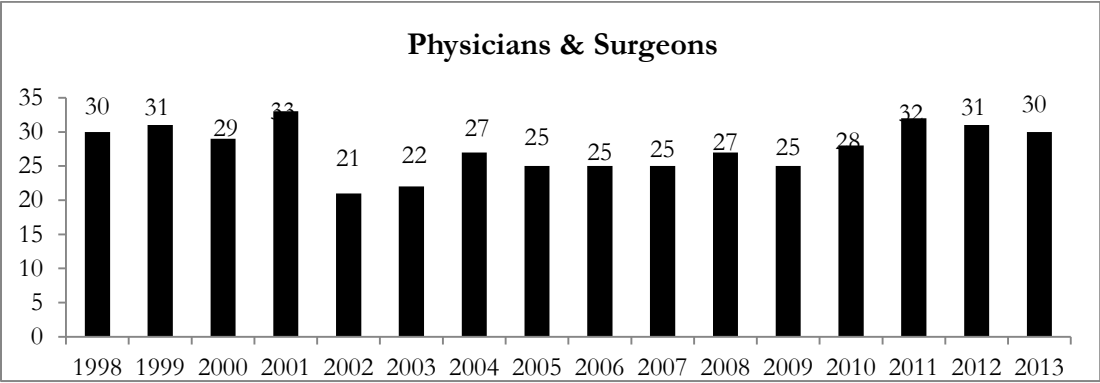
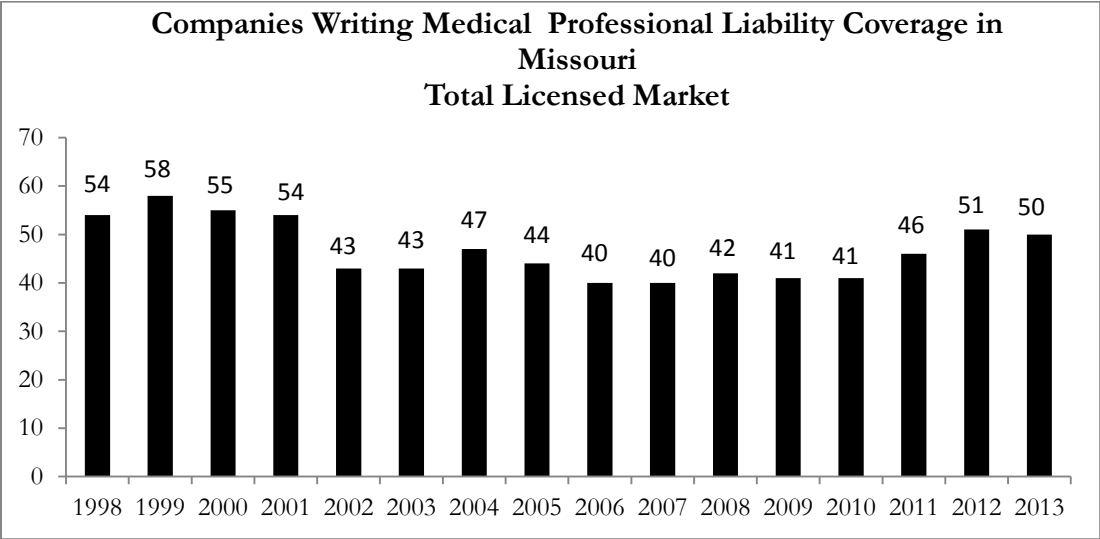
Licensed Medical Professional Liability Market - Dentists							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$3,620,053	\$1,506,555	41.6%	\$3,729,611	\$1,683,415	45.1%	
1998	\$3,387,756	\$1,454,934	43.0%	\$3,310,636	\$567,272	17.1%	-6.4%
1999	\$2,920,816	\$683,189	23.4%	\$3,164,122	-\$638,500	-20.2%	-13.8%
2000	\$3,232,321	\$696,834	21.56%	\$2,724,126	\$313,442	11.5%	10.7%
2001	\$3,686,464	\$302,962	8.2%	\$3,308,117	\$1,150,895	34.8%	14.1%
2002	\$4,458,209	\$2,443,938	54.8%	\$4,336,659	\$3,014,033	69.5%	20.9%
2003	\$6,830,040	\$1,457,855	21.3%	\$6,462,928	-\$630,815	-9.8%	53.2%
2004	\$4,439,569	\$347,940	7.8%	\$4,635,168	-\$1,642,942	-35.4%	-35.0%
2005	\$4,870,943	\$809,022	16.6%	\$4,801,966	\$1,195,919	24.9%	9.7%
2006	\$4,765,149	\$887,696	18.6%	\$4,877,298	\$951,891	19.5%	-2.2%
2007	\$4,704,136	\$589,929	12.5%	\$4,707,542	\$3,886,234	82.6%	-1.3%
2008	\$5,499,407	\$946,223	17.2%	\$5,429,154	\$3,638,721	67.0%	16.9%
2009	\$4,623,630	\$1,864,476	40.3%	\$4,723,201	\$3,445,027	72.9%	-15.9%
2010	\$4,285,875	\$774,347	18.1%	\$4,173,126	\$2,563,010	61.4%	-7.3%
2011	\$4,582,465	\$736,805	16.1%	\$4,660,048	-\$2,064,230	-44.3%	6.9%
2012	\$3,992,620	\$371,931	9.3%	\$4,040,694	-\$3,430,038	-84.9%	-12.9%
2013	\$3,924,335	\$1,886,131	48.1%	\$4,064,301	\$2,394,279	58.9%	-1.7%

Licensed Medical Professional Liability Market - Nurses							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$1,430,588	\$29,794	2.1%	\$1,073,768	(\$580,638)	-54.1%	
1998	\$518,436	\$15,750	3.0%	\$685,261	\$145,484	21.2%	-63.8%
1999	\$701,196	\$277,500	39.6%	\$795,615	\$275,506	34.6%	35.3%
2000	\$492,661	\$999	0.2%	\$419,531	\$933,815	222.6%	-29.7%
2001	\$541,382	\$795,000	146.9%	\$515,088	\$159,655	31.0%	9.9%
2002	\$520,559	\$1,250	0.2%	\$644,834	(\$475,689)	-73.8%	-3.9%
2003	\$535,407	\$0	0.00%	\$519,272	\$57,165	11.0%	2.8%
2004	\$581,243	\$345,000	59.4%	\$585,759	\$490,327	83.7%	8.6%
2005	\$413,075	\$0	0.00%	\$432,944	(\$8,469)	-2.0%	-28.9%
2006	\$421,601	\$0	0.00%	\$458,201	(\$12,376)	-2.7%	2.1%
2007	\$415,168	\$0	0.00%	\$422,461	\$65,415	15.5%	-1.5%
2008	\$1,989,794	\$418	0.02%	\$327,923	(\$31,573)	-9.6%	379.3%
2009	\$309,742	\$0	0.00%	\$317,317	\$207,009	65.2%	-84.4%
2010	\$1,711,669	\$522,115	30.5%	\$1,760,654	\$1,062,764	60.4%	452.6%
2011	\$1,734,788	\$156,067	9.0%	\$1,733,699	\$368,452	21.3%	1.4%
2012	\$373,509	\$11,660	3.1%	\$372,591	\$80,779	21.7%	-78.4%
2013	\$2,069,756	\$1,630,000	78.8%	\$1,921,284	(\$786,534)	-40.0%	454.1%

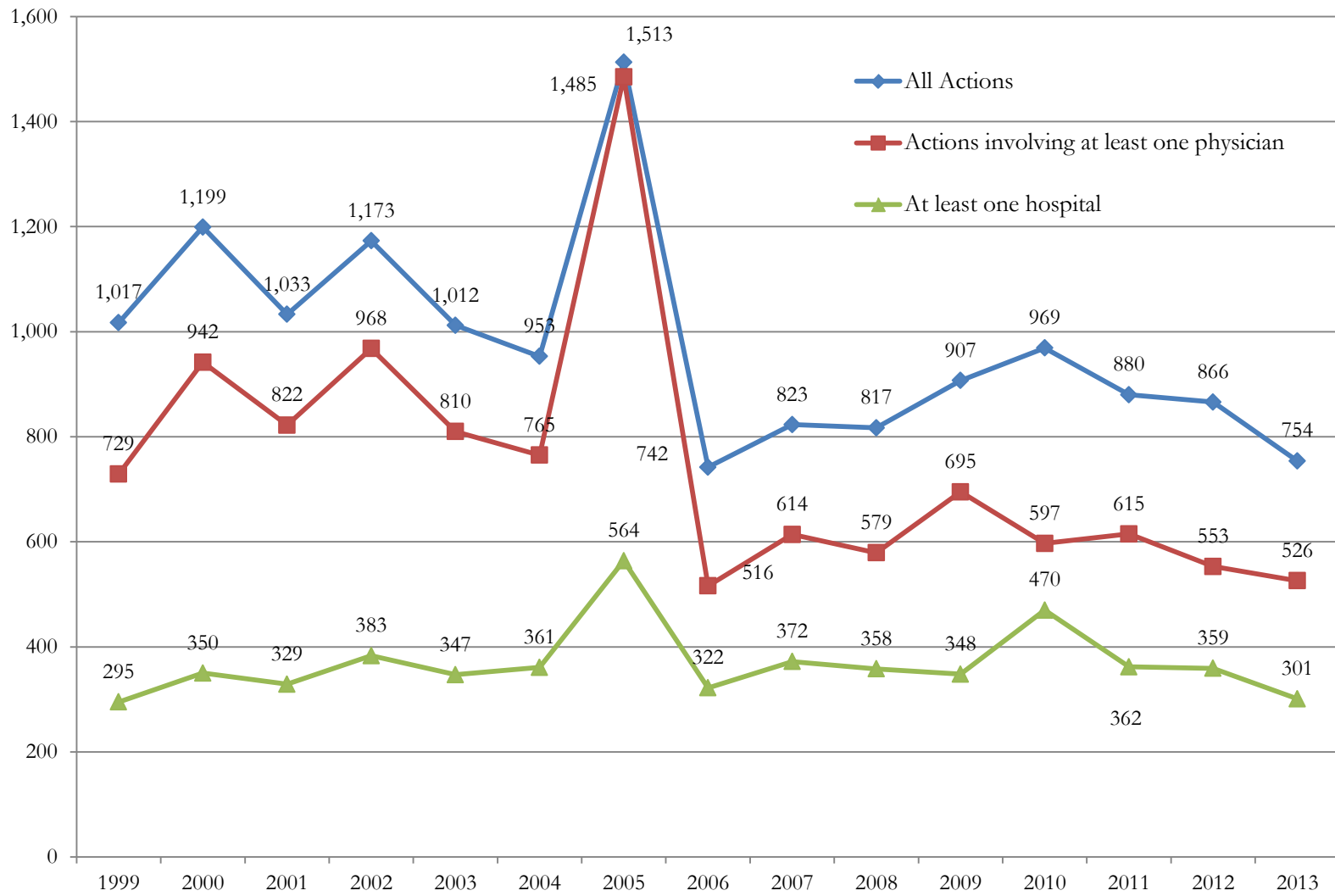
Licensed Medical Professional Liability Market - Hospitals							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$15,248,580	\$3,143,280	20.6%	\$13,199,320	\$1,974,721	15.0%	
1998	\$12,555,794	\$8,428,222	67.1%	\$14,604,144	\$2,875,637	19.7%	-17.6%
1999	\$16,948,592	\$12,870,063	75.9%	\$17,606,187	\$12,774,561	72.6%	34.9%
2000	\$29,795,347	\$12,437,665	41.7%	\$28,200,480	\$2,462,571	8.7%	75.8%
2001	\$17,016,926	\$12,078,108	71.0%	\$16,318,434	\$26,157,360	160.3%	-42.9%
2002	\$34,124,626	\$19,174,786	56.2%	\$29,340,028	\$27,119,153	92.4%	100.5%
2003	\$31,902,636	\$19,299,000	60.5%	\$27,781,676	\$24,359,179	87.7%	-6.5%
2004	\$47,899,466	\$20,485,670	42.8%	\$44,450,629	\$17,843,473	40.1%	50.1%
2005	\$42,269,475	\$8,873,832	21.0%	\$42,048,640	\$12,887,534	30.7%	-11.8%
2006	\$41,885,262	\$9,486,946	22.7%	\$42,430,660	(\$1,215,062)	-2.9%	-0.9%
2007	\$28,947,064	\$18,854,499	65.1%	\$30,601,130	(\$8,009,803)	-26.2%	-30.9%
2008	\$29,485,159	\$8,780,442	29.8%	\$29,598,095	\$8,197,263	27.7%	1.9%
2009	\$26,500,843	\$12,910,677	48.7%	\$27,951,125	\$4,797,557	17.2%	-10.1%
2010	\$26,921,014	\$10,839,530	40.3%	\$27,263,494	\$13,497,973	49.5%	1.6%
2011	\$26,326,999	\$15,185,561	57.7%	\$26,472,722	\$10,375,129	39.2%	-2.2%
2012	\$26,758,217	\$8,158,460	30.5%	\$27,024,112	\$6,868,410	25.4%	1.6%
2013	\$27,260,542	\$8,753,308	32.1%	\$27,008,248	\$12,224,931	45.3%	1.9%

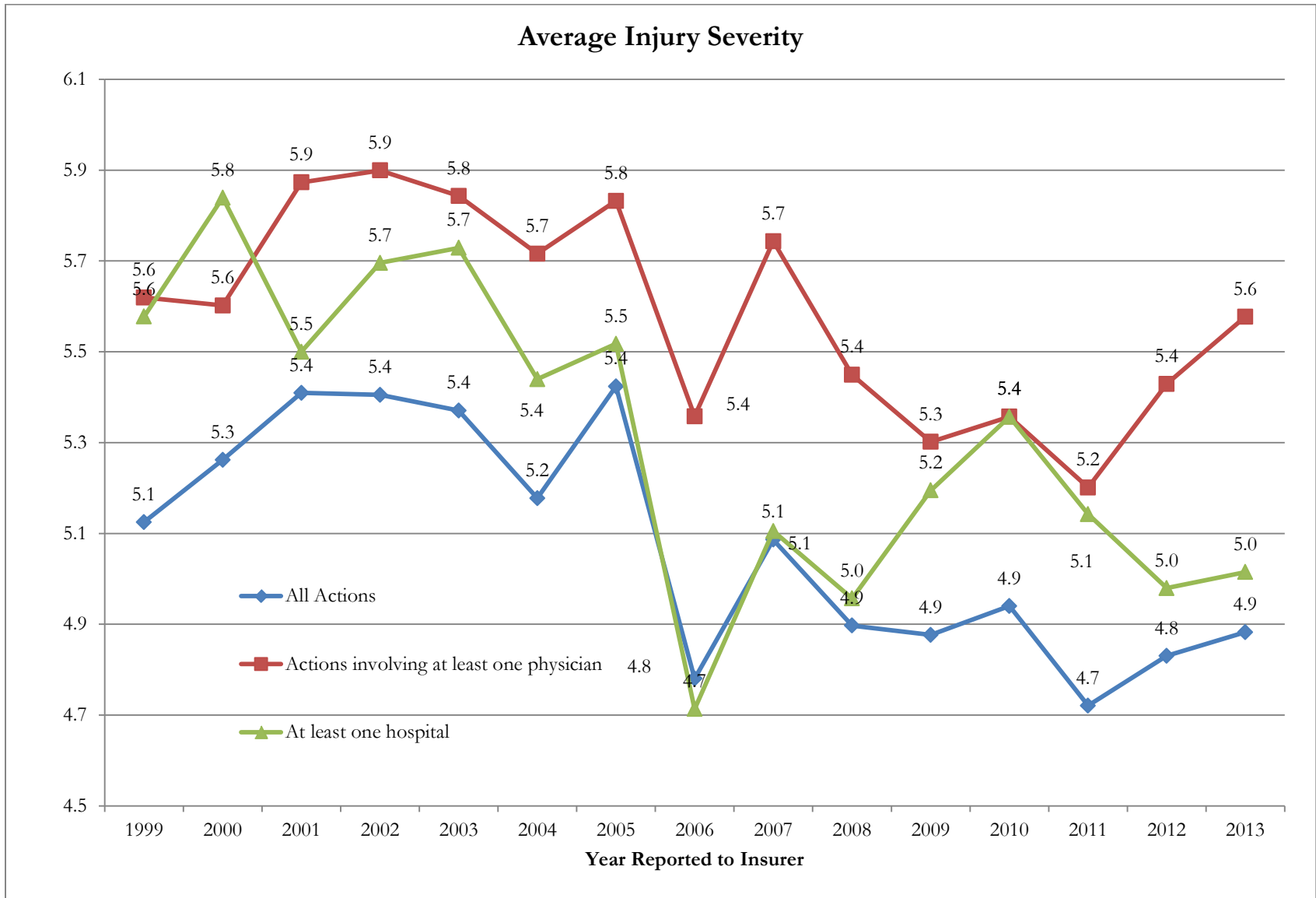
Licensed Medical Professional Liability Market - Other							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$18,770,001	\$5,714,900	30.5%	\$20,016,056	\$11,955,336	59.7%	
1998	\$9,437,033	\$10,145,048	107.5%	\$12,744,574	-\$904,059	-7.1%	-49.7%
1999	\$9,485,104	\$6,145,886	64.8%	\$8,112,075	\$15,532,787	191.5%	0.5%
2000	-\$2,200,088	\$4,297,362	-195.3%	-\$2,150,922	\$619,095	-28.8%	-123.2%
2001	\$10,744,197	\$9,684,802	90.1%	\$9,306,944	\$10,417,873	111.9%	-588.3%
2002	\$17,925,911	\$7,618,371	42.5%	\$17,112,098	\$15,340,524	89.7%	66.8%
2003	\$10,792,663	\$10,122,365	93.8%	\$13,881,532	\$30,985,744	223.2%	-39.8%
2004	\$10,033,751	\$7,882,678	78.6%	\$10,999,421	-\$7,029,405	-63.9%	-7.0%
2005	\$8,679,953	\$18,094,146	208.5%	\$10,229,416	-\$2,703,356	-26.4%	-13.5%
2006	\$8,527,828	\$236,981	2.8%	\$9,220,658	\$12,070,111	130.9%	-1.8%
2007	\$9,466,389	\$5,693,259	60.1%	\$9,268,831	\$5,581,593	60.2%	11.0%
2008	\$6,519,432	\$2,047,065	31.4%	\$8,475,741	\$727,137	8.6%	-31.1%
2009	\$7,859,446	\$16,183,484	205.9%	\$7,715,954	\$16,673,398	216.1%	20.6%
2010	\$5,624,077	\$986,659	17.5%	\$5,996,463	-\$3,388,244	-56.5%	-28.4%
2011	\$5,180,412	\$1,806,516	34.9%	\$5,191,464	\$1,390,461	26.8%	-7.9%
2012	\$8,066,454	\$2,256,649	28.0%	\$8,147,900	\$804,596	9.9%	55.7%
2013	\$5,270,323	\$1,674,312	31.8%	\$5,440,610	\$1,731,188	31.8%	34.7%



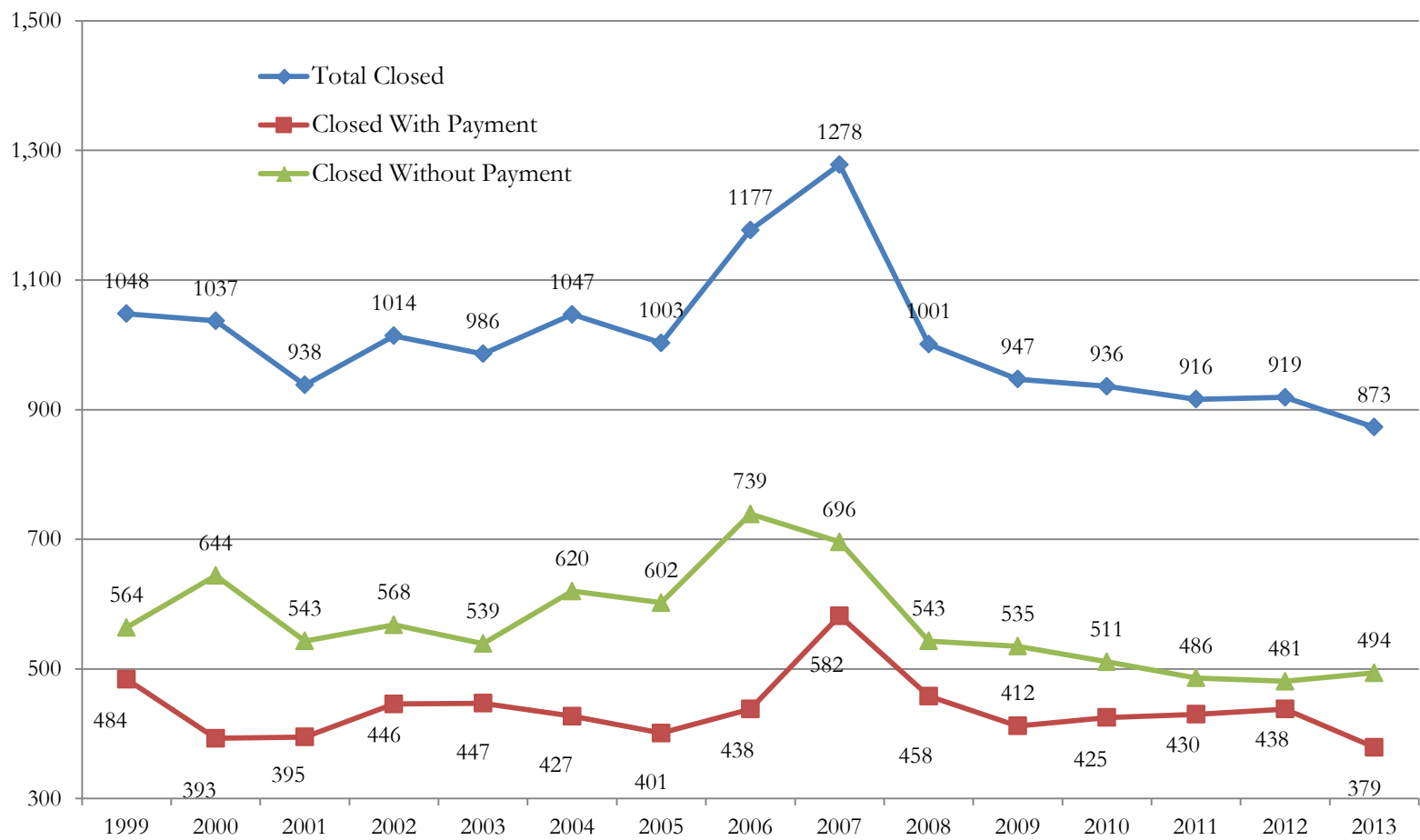


Number of Individuals Bringing Actions During Year

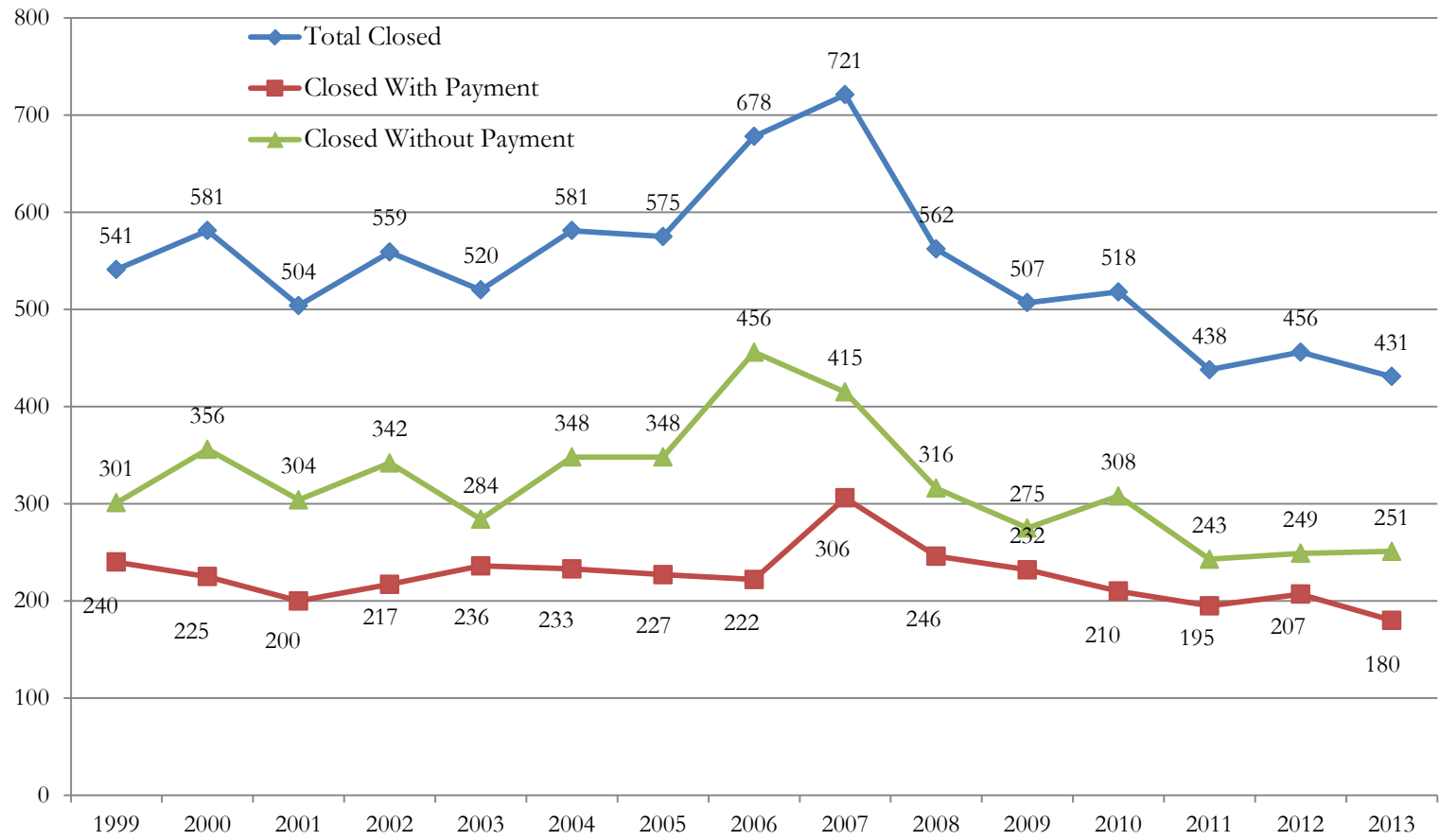




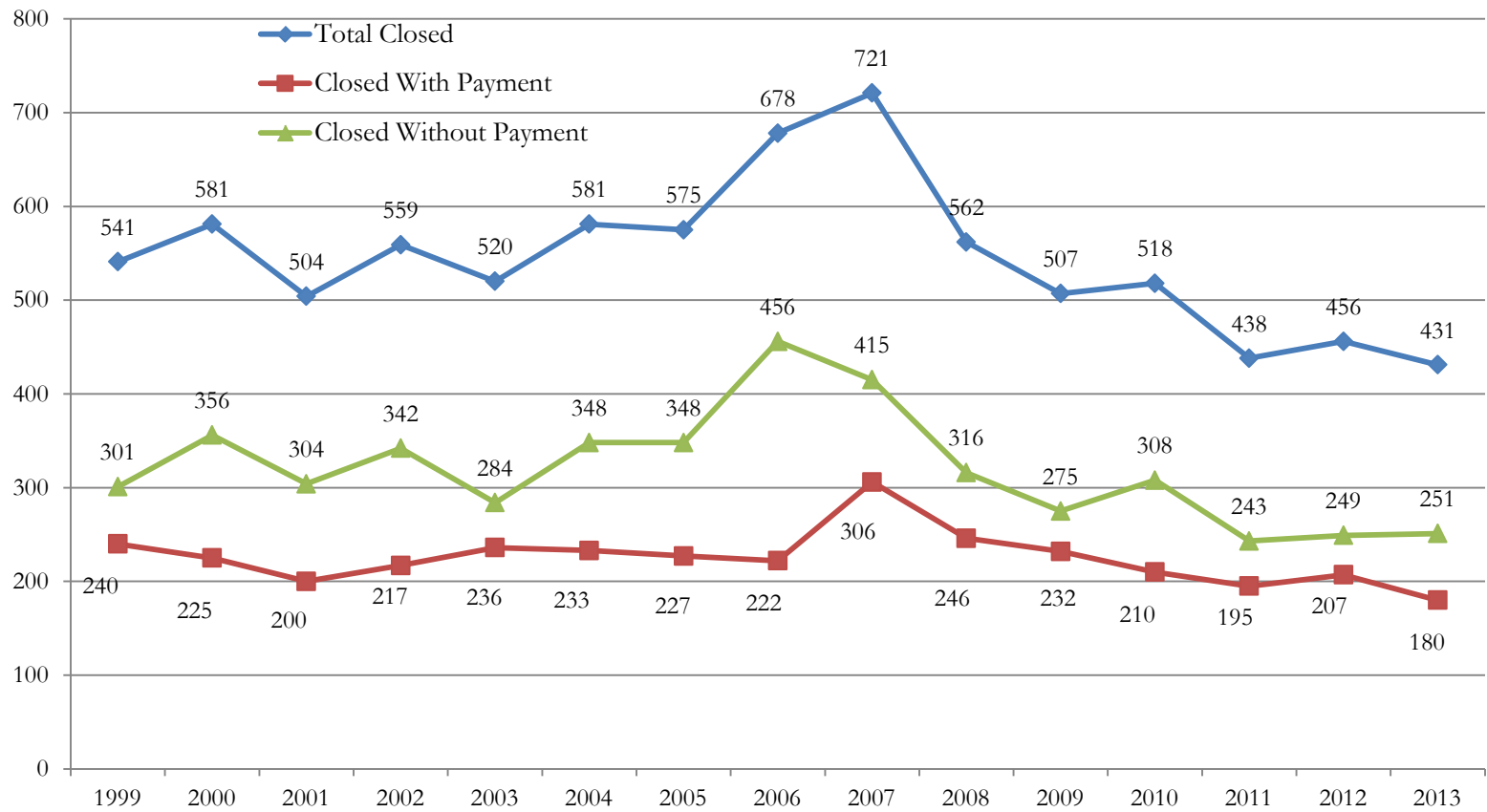
Closed Medical Liability Actions



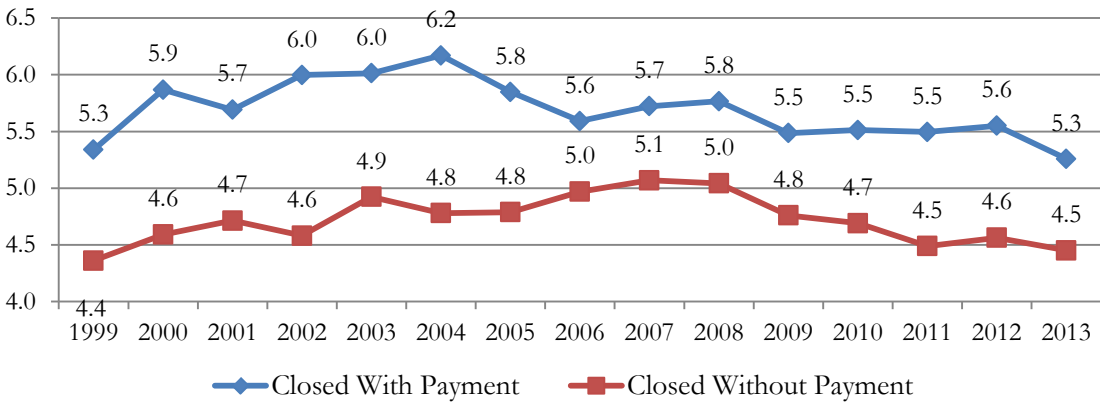
Closed Cases Involving at least one Physician



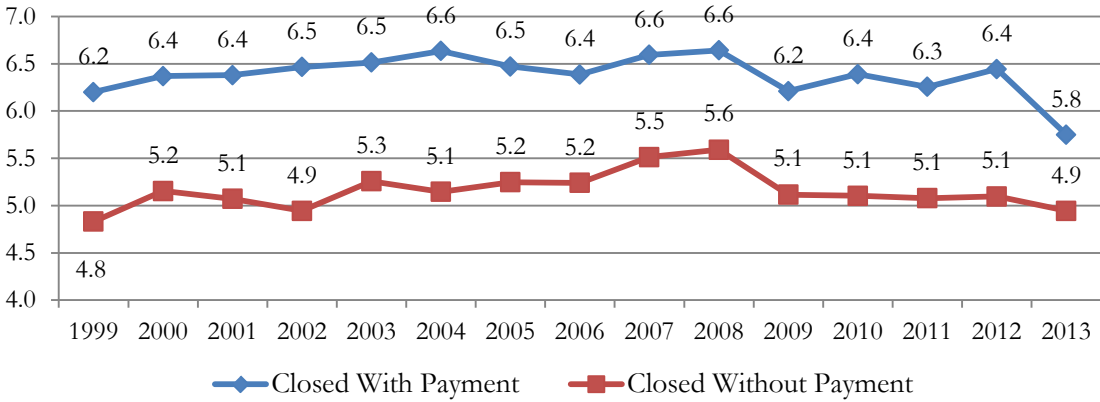
Closed Cases Involving at least One Hospital



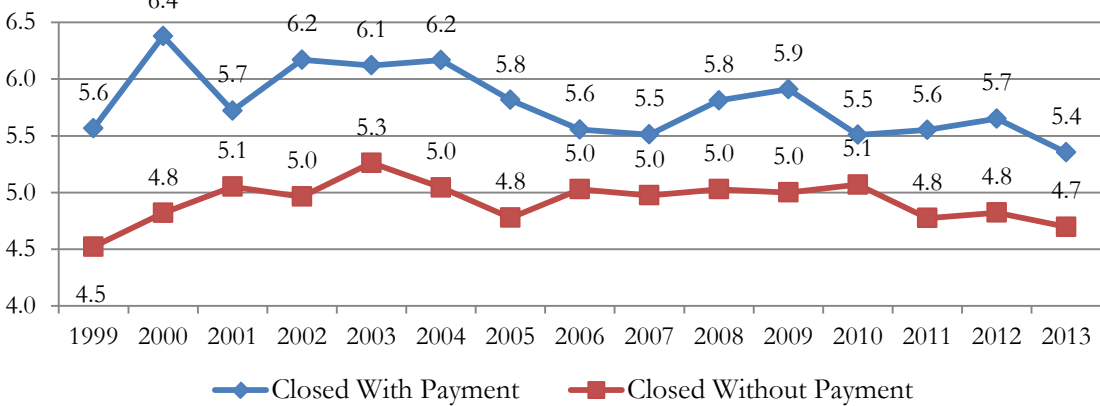
Average Injury Severity - All Closed Cases



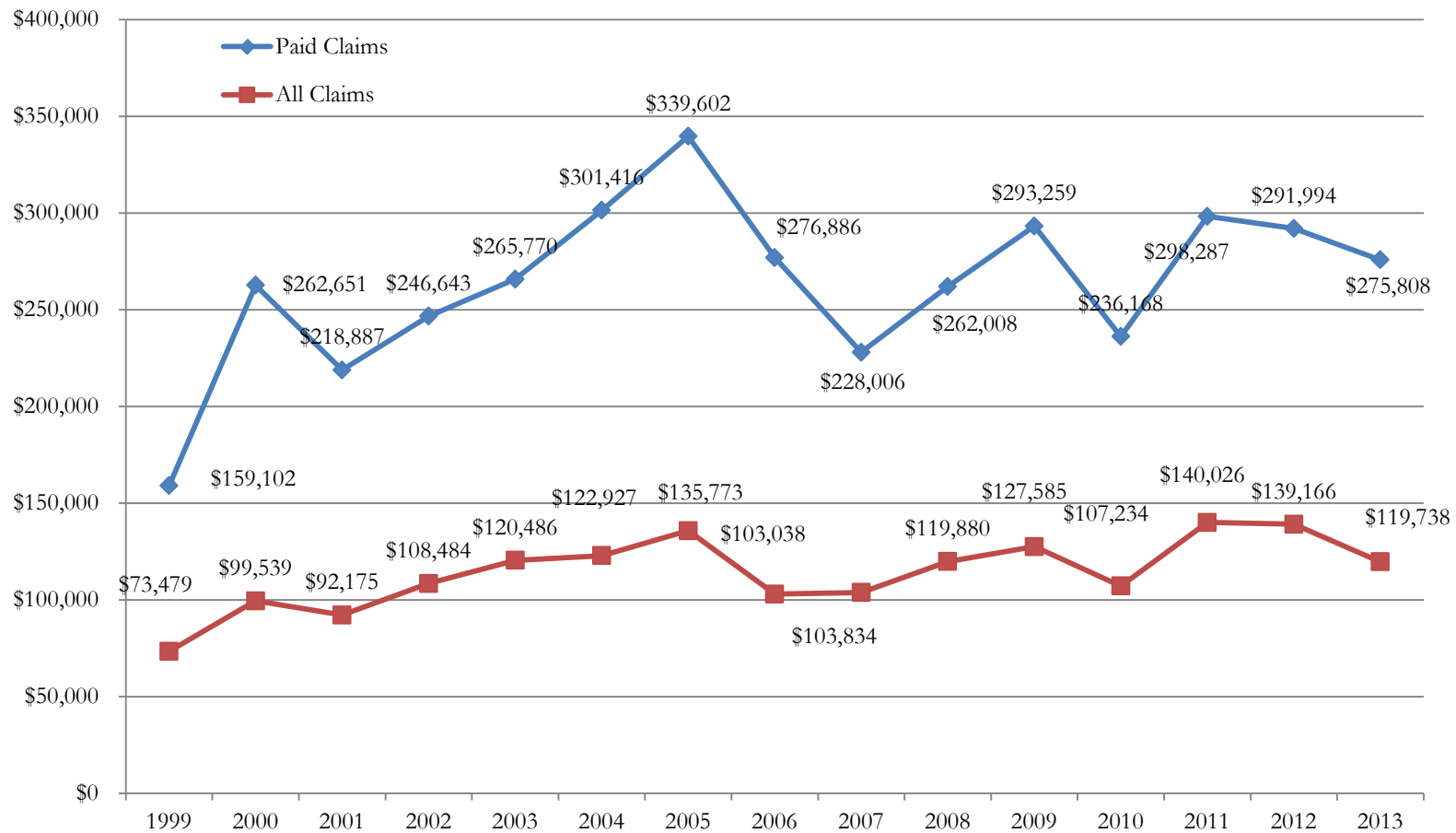
Cases Involving at least One Physician or Surgeon



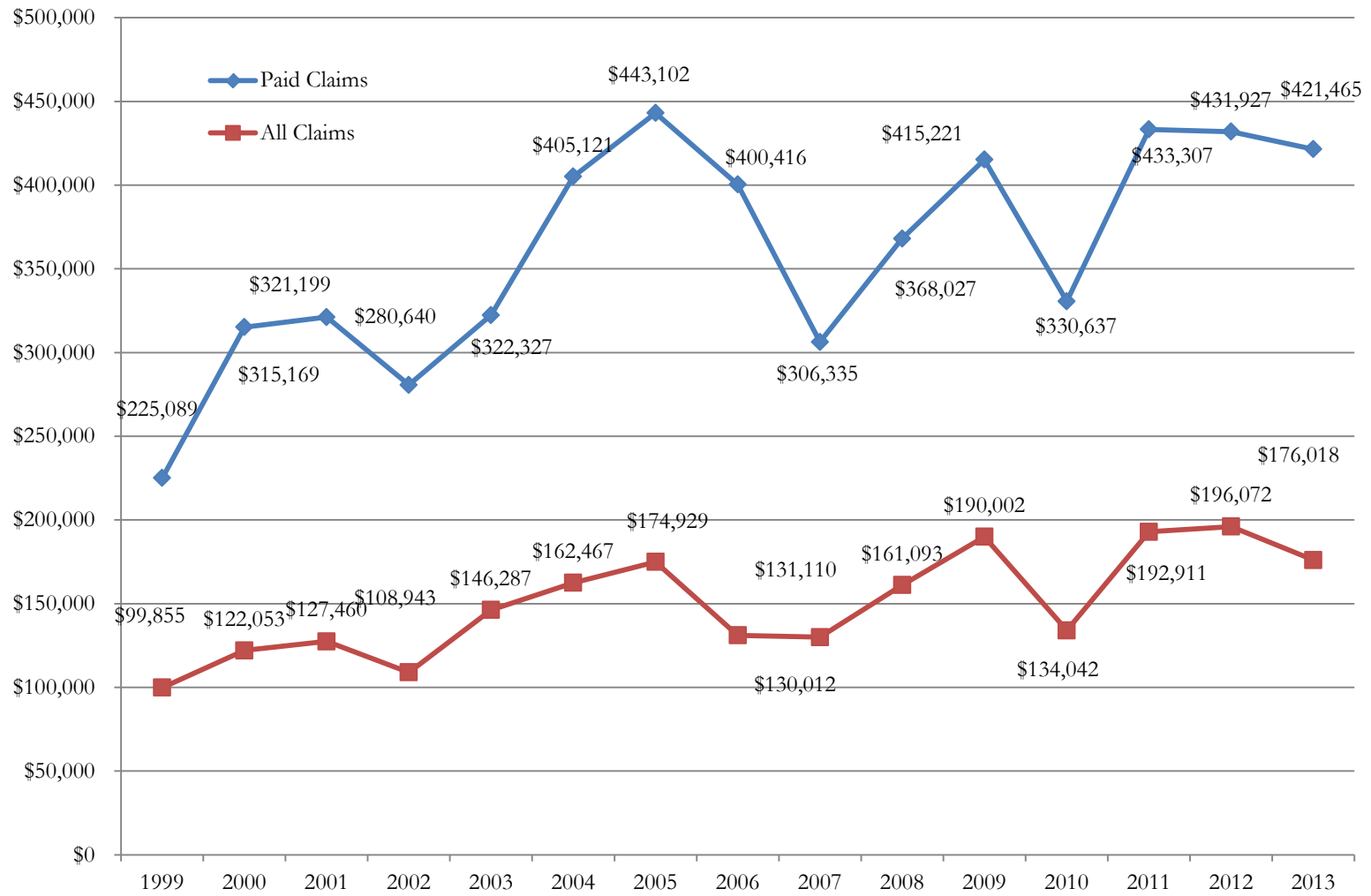
Cases Involving at least one Hospital



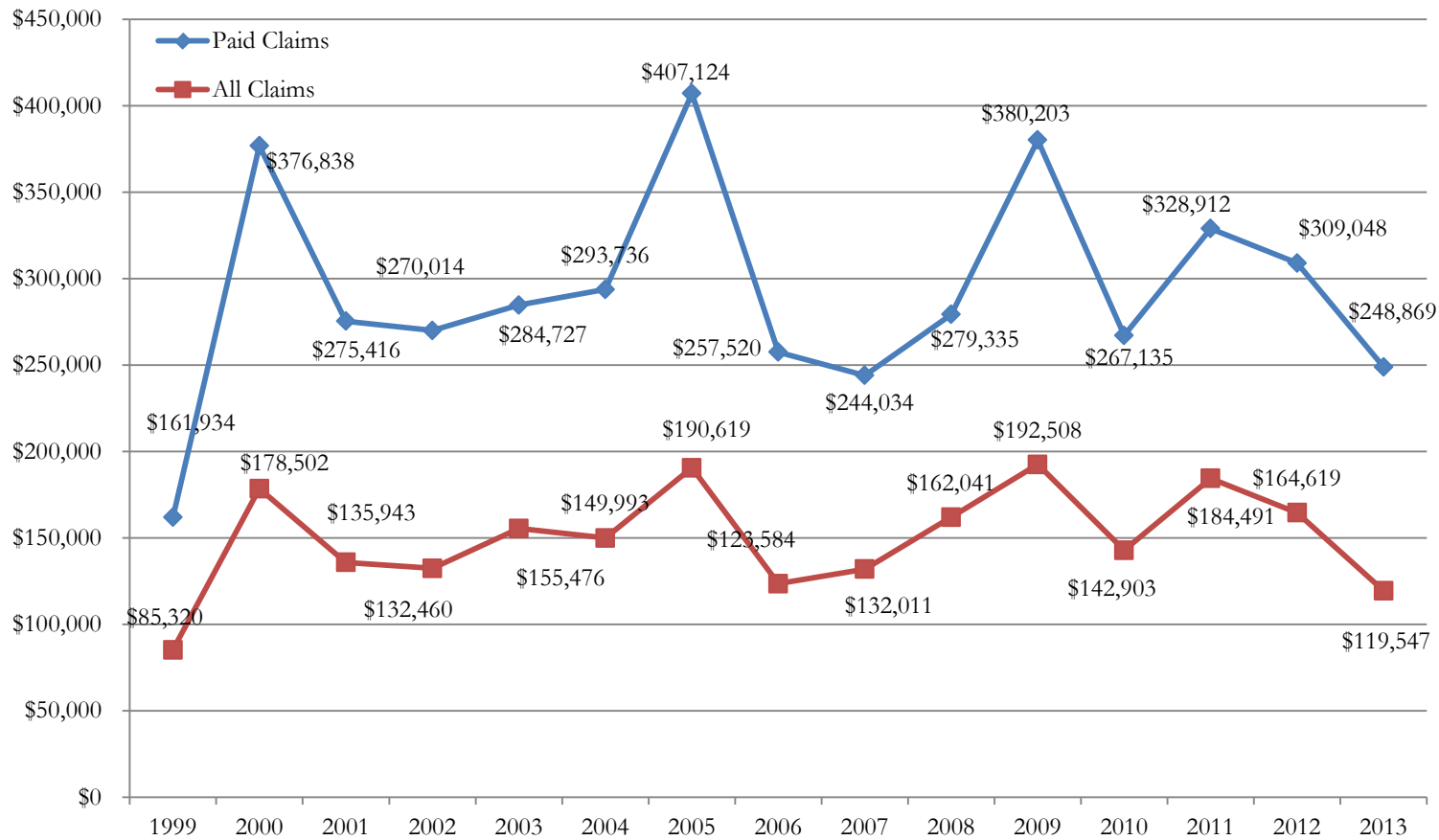
Average Indemnity Paid All Closed Cases



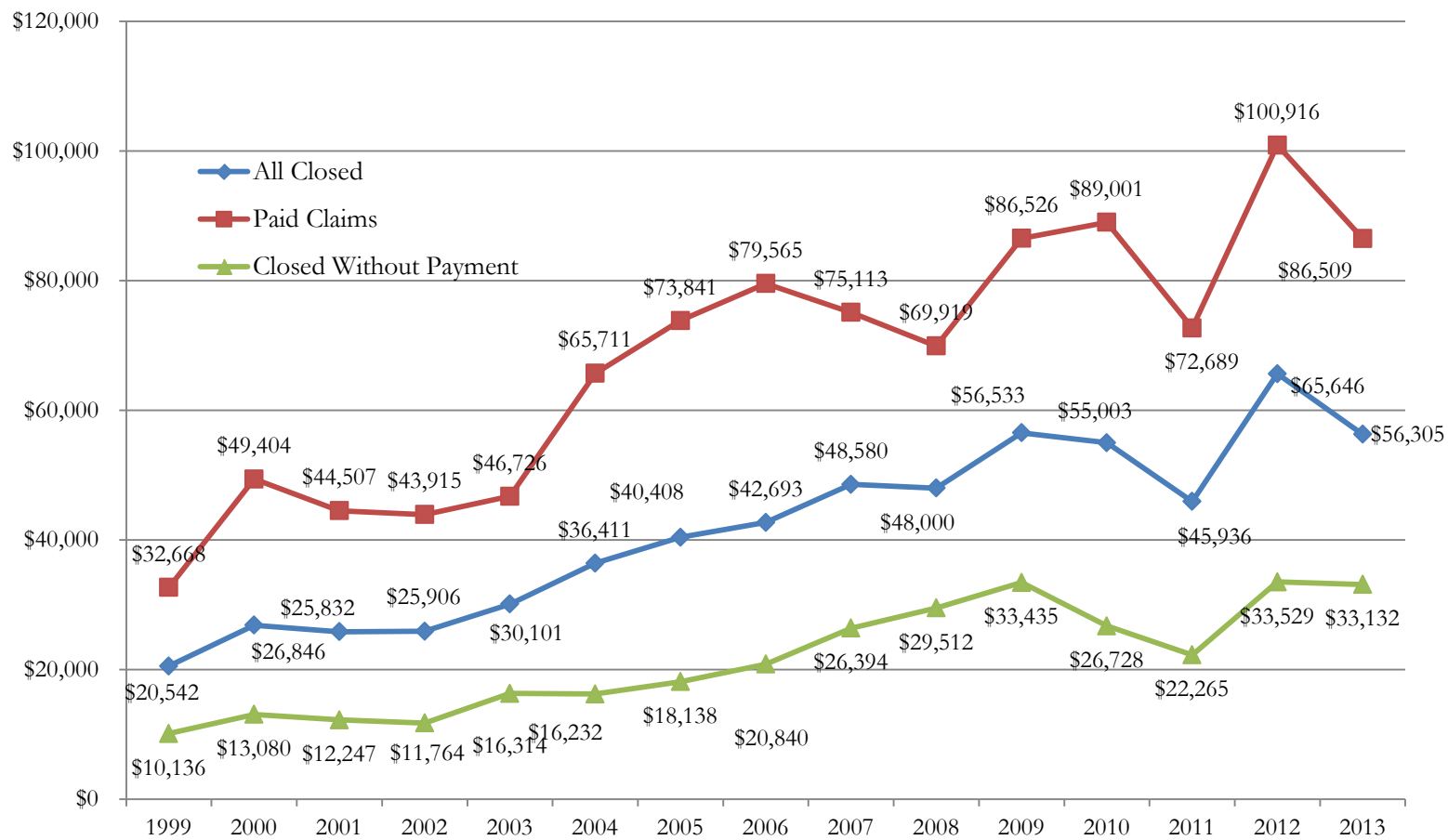
Average Indemnity Paid - Cases Involving at least One Physician or Surgeon



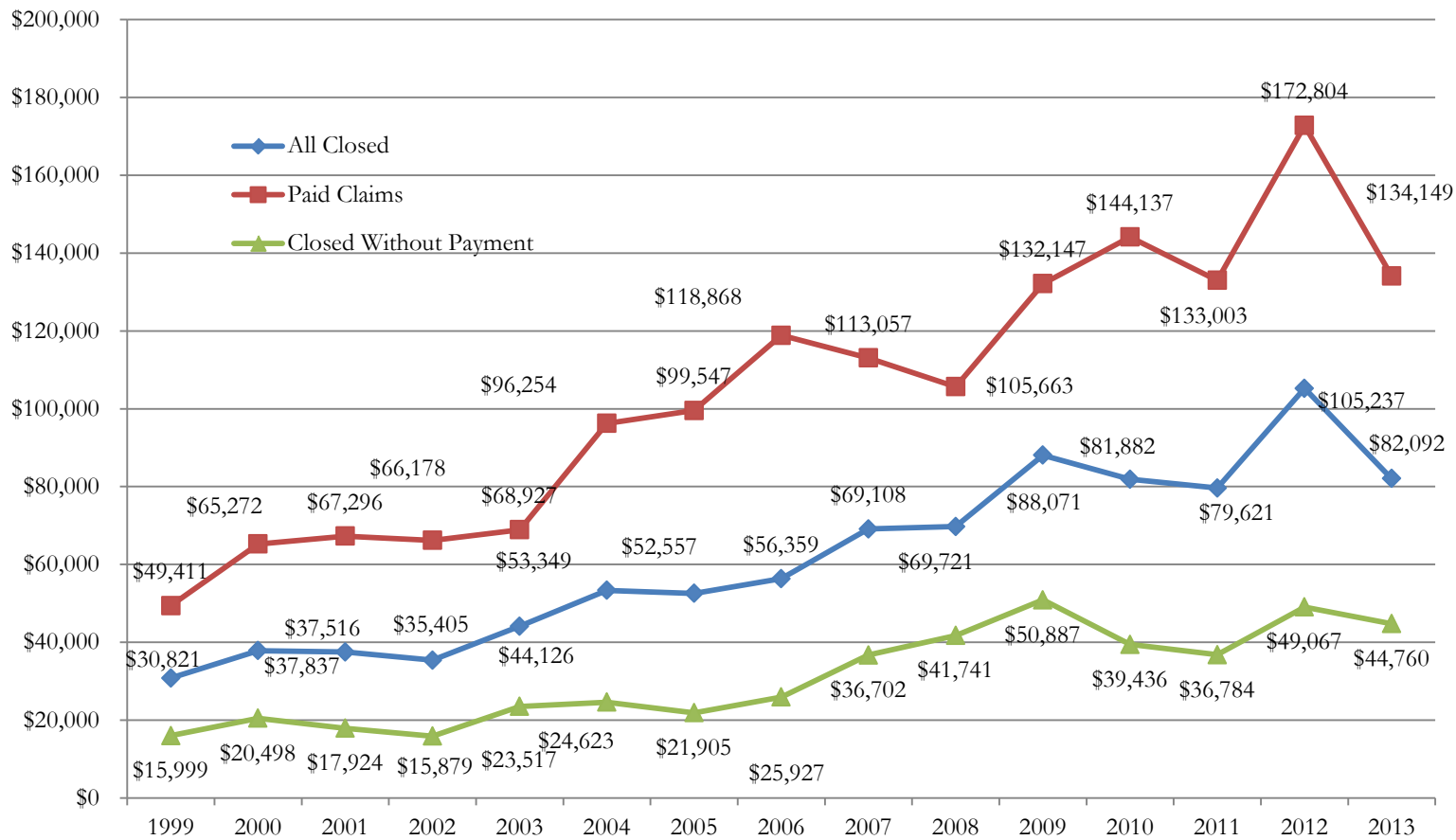
Average Indemnity Paid - Cases Involving at Least One Hospital



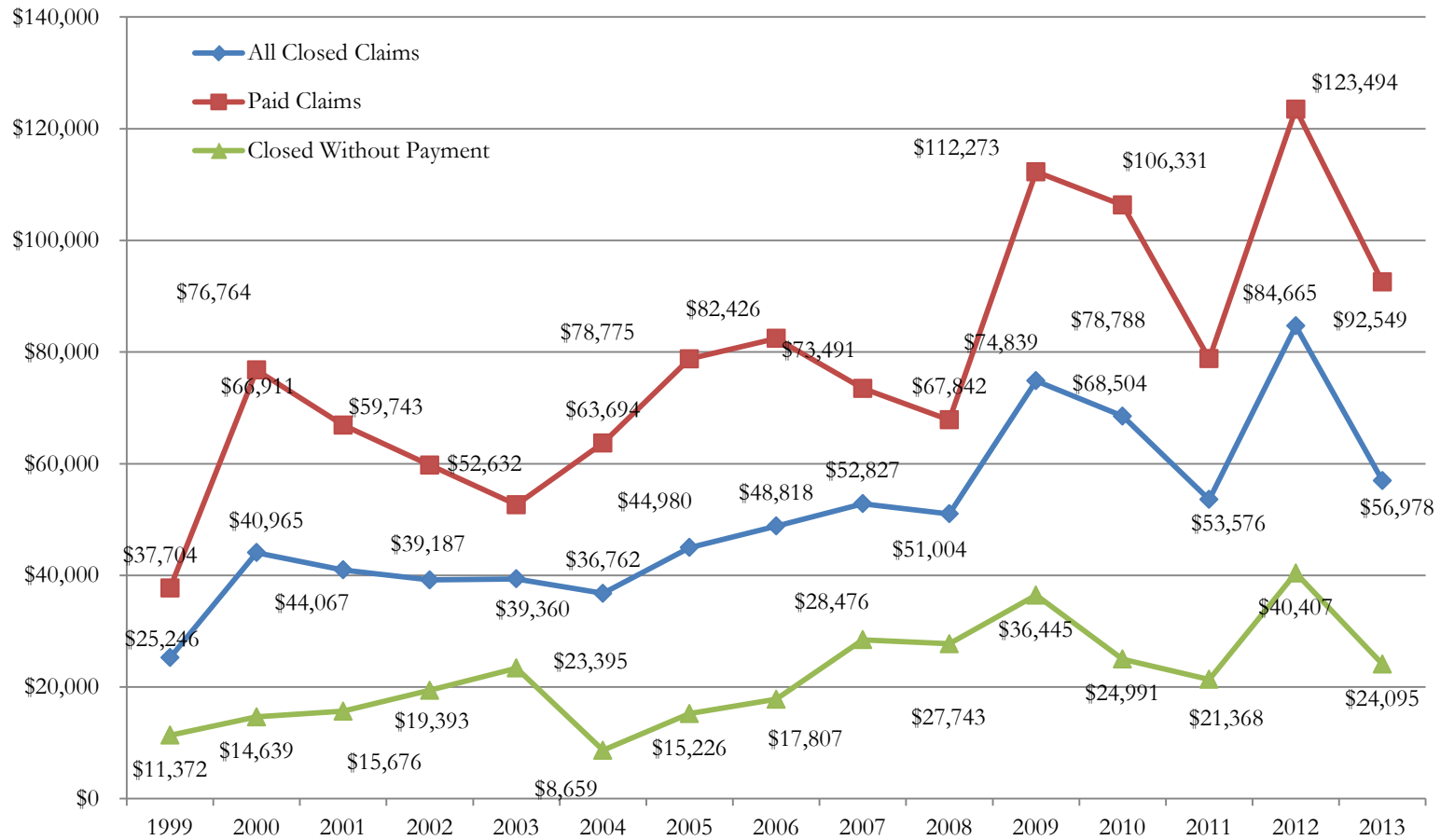
All Cases - Loss Adjustment Expense



Cases With A Least One Physician or Surgeon Loss Adjustment Expense



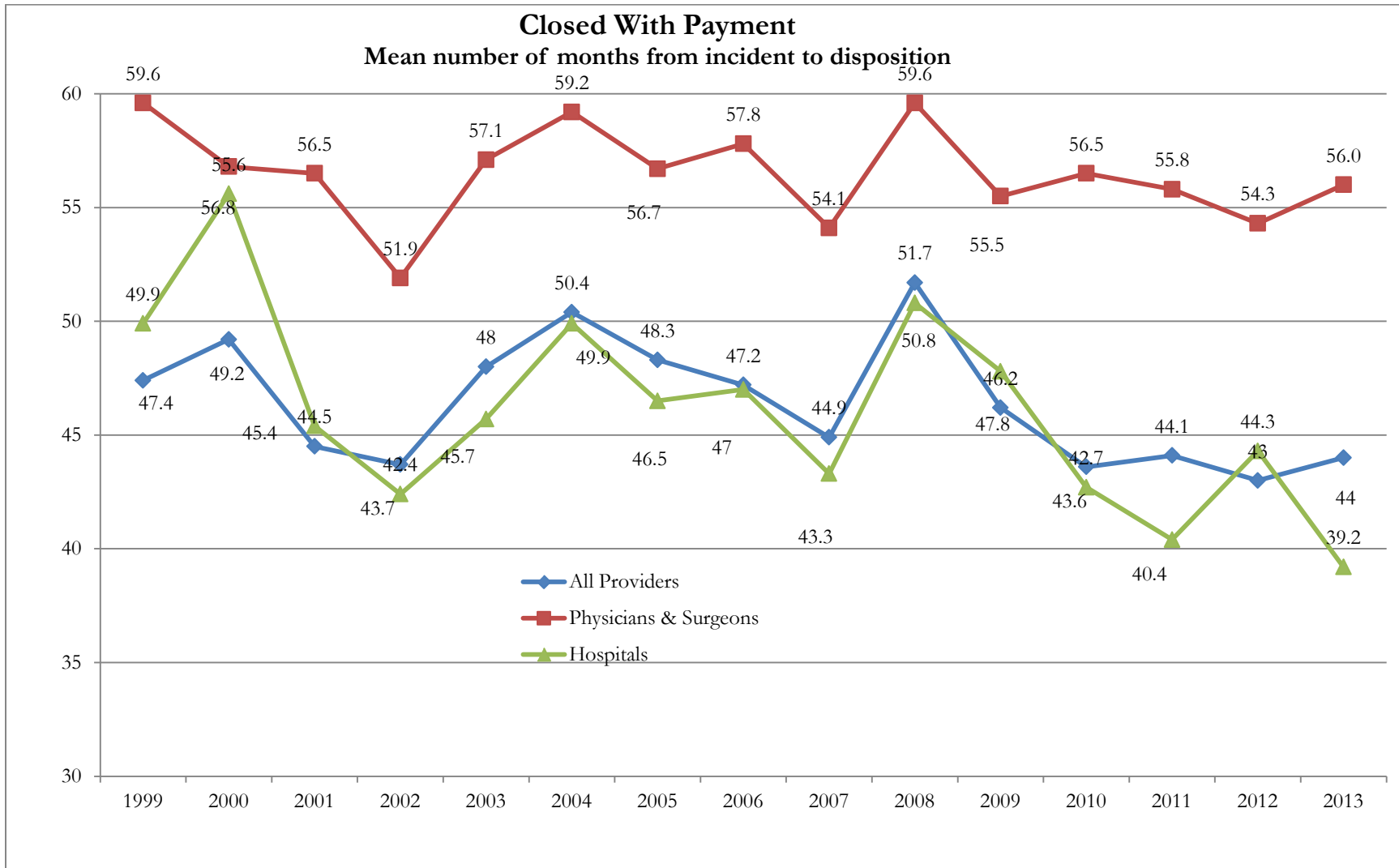
Cases Involving at Least One Hospital Loss Adjustment Expense



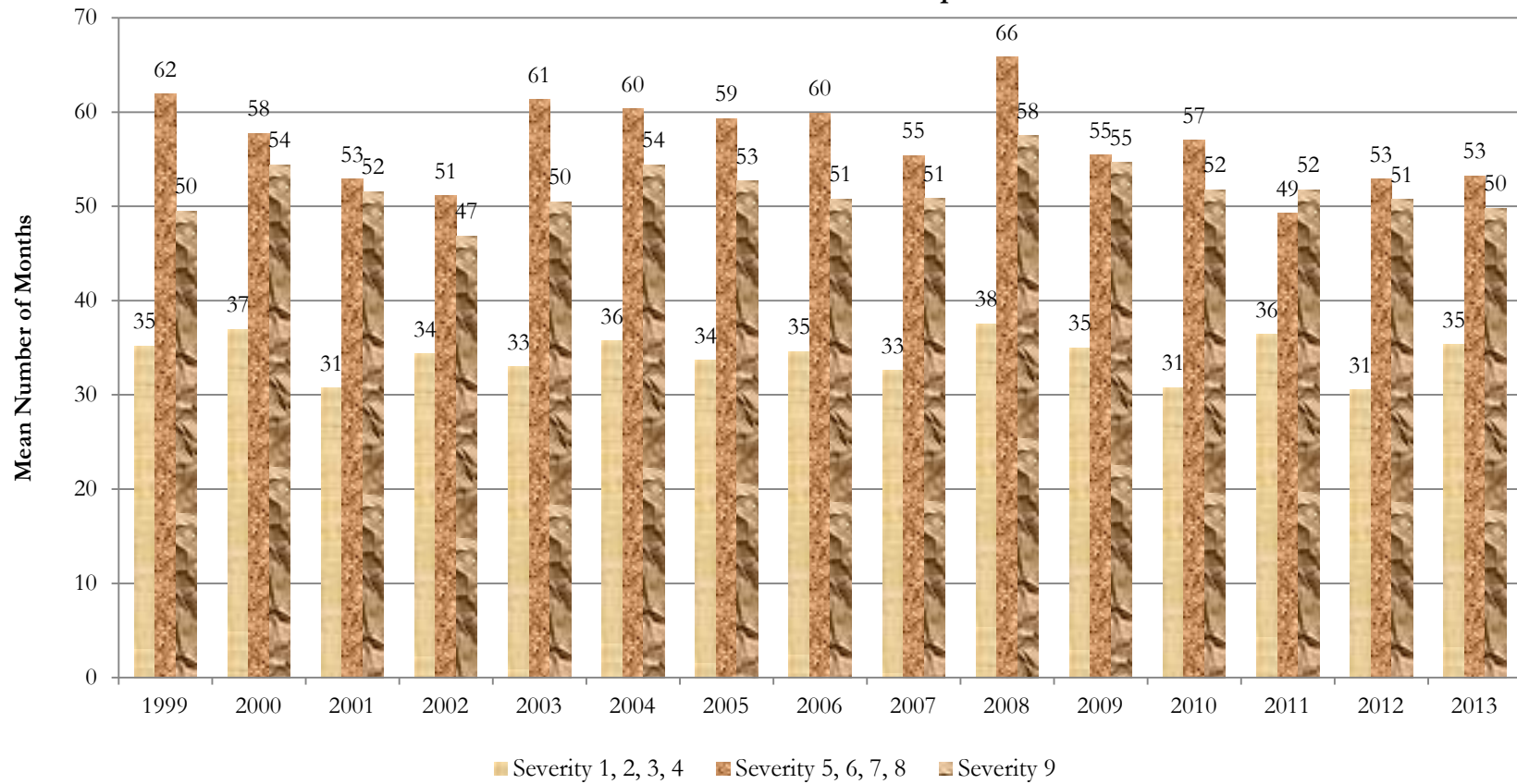
Medical Professional Liability – Court Filings Closed Between 1999 – 2013				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Adair	35	18	\$7,135,651	\$396,425
Andrew	18	11	\$1,859,000	\$169,000
Atchison	2	1	\$109,492	\$109,492
Audrain	32	14	\$3,139,728	\$224,266
Barry	16	11	\$3,442,289	\$312,935
Barton	8	5	\$980,000	\$196,000
Bates	9	4	\$577,000	\$144,250
Benton	2	1	\$17,500	\$17,500
Bollinger	2	0	\$0	\$0
Boone	319	152	\$66,570,401	\$437,963
Buchanan	249	115	\$34,171,054	\$297,140
Butler	125	54	\$9,765,596	\$180,844
Caldwell	1	0	\$0	\$0
Callaway	14	4	\$1,720,000	\$430,000
Camden	81	43	\$10,707,809	\$249,019
Cape Girardeau	158	65	\$15,852,010	\$243,877
Carroll	3	0	\$0	\$0
Carter	4	0	\$0	\$0
Cass	37	24	\$4,305,715	\$179,405
Cedar	8	2	\$153,500	\$76,750
Chariton	1	0	\$0	\$0
Christian	5	1	\$145,000	\$145,000
Clark	4	1	\$50,000	\$50,000
Clay	299	124	\$33,500,282	\$270,164
Clinton	13	5	\$825,000	\$165,000
Cole	166	59	\$17,370,567	\$294,416
Cooper	10	5	\$609,250	\$121,850
Crawford	14	6	\$943,233	\$157,206
Dade	3	2	\$520,000	\$260,000
Dallas	4	1	\$35,000	\$35,000
Daviess	0	0	\$0	\$0
DeKalb	2	2	\$67,000	\$33,500
Dent	10	5	\$1,372,300	\$274,460
Douglas	2	2	\$1,209,844	\$604,922
Dunklin	40	21	\$3,784,750	\$180,226
Franklin	43	13	\$4,230,988	\$325,461
Gasconade	5	0	\$0	\$0
Gentry	3	0	\$0	\$0
Greene	578	319	\$121,417,722	\$380,620
Grundy	7	2	\$10,000	\$5,000
Harrison	5	1	\$180,000	\$180,000

Medical Professional Liability – Court Filings Closed Between 1999 – 2013				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Henry	19	8	\$2,432,601	\$304,075
Hickory	0	0	\$0	\$0
Holt	2	1	\$87,500	\$87,500
Howard	2	2	\$28,500	\$14,250
Howell	45	21	\$5,921,860	\$281,993
Iron	3	1	\$384,466	\$384,466
Jackson	2,087	1,175	\$394,122,747	\$335,424
Jasper	382	230	\$111,124,808	\$483,151
Jefferson	150	61	\$10,873,244	\$178,250
Johnson	73	45	\$16,323,208	\$362,738
Knox	3	2	\$350,000	\$175,000
Laclede	17	11	\$2,452,000	\$222,909
Lafayette	13	10	\$1,884,000	\$188,400
Lawrence	21	12	\$1,978,367	\$164,864
Lewis	1	0	\$0	\$0
Lincoln	12	4	\$221,000	\$55,250
Linn	11	5	\$470,977	\$94,195
Livingston	9	5	\$868,000	\$173,600
McDonald	4	3	\$125,000	\$41,667
Macon	10	7	\$2,543,000	\$363,286
Madison	25	11	\$1,671,220	\$151,929
Maries	3	2	\$500,000	\$250,000
Marion	55	26	\$13,703,951	\$527,075
Mercer	2	0	\$0	\$0
Miller	5	2	\$83,000	\$41,500
Mississippi	6	1	\$51,398	\$51,398
Moniteau	8	2	\$55,000	\$27,500
Monroe	3	0	\$0	\$0
Montgomery	5	3	\$930,000	\$310,000
Morgan	7	3	\$450,000	\$150,000
New Madrid	16	9	\$1,438,571	\$159,841
Newton	59	29	\$3,373,500	\$116,328
Nodaway	16	8	\$915,350	\$114,419
Oregon	1	1	\$35,000	\$35,000
Osage	2	2	\$34,717	\$17,359
Ozark	2	0	\$0	\$0
Pemiscot	18	7	\$1,507,500	\$215,357
Perry	10	2	\$529,000	\$264,500
Pettis	56	24	\$9,465,761	\$394,407
Phelps	78	41	\$10,660,138	\$260,003
Pike	15	3	\$2,718,500	\$906,167
Platte	28	17	\$2,690,460	\$158,262
Polk	46	28	\$5,207,229	\$185,972

Medical Professional Liability – Court Filings Closed Between 1999 – 2013				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Pulaski	10	6	\$3,656,000	\$609,333
Putnam	1	0	\$0	\$0
Ralls	1	0	\$0	\$0
Randolph	30	16	\$4,370,133	\$273,133
Ray	4	3	\$544,000	\$181,333
Reynolds	3	3	\$339,875	\$113,292
Ripley	9	4	\$1,034,087	\$258,522
Saint Charles	193	65	\$13,472,086	\$207,263
Saint Clair	31	13	\$1,464,145	\$112,627
Sainte Genevieve	11	6	\$1,244,900	\$207,483
Saint Francois	70	30	\$8,116,036	\$270,535
Saint Louis	1,793	686	\$177,239,634	\$258,367
Saline	26	15	\$6,296,500	\$419,767
Schuyler	1	1	\$100,000	\$100,000
Scotland	6	1	\$5,000	\$5,000
Scott	86	43	\$14,444,590	\$335,921
Shannon	0	0	\$0	\$0
Shelby	2	0	\$0	\$0
Stoddard	14	6	\$1,530,624	\$255,104
Stone	8	5	\$662,500	\$132,500
Sullivan	2	0	\$0	\$0
Taney	69	34	\$7,404,370	\$217,776
Texas	15	4	\$457,500	\$114,375
Vernon	28	19	\$7,444,519	\$391,817
Warren	3	3	\$3,540,000	\$1,180,000
Washington	7	1	\$250,000	\$250,000
Wayne	4	2	\$365,000	\$182,500
Webster	7	2	\$615,000	\$307,500
Worth	2	1	\$675,000	\$675,000
Wright	2	0	\$0	\$0
Saint Louis City	1,545	725	\$314,141,648	\$433,299
Appellate Court	8	0	\$0	\$0
Federal Court	479	86	\$28,971,310	\$336,876
Guaranty Fund	229	104	\$17,721,013	\$170,394
Out Of State	167	61	\$26,879,906	\$440,654
Unknown	63	14	\$4,203,954	\$300,282

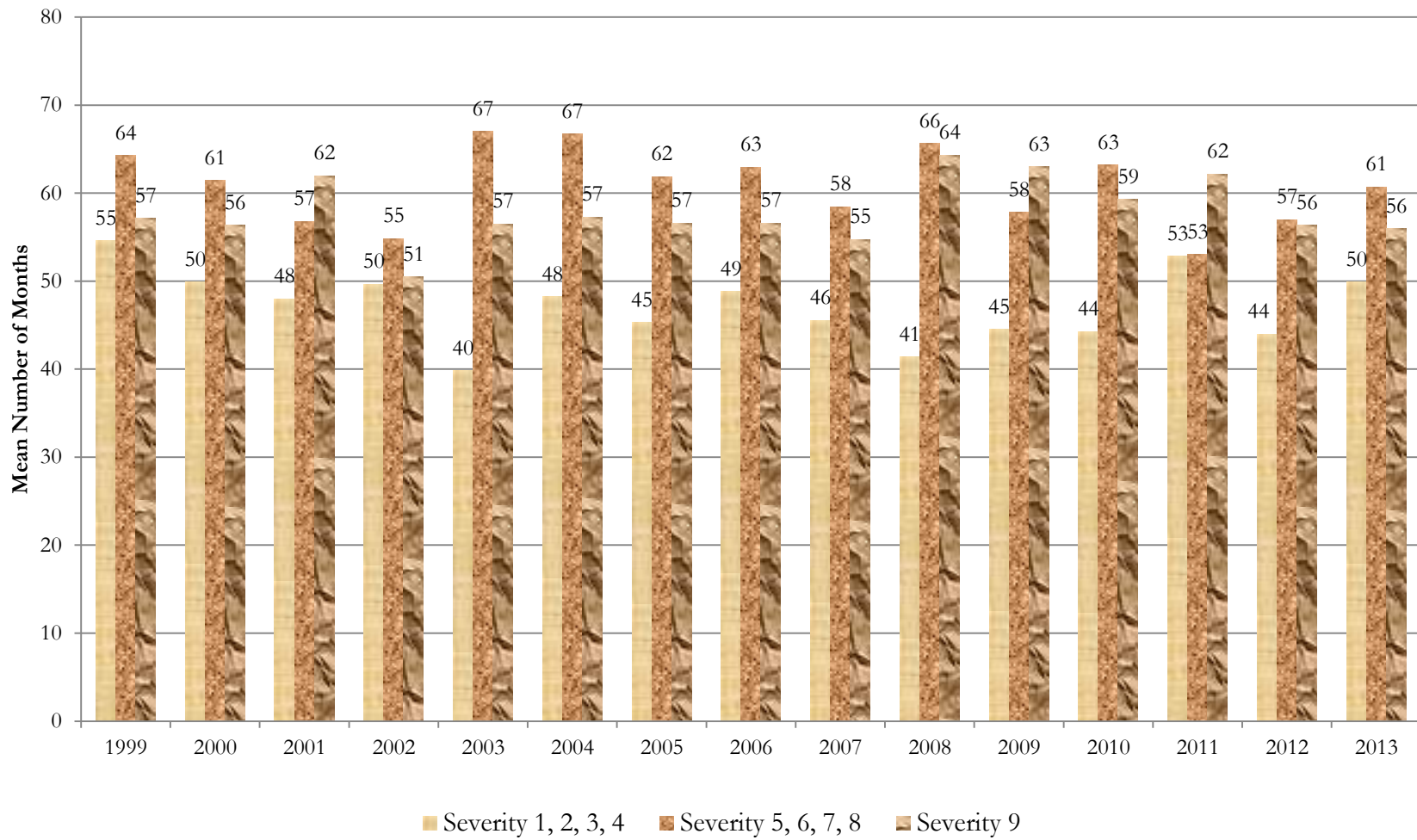


Bodily Injury Severity of Paid Claims - All Providers Mean Number of Months from Incident to Disposition

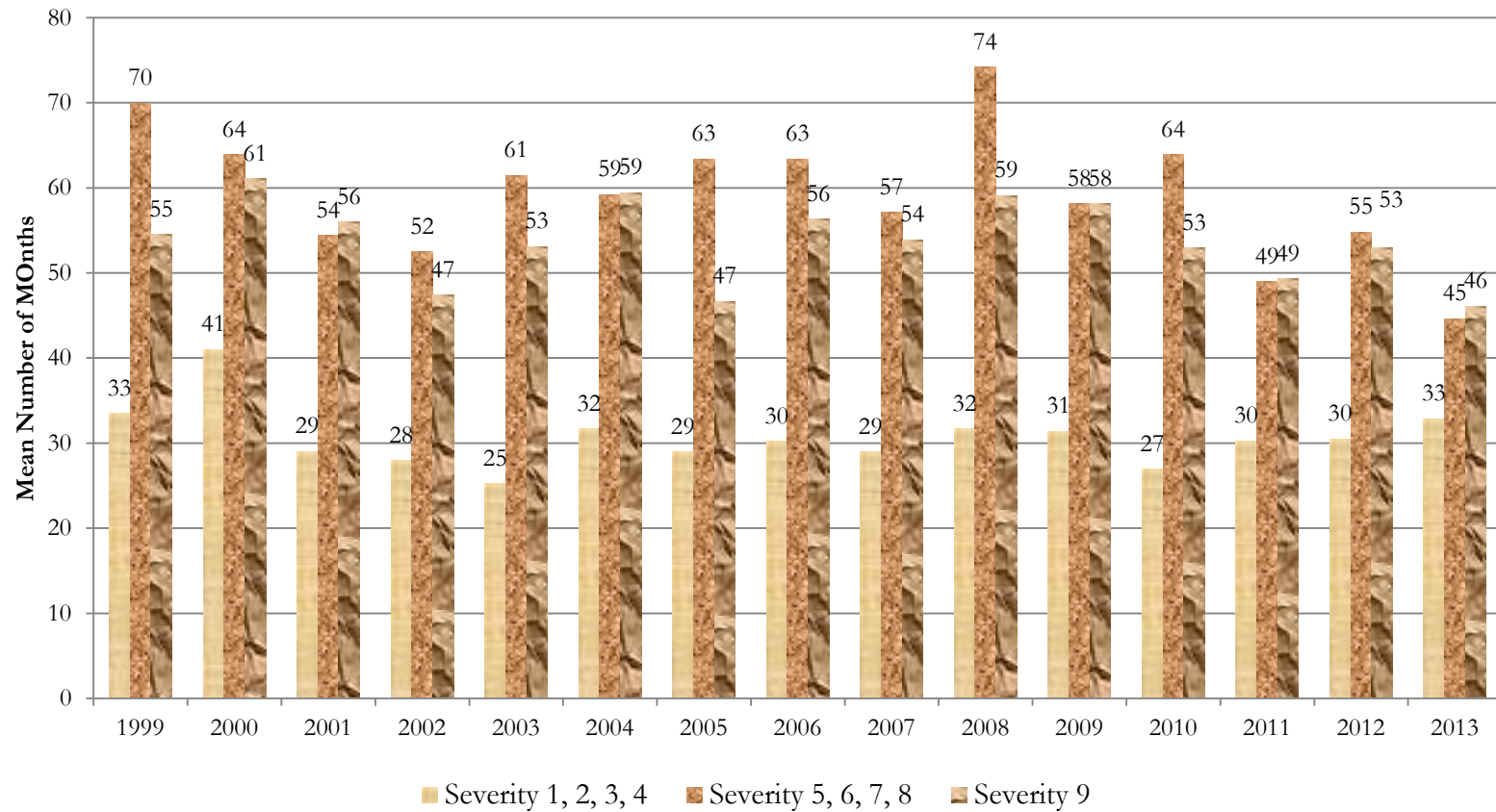


Bodily Injury Severity of Paid Claims - Physicians & Surgeons

Mean Number of Months from Incident to Disposition



Bodily Injury Severity of Paid Claims - Hospitals Mean Number of Months from Incident to Disposition



Section II

Claim Severity

This section classifies individual claim data based on the amount of indemnity paid. The data for all medical providers, physicians & Surgeons, and Hospitals are presented separately for the years 2011, 2012 and 2013. Summaries include:

- Average number of months from incident to close
- Number of claims reported and closed
- Cumulative percentage of number of claims
- Total indemnity paid
- Cumulative percentage of indemnity paid for closed claims
- Average economic damages
- Average non-economic damages
- Average indemnity
- Average loss adjustment expense

The following terms are used in subsequent tables:

Economic damages: damages arising from monetary harm including medical bills, lost wages, and lost earning capacity.

Non-economic damages: damages arising from non-monetary harm, including mental anguish, inconvenience, physical impairment, disfigurement, loss of capacity to enjoy life and loss of consortium.

Loss adjustment expenses: expense paid to defense counsel and all other allocated loss adjustment expenses, such as filing fees, telephone charges, and fees for expert witnesses.

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2013, All Cases									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	42	494	56.59%	\$0	0.00%	\$0	\$0	\$0	\$33,132
1,000 - 1,999	23	21	58.99%	\$20,187	0.02%	\$477	\$484	\$961	\$16,243
2,000 - 2,999	28	6	59.68%	\$14,346	0.03%	\$1,624	\$767	\$2,391	\$1,128
3,000 - ,3999	28	9	60.71%	\$30,429	0.06%	\$1,403	\$1,978	\$3,381	\$32,032
4,000 - 4,999	18	3	61.05%	\$13,000	0.07%	\$3,133	\$1,200	\$4,333	\$51
5,000 - 5,999	19	6	61.74%	\$31,191	0.10%	\$1,749	\$3,450	\$5,199	\$900
6,000 - 6,999	7	1	61.86%	\$6,500	0.11%	\$0	\$6,500	\$6,500	\$0
7,000 - 7,999	21	4	62.31%	\$30,281	0.14%	\$2,402	\$5,169	\$7,570	\$4,939
8,000 - 8,999	20	3	62.66%	\$24,625	0.16%	\$3,841	\$4,367	\$8,208	\$1,932
10,000 - 19,999	32	33	66.44%	\$428,986	0.57%	\$4,075	\$8,924	\$13,000	\$20,494
20,000 - 29,999	43	25	69.30%	\$585,863	1.13%	\$5,553	\$17,882	\$23,435	\$46,503
30,000 - 39,999	43	12	70.68%	\$412,522	1.53%	\$9,857	\$24,520	\$34,377	\$55,238
40,000 - 49,999	53	13	72.16%	\$553,500	2.06%	\$13,746	\$28,831	\$42,577	\$46,998
50,000 - 59,999	44	17	74.11%	\$894,631	2.91%	\$16,376	\$35,661	\$52,625	\$29,447
60,000 - 69,999	48	8	75.03%	\$500,000	3.39%	\$20,081	\$42,419	\$62,500	\$62,971
70,000 - 79,999	46	13	76.52%	\$967,500	4.32%	\$10,834	\$63,589	\$74,423	\$70,983
80,000 - 89,999	38	8	77.43%	\$682,011	4.97%	\$44,125	\$41,126	\$85,251	\$49,413
90,000 - 99,999	67	6	78.12%	\$550,000	5.50%	\$26,689	\$64,978	\$91,667	\$47,797
100,000 -199,999	48	77	86.94%	\$10,671,680	15.71%	\$46,074	\$92,519	\$138,593	\$81,564
200,000 - 299,999	49	28	90.15%	\$6,443,000	21.87%	\$88,762	\$141,345	\$230,107	\$119,697
300,000 - 399,999	47	17	92.10%	\$5,825,000	27.44%	\$169,743	\$172,904	\$342,647	\$87,614
400,000 - 499,999	53	18	94.16%	\$7,788,500	34.89%	\$255,989	\$176,706	\$432,694	\$200,905
500,000 - 999,999	53	23	96.79%	\$16,155,490	50.35%	\$339,792	\$362,620	\$702,413	\$241,965
1,000,000 - 1,999,999	60	22	99.31%	\$28,012,009	77.15%	\$529,551	\$743,722	\$1,273,273	\$210,306
2,000,000 - 2,999,999	40	3	99.66%	\$6,590,000	83.45%	\$1,063,333	\$1,133,333	\$2,196,667	\$162,158
Over 4,000,000	65	3	100.00%	\$17,300,000	100.00%	\$3,050,000	\$2,716,667	\$5,766,667	\$327,160
Total	43	873	.	\$104,531,251	.	\$53,916	\$65,811	\$119,738	\$56,305
Total (Paid Only)	44	379	.	\$104,531,251	.	\$124,191	\$151,590	\$275,808	\$86,509

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2013, Cases Involving At Least One Physician or Surgeon**

Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	45	251	58.24%	\$0	0.00%	\$0	\$0	\$0	\$44,760
1,000 - 1,999	79	2	58.70%	\$3,358	0.00%	\$1,679	\$0	\$1,679	\$141,450
2,000 - 2,999	7	1	58.93%	\$2,286	0.01%	\$2,286	\$0	\$2,286	\$0
3,000 - ,3999	84	1	59.16%	\$3,653	0.01%	\$3,653	\$0	\$3,653	\$276,307
10,000 - 19,999	30	7	60.79%	\$95,000	0.14%	\$6,254	\$7,317	\$13,571	\$39,498
20,000 - 29,999	56	11	63.34%	\$268,000	0.49%	\$5,796	\$18,568	\$24,364	\$61,591
30,000 - 39,999	69	5	64.50%	\$177,534	0.72%	\$11,720	\$23,787	\$35,507	\$115,234
40,000 - 49,999	70	6	65.89%	\$250,000	1.05%	\$11,883	\$29,783	\$41,667	\$78,597
50,000 - 59,999	52	10	68.21%	\$531,651	1.76%	\$16,500	\$36,665	\$53,165	\$44,011
60,000 - 69,999	59	3	68.91%	\$182,500	2.00%	\$24,400	\$36,433	\$60,833	\$97,756
70,000 - 79,999	41	6	70.30%	\$450,000	2.59%	\$7,875	\$67,125	\$75,000	\$53,813
80,000 - 89,999	46	3	71.00%	\$257,500	2.93%	\$56,500	\$29,333	\$85,833	\$98,074
90,000 - 99,999	76	5	72.16%	\$457,500	3.53%	\$31,300	\$60,200	\$91,500	\$57,097
100,000 -199,999	54	44	82.37%	\$6,269,813	11.80%	\$40,335	\$102,161	\$142,496	\$94,928
200,000 - 299,999	49	15	85.85%	\$3,445,500	16.34%	\$105,035	\$124,665	\$229,700	\$178,026
300,000 - 399,999	55	9	87.94%	\$3,030,000	20.33%	\$200,821	\$135,846	\$336,667	\$96,310
400,000 - 499,999	52	15	91.42%	\$6,538,500	28.95%	\$298,853	\$137,047	\$435,900	\$237,219
500,000 - 999,999	60	16	95.13%	\$11,213,000	43.73%	\$371,431	\$329,382	\$700,813	\$254,472
1,000,000 - 1,999,999	65	16	98.84%	\$20,797,986	71.15%	\$532,820	\$767,054	\$1,299,874	\$196,132
2,000,000 - 2,999,999	49	2	99.30%	\$4,590,000	77.20%	\$1,345,000	\$950,000	\$2,295,000	\$243,238
Over 4,000,000	65	3	100.00%	\$17,300,000	100.00%	\$3,050,000	\$2,716,667	\$5,766,667	\$327,160
Total	50	431	.	\$75,863,781	.	\$85,398	\$90,620	\$176,018	\$82,092
Total (Paid Only)	55	180	.	\$75,863,781	.	\$204,481	\$216,984	\$421,465	\$134,149

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2013, Cased Involving At Least One Hospital									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	43	172	51.96%	\$0	0.00%	\$0	\$0	\$0	\$24,095
1,000 - 1,999	32	12	55.59%	\$12,248	0.03%	\$463	\$558	\$1,021	\$27,953
2,000 - 2,999	32	5	57.10%	\$12,060	0.06%	\$1,492	\$920	\$2,412	\$1,353
3,000 - ,3999	35	2	57.70%	\$7,375	0.08%	\$1,750	\$1,938	\$3,688	\$4,885
5,000 - 5,999	14	4	58.91%	\$21,191	0.13%	\$1,673	\$3,625	\$5,298	\$1,349
7,000 - 7,999	20	3	59.82%	\$22,781	0.19%	\$1,452	\$6,141	\$7,594	\$4,080
8,000 - 8,999	18	2	60.42%	\$16,500	0.23%	\$4,620	\$3,630	\$8,250	\$2,899
10,000 - 19,999	34	16	65.26%	\$220,230	0.79%	\$2,723	\$11,041	\$13,764	\$14,526
20,000 - 29,999	39	14	69.49%	\$329,863	1.62%	\$6,019	\$17,543	\$23,562	\$56,686
30,000 - 39,999	20	5	71.00%	\$166,887	2.04%	\$4,937	\$28,440	\$33,377	\$9,525
40,000 - 49,999	51	6	72.81%	\$252,000	2.68%	\$7,167	\$34,833	\$42,000	\$48,712
50,000 - 59,999	37	9	75.53%	\$461,651	3.85%	\$16,667	\$33,517	\$51,295	\$44,531
60,000 - 69,999	63	3	76.44%	\$185,000	4.32%	\$34,533	\$27,133	\$61,667	\$130,026
70,000 - 79,999	60	2	77.04%	\$150,000	4.69%	\$22,500	\$52,500	\$75,000	\$244,031
80,000 - 89,999	37	3	77.95%	\$259,000	5.35%	\$26,500	\$59,833	\$86,333	\$47,323
90,000 - 99,999	40	1	78.25%	\$92,500	5.58%	\$0	\$92,500	\$92,500	\$0
100,000 -199,999	36	26	86.10%	\$3,767,622	15.10%	\$57,650	\$87,259	\$144,909	\$83,987
200,000 - 299,999	54	13	90.03%	\$3,008,000	22.71%	\$135,659	\$95,726	\$231,385	\$191,047
300,000 - 399,999	36	6	91.84%	\$2,015,000	27.80%	\$130,283	\$205,550	\$335,833	\$55,515
400,000 - 499,999	55	4	93.05%	\$1,713,500	32.13%	\$147,125	\$281,250	\$428,375	\$69,594
500,000 - 999,999	55	10	96.07%	\$7,192,765	50.31%	\$336,500	\$382,777	\$719,277	\$285,816
1,000,000 - 1,999,999	55	12	99.70%	\$14,164,023	86.10%	\$373,333	\$807,002	\$1,180,335	\$270,948
Over 4,000,000	80	1	100.00%	\$5,500,000	100.00%	\$5,150,000	\$350,000	\$5,500,000	\$164,856
Total	42	331	.	\$39,570,196	.	\$55,100	\$64,417	\$119,547	\$56,978
Total (Paid Only)	41	159	.	\$39,570,196	.	\$114,705	\$134,101	\$248,869	\$92,549

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2012, All Cases									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	41	481	52.34%	\$0	0.00%	\$0	\$0	\$0	\$33,529
1,000 - 1,999	10	17	54.19%	\$17,563	0.01%	\$410	\$623	\$1,033	\$251
2,000 - 2,999	22	11	55.39%	\$23,691	0.03%	\$1,044	\$1,109	\$2,154	\$6,610
3,000 - ,3999	24	10	56.47%	\$32,963	0.06%	\$1,646	\$1,650	\$3,296	\$4,985
4,000 - 4,999	12	2	56.69%	\$8,500	0.06%	\$1,094	\$3,156	\$4,250	\$33
5,000 - 5,999	32	8	57.56%	\$41,865	0.10%	\$1,961	\$3,272	\$5,233	\$30,337
6,000 - 6,999	23	3	57.89%	\$18,084	0.11%	\$3,609	\$2,419	\$6,028	\$17,880
7,000 - 7,999	27	3	58.22%	\$22,000	0.13%	\$4,300	\$3,033	\$7,333	\$6,753
8,000 - 8,999	16	4	58.65%	\$33,120	0.15%	\$6,402	\$1,879	\$8,280	\$4,917
9,000 - 9,999	36	4	59.09%	\$37,200	0.18%	\$4,549	\$4,752	\$9,300	\$2,661
10,000 - 19,999	29	27	62.02%	\$346,548	0.45%	\$6,342	\$6,493	\$12,835	\$50,991
20,000 - 29,999	39	29	65.18%	\$671,086	0.98%	\$9,715	\$13,425	\$23,141	\$23,681
30,000 - 39,999	38	16	66.92%	\$515,655	1.38%	\$13,083	\$19,145	\$32,228	\$9,303
40,000 - 49,999	38	13	68.34%	\$560,455	1.82%	\$12,702	\$30,410	\$43,112	\$16,495
50,000 - 59,999	41	19	70.40%	\$963,313	2.57%	\$19,779	\$30,922	\$50,701	\$50,650
60,000 - 69,999	44	14	71.93%	\$881,996	3.26%	\$24,312	\$38,688	\$63,000	\$46,287
70,000 - 79,999	52	14	73.45%	\$1,025,000	4.07%	\$35,005	\$38,210	\$73,214	\$48,985
80,000 - 89,999	36	2	73.67%	\$160,000	4.19%	\$3,027	\$76,974	\$80,000	\$41,297
90,000 - 99,999	66	5	74.21%	\$475,500	4.56%	\$23,640	\$71,460	\$95,100	\$53,103
100,000 -199,999	47	71	81.94%	\$9,883,045	12.29%	\$63,126	\$76,071	\$139,198	\$101,047
200,000 - 299,999	49	56	88.03%	\$13,017,000	22.47%	\$103,178	\$129,268	\$232,446	\$89,255
300,000 - 399,999	51	27	90.97%	\$8,842,000	29.38%	\$139,376	\$188,105	\$327,481	\$153,525
400,000 - 499,999	51	13	92.38%	\$5,579,961	33.74%	\$228,724	\$200,504	\$429,228	\$97,744
500,000 - 999,999	55	45	97.28%	\$29,645,355	56.92%	\$325,007	\$332,527	\$658,786	\$221,396
1,000,000 - 1,999,999	50	13	98.69%	\$14,987,541	68.64%	\$707,670	\$445,218	\$1,152,888	\$363,400
2,000,000 - 2,999,999	65	7	99.46%	\$15,085,954	80.44%	\$1,412,249	\$742,887	\$2,155,136	\$693,716
Over 4,000,000	62	5	100.00%	\$25,017,912	100.00%	\$3,628,582	\$1,375,000	\$5,003,582	\$304,968
Total	42	919	.	\$127,893,307	.	\$77,398	\$61,707	\$139,166	\$65,646
Total (Paid Only)	43	438	.	\$127,893,307	.	\$162,394	\$129,471	\$291,994	\$100,916

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2012, Cases Involving At Least One Physician & Surgeon**

Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	47	249	54.6%	\$0	0.0%	\$0	\$0	\$0	\$49,067
2,000 - 2,999	23	1	54.8%	\$2,500	0.0%	\$0	\$2,500	\$2,500	\$26,406
3,000 - ,3999	30	1	55.0%	\$3,250	0.0%	\$3,250	\$0	\$3,250	\$26,220
5,000 - 5,999	46	2	55.5%	\$10,651	0.0%	\$2,988	\$2,338	\$5,326	\$111,555
9,000 - 9,999	14	1	55.7%	\$9,200	0.0%	\$9,200	\$0	\$9,200	\$35
10,000 - 19,999	48	6	57.0%	\$69,500	0.1%	\$7,500	\$4,083	\$11,583	\$168,272
20,000 - 29,999	50	9	59.0%	\$207,000	0.3%	\$13,831	\$9,169	\$23,000	\$59,229
30,000 - 39,999	58	2	59.4%	\$65,000	0.4%	\$17,500	\$15,000	\$32,500	\$16,457
40,000 - 49,999	40	3	60.1%	\$126,334	0.6%	\$22,247	\$19,864	\$42,111	\$31,637
50,000 - 59,999	46	9	62.1%	\$461,313	1.1%	\$17,877	\$33,380	\$51,257	\$81,946
60,000 - 69,999	55	7	63.6%	\$434,167	1.6%	\$11,571	\$50,452	\$62,024	\$70,023
70,000 - 79,999	56	6	64.9%	\$435,000	2.0%	\$44,971	\$27,530	\$72,500	\$72,104
80,000 - 89,999	25	1	65.1%	\$80,000	2.1%	\$0	\$80,000	\$80,000	\$0
90,000 - 99,999	78	3	65.8%	\$286,500	2.5%	\$36,000	\$59,500	\$95,500	\$45,627
100,000 -199,999	53	37	73.9%	\$5,211,295	8.3%	\$71,179	\$69,667	\$140,846	\$130,635
200,000 - 299,999	57	39	82.5%	\$9,170,000	18.5%	\$133,104	\$102,024	\$235,128	\$111,216
300,000 - 399,999	51	19	86.6%	\$6,194,500	25.5%	\$128,324	\$197,702	\$326,026	\$169,877
400,000 - 499,999	58	9	88.6%	\$3,883,370	29.8%	\$279,203	\$152,282	\$431,486	\$129,188
500,000 - 999,999	59	32	95.6%	\$20,667,855	52.9%	\$392,759	\$251,350	\$645,870	\$284,705
1,000,000 - 1,999,999	51	10	97.8%	\$11,987,541	66.3%	\$910,971	\$287,783	\$1,198,754	\$414,964
2,000,000 - 2,999,999	65	7	99.3%	\$15,085,954	83.2%	\$1,412,249	\$742,887	\$2,155,136	\$693,716
Over 4,000,000	65	3	100.0%	\$15,017,912	100.0%	\$3,330,971	\$1,675,000	\$5,005,971	\$116,518
Total	50	456	.	\$89,408,842	.	\$121,144	\$74,804	\$196,072	\$105,237
Total (Paid Only)	54	207	.	\$89,408,842	.	\$266,868	\$164,787	\$431,927	\$172,804

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2012, Cases Involving At Least One Hospital**

Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	43	186	46.73%	\$0	0.00%	\$0	\$0	\$0	\$40,407
1,000 - 1,999	9	7	48.49%	\$5,881	0.01%	\$460	\$380	\$840	\$590
2,000 - 2,999	26	5	49.75%	\$11,041	0.03%	\$997	\$1,211	\$2,208	\$1,099
3,000 - ,3999	20	5	51.01%	\$16,500	0.05%	\$1,200	\$2,100	\$3,300	\$1,035
5,000 - 5,999	55	3	51.76%	\$16,151	0.08%	\$325	\$5,059	\$5,384	\$74,119
6,000 - 6,999	3	1	52.01%	\$6,024	0.08%	\$6,024		\$6,024	
7,000 - 7,999	24	2	52.51%	\$14,500	0.11%	\$2,700	\$4,550	\$7,250	\$3,248
8,000 - 8,999	13	2	53.02%	\$16,300	0.13%	\$6,550	\$1,600	\$8,150	\$5,496
9,000 - 9,999	73	1	53.27%	\$9,500	0.15%	\$5,320	\$4,180	\$9,500	\$0
10,000 - 19,999	31	15	57.04%	\$192,048	0.44%	\$7,068	\$5,735	\$12,803	\$72,612
20,000 - 29,999	40	14	60.55%	\$322,982	0.93%	\$10,076	\$12,994	\$23,070	\$26,052
30,000 - 39,999	43	12	63.57%	\$377,500	1.51%	\$11,525	\$19,933	\$31,458	\$9,654
40,000 - 49,999	31	8	65.58%	\$350,455	2.04%	\$8,604	\$35,203	\$43,807	\$5,777
50,000 - 59,999	35	8	67.59%	\$401,000	2.66%	\$29,616	\$20,509	\$50,125	\$45,599
60,000 - 69,999	49	9	69.85%	\$566,100	3.52%	\$28,841	\$34,059	\$62,900	\$43,914
70,000 - 79,999	52	6	71.36%	\$445,000	4.20%	\$36,414	\$37,753	\$74,167	\$27,649
90,000 - 99,999	105	2	71.86%	\$187,500	4.48%	\$54,000	\$39,750	\$93,750	\$64,647
100,000 -199,999	48	33	80.15%	\$4,765,775	11.76%	\$59,316	\$85,101	\$144,417	\$111,253
200,000 - 299,999	48	24	86.18%	\$5,618,500	20.33%	\$85,292	\$148,812	\$234,104	\$79,758
300,000 - 399,999	56	11	88.94%	\$3,652,500	25.91%	\$177,182	\$154,864	\$332,045	\$105,907
400,000 - 499,999	37	4	89.95%	\$1,659,091	28.44%	\$223,864	\$190,909	\$414,773	\$85,912
500,000 - 999,999	56	24	95.98%	\$16,642,500	53.84%	\$309,045	\$384,392	\$693,438	\$315,972
1,000,000 - 1,999,999	49	8	97.99%	\$9,637,541	68.55%	\$932,463	\$272,229	\$1,204,693	\$466,891
2,000,000 - 2,999,999	71	6	99.50%	\$12,585,954	87.76%	\$1,272,624	\$825,035	\$2,097,659	\$747,317
Over 4,000,000	56	2	100.00%	\$8,017,912	100.00%	\$1,258,956	\$2,750,000	\$4,008,956	\$179,207
Total	43	398		\$65,518,255		\$83,421	\$81,198	\$164,619	\$84,665
Total (Paid Only)	44	212		\$65,518,255		\$156,611	\$152,437	\$309,048	\$123,494

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2011, All Cases**

Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	39	486	53.06%	\$0	0.00%	\$0	\$0	\$0	\$22,265
1,000 - 1,999	15	14	54.59%	\$14,740	0.01%	\$687	\$366	\$1,053	\$2,475
2,000 - 2,999	14	10	55.68%	\$23,578	0.03%	\$1,239	\$1,119	\$2,358	\$1,214
3,000 - ,3999	28	5	56.22%	\$17,493	0.04%	\$2,247	\$1,252	\$3,499	\$2,224
4,000 - 4,999	11	6	56.88%	\$25,845	0.06%	\$2,168	\$2,139	\$4,308	\$829
5,000 - 5,999	36	10	57.97%	\$50,461	0.10%	\$946	\$4,100	\$5,046	\$23,074
6,000 - 6,999	10	6	58.62%	\$37,770	0.13%	\$3,856	\$2,440	\$6,295	\$131
7,000 - 7,999	20	6	59.28%	\$44,200	0.17%	\$2,450	\$4,917	\$7,367	\$9,983
9,000 - 9,999	41	5	59.83%	\$46,368	0.20%	\$6,208	\$3,066	\$9,274	\$7,715
10,000 - 19,999	46	30	63.10%	\$394,396	0.51%	\$5,742	\$7,405	\$13,147	\$11,636
20,000 - 29,999	39	18	65.07%	\$419,500	0.84%	\$4,783	\$18,522	\$23,306	\$32,783
30,000 - 39,999	47	23	67.58%	\$756,863	1.43%	\$11,656	\$21,251	\$32,907	\$19,146
40,000 - 49,999	39	9	68.56%	\$390,458	1.73%	\$24,278	\$19,106	\$43,384	\$44,886
50,000 - 59,999	50	17	70.41%	\$893,073	2.43%	\$22,220	\$30,314	\$52,534	\$67,176
60,000 - 69,999	56	10	71.51%	\$630,000	2.92%	\$29,150	\$33,850	\$63,000	\$62,901
70,000 - 79,999	38	18	73.47%	\$1,351,303	3.97%	\$26,520	\$48,553	\$75,072	\$36,278
80,000 - 89,999	35	6	74.13%	\$492,683	4.36%	\$23,181	\$58,933	\$82,114	\$28,944
90,000 - 99,999	53	9	75.11%	\$854,730	5.02%	\$44,930	\$50,040	\$94,970	\$42,805
100,000 -199,999	53	73	83.08%	\$9,545,674	12.47%	\$48,994	\$81,769	\$130,763	\$98,619
200,000 - 299,999	45	56	89.19%	\$12,988,157	22.59%	\$75,459	\$156,473	\$231,931	\$68,665
300,000 - 399,999	52	19	91.27%	\$6,405,000	27.59%	\$174,985	\$162,120	\$337,105	\$83,934
400,000 - 499,999	41	18	93.23%	\$7,758,500	33.63%	\$293,960	\$137,067	\$431,028	\$102,484
500,000 - 999,999	48	38	97.38%	\$24,866,500	53.02%	\$408,233	\$246,148	\$654,382	\$108,920
1,000,000 - 1,999,999	58	12	98.69%	\$16,785,842	66.11%	\$873,709	\$525,112	\$1,398,820	\$352,407
2,000,000 - 2,999,999	66	4	99.13%	\$8,350,000	72.62%	\$1,568,750	\$518,750	\$2,087,500	\$349,621
3,000,000 - 3,999,999	45	3	99.45%	\$9,750,000	80.22%	\$1,675,000	\$1,575,000	\$3,250,000	\$67,404
Over 4,000,000	49	5	100.00%	\$25,370,225	100.00%	\$4,240,920	\$833,125	\$5,074,045	\$328,900
Total	41	916		\$128,263,359		\$84,585	\$55,441	\$140,026	\$45,936
Total (Paid Only)	44	430		\$128,263,359		\$180,186	\$118,101	\$298,287	\$72,689

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2011, Cases Involving at least One Physician or Surgeon**

Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	46	243	55.5%	\$0	0.0%	\$0	\$0	\$0	\$36,784
1,000 - 1,999	34	1	55.7%	\$1,000	0.0%	\$0	\$1,000	\$1,000	\$22,290
2,000 - 2,999	23	1	55.9%	\$2,500	0.0%	\$0	\$2,500	\$2,500	\$550
5,000 - 5,999	116	1	56.2%	\$5,000	0.0%	\$0	\$5,000	\$5,000	\$221,072
7,000 - 7,999	28	1	56.4%	\$7,500	0.0%	\$0	\$7,500	\$7,500	\$16,131
10,000 - 19,999	85	9	58.5%	\$114,000	0.2%	\$5,772	\$6,894	\$12,667	\$21,024
20,000 - 29,999	43	7	60.1%	\$152,000	0.3%	\$6,328	\$15,386	\$21,714	\$62,573
30,000 - 39,999	58	9	62.1%	\$299,189	0.7%	\$12,769	\$20,474	\$33,243	\$42,655
40,000 - 49,999	44	5	63.2%	\$222,000	1.0%	\$35,000	\$9,400	\$44,400	\$74,373
50,000 - 59,999	45	7	64.8%	\$369,686	1.4%	\$29,500	\$23,312	\$52,812	\$135,038
60,000 - 69,999	53	6	66.2%	\$382,500	1.8%	\$32,500	\$31,250	\$63,750	\$83,151
70,000 - 79,999	44	7	67.8%	\$522,583	2.5%	\$23,254	\$51,401	\$74,655	\$66,500
80,000 - 89,999	41	2	68.3%	\$165,000	2.7%	\$4,603	\$77,897	\$82,500	\$52,746
90,000 - 99,999	46	4	69.2%	\$375,300	3.1%	\$53,353	\$40,472	\$93,825	\$91,472
100,000 -199,999	62	38	77.9%	\$5,093,644	9.1%	\$55,006	\$79,037	\$134,043	\$169,366
200,000 - 299,999	51	33	85.4%	\$7,555,295	18.1%	\$78,267	\$150,681	\$228,948	\$87,233
300,000 - 399,999	59	12	88.1%	\$4,205,000	23.1%	\$237,643	\$112,774	\$350,417	\$111,538
400,000 - 499,999	52	11	90.6%	\$4,868,500	28.8%	\$328,881	\$113,710	\$442,591	\$142,379
500,000 - 999,999	54	23	95.9%	\$15,296,500	46.9%	\$488,820	\$176,245	\$665,065	\$138,484
1,000,000 - 1,999,999	64	10	98.2%	\$13,537,500	62.9%	\$973,450	\$380,300	\$1,353,750	\$370,561
2,000,000 - 2,999,999	66	2	98.6%	\$4,350,000	68.1%	\$2,062,500	\$112,500	\$2,175,000	\$513,943
3,000,000 - 3,999,999	43	2	99.1%	\$6,500,000	75.8%	\$2,512,500	\$737,500	\$3,250,000	\$101,107
Over 4,000,000	57	4	100.0%	\$20,470,225	100.0%	\$4,163,650	\$953,906	\$5,117,556	\$392,864
Total	50	438	.	\$84,494,922	.	\$134,926	\$57,985	\$192,911	\$79,621
Total (Paid Only)	56	195	.	\$84,494,922	.	\$303,064	\$130,243	\$433,307	\$133,003

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2011, Cases Involving at least One Hospital									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	39	173	43.9%	\$0	0.0%	\$0	\$0	\$0	\$21,368
1,000 - 1,999	20	6	45.4%	\$7,260	0.0%	\$606	\$604	\$1,210	\$2,059
2,000 - 2,999	19	3	46.2%	\$6,500	0.0%	\$1,633	\$533	\$2,167	\$3,634
3,000 - ,3999	20	4	47.2%	\$13,993	0.0%	\$2,808	\$690	\$3,498	\$2,780
4,000 - 4,999	11	4	48.2%	\$16,700	0.1%	\$1,775	\$2,400	\$4,175	\$766
5,000 - 5,999	31	8	50.3%	\$40,461	0.1%	\$1,183	\$3,875	\$5,058	\$1,209
6,000 - 6,999	13	1	50.5%	\$6,000	0.1%	\$1,113	\$4,887	\$6,000	\$0
7,000 - 7,999	19	5	51.8%	\$36,700	0.2%	\$2,940	\$4,400	\$7,340	\$8,753
9,000 - 9,999	41	5	53.1%	\$46,368	0.2%	\$6,208	\$3,066	\$9,274	\$7,715
10,000 - 19,999	33	13	56.4%	\$170,564	0.5%	\$5,550	\$7,570	\$13,120	\$9,447
20,000 - 29,999	41	13	59.6%	\$309,500	0.9%	\$4,674	\$19,134	\$23,808	\$38,825
30,000 - 39,999	41	12	62.7%	\$405,513	1.5%	\$11,104	\$22,689	\$33,793	\$17,958
40,000 - 49,999	39	6	64.2%	\$257,958	1.8%	\$17,167	\$25,826	\$42,993	\$49,288
50,000 - 59,999	47	8	66.2%	\$419,137	2.4%	\$19,424	\$32,968	\$52,392	\$63,108
60,000 - 69,999	60	5	67.5%	\$310,000	2.8%	\$24,500	\$37,500	\$62,000	\$93,611
70,000 - 79,999	32	4	68.5%	\$302,303	3.2%	\$32,463	\$43,113	\$75,576	\$24,823
80,000 - 89,999	32	5	69.8%	\$412,319	3.8%	\$21,613	\$60,851	\$82,464	\$21,878
90,000 - 99,999	56	4	70.8%	\$386,500	4.3%	\$52,775	\$43,850	\$96,625	\$83,568
100,000 -199,999	45	39	80.7%	\$4,988,642	11.2%	\$46,417	\$81,497	\$127,914	\$103,895
200,000 - 299,999	39	29	88.1%	\$6,709,562	20.4%	\$62,810	\$168,555	\$231,364	\$79,334
300,000 - 399,999	67	7	89.9%	\$2,455,000	23.8%	\$239,602	\$111,113	\$350,714	\$112,961
400,000 - 499,999	39	9	92.1%	\$3,850,000	29.1%	\$233,466	\$194,312	\$427,778	\$88,836
500,000 - 999,999	40	17	96.5%	\$11,200,000	44.5%	\$320,941	\$337,882	\$658,824	\$111,693
1,000,000 - 1,999,999	64	4	97.5%	\$5,805,842	52.5%	\$641,437	\$810,024	\$1,451,461	\$510,467
2,000,000 - 2,999,999	66	4	98.5%	\$8,350,000	64.0%	\$1,568,750	\$518,750	\$2,087,500	\$349,621
3,000,000 - 3,999,999	45	3	99.2%	\$9,750,000	77.4%	\$1,675,000	\$1,575,000	\$3,250,000	\$67,404
Over 4,000,000	45	3	100.0%	\$16,432,725	100.0%	\$4,594,242	\$883,333	\$5,477,575	\$381,319
Total	40	394	.	\$72,689,547	.	\$105,822	\$78,669	\$184,491	\$53,576
Total (Paid Only)	40	221	.	\$72,689,547	.	\$188,660	\$140,252	\$328,912	\$78,788

Section III

Average Payments by Injury Severity And Lapsed Time to Disposition

This section illustrates the paid claim count, the average paid indemnity (economic + non-economic), the percent change of paid claims, and the percent change of average paid indemnity by bodily injury severity for the past four years. These tables are displayed by the major business classifications and by the month from incident to disposition for all medical care providers, physicians and hospitals. Severity categories are defined as follows:

Temporary Injuries (1 – 4)

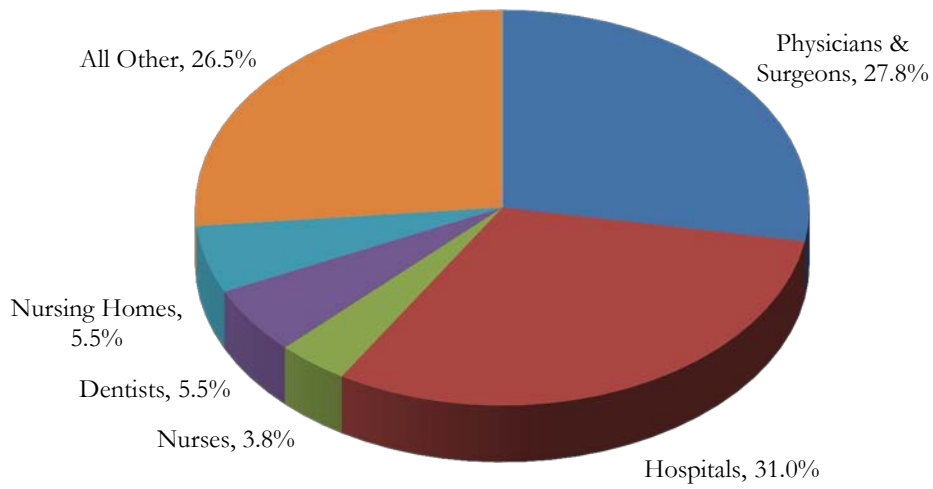
1. Emotional only - fright, no physical damage. Examples include breach of patient confidentiality, misdiagnosing a healthy patient with a condition, inappropriate legal or ethical behavior.
2. Insignificant – Lacerations, minor contusions, rash. No delay in recovery.
3. Minor – Infections, misset fracture, fall in hospital. Recovery is delayed.
4. Major – burns, surgical material retained, drug side-effect, temporary brain damage. Recovery delayed.

Permanent Non-Fatal Injuries (5 – 8)

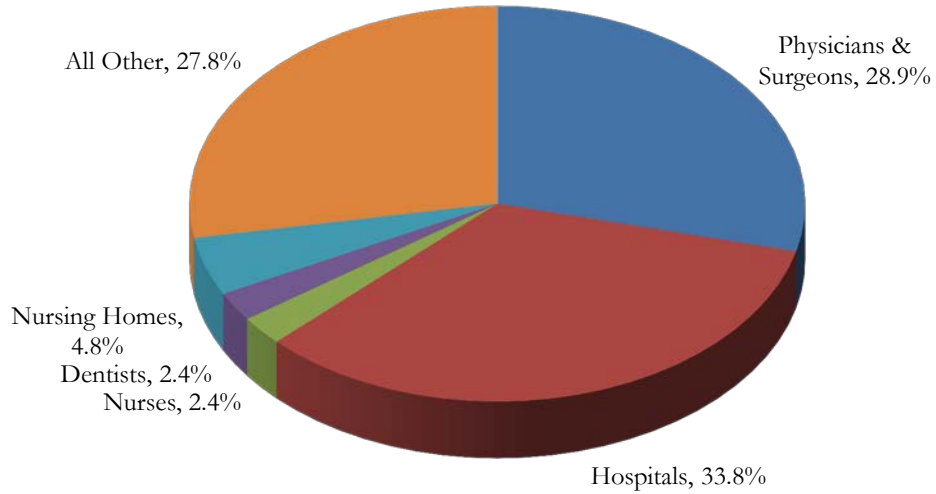
5. Minor – Loss of fingers, damage to internal organs. Injuries are non-disabling.
6. Significant – Deafness, loss of limb, loss of eye, one kidney or lung
7. Major – Paraplegia, blindness, loss of two limbs, significant brain damage
8. Grave – quadriplegia, severe brain damage, life-long care or fatal prognosis.

Fatalities – 9

Malpractic Payments by Provider Type 2013



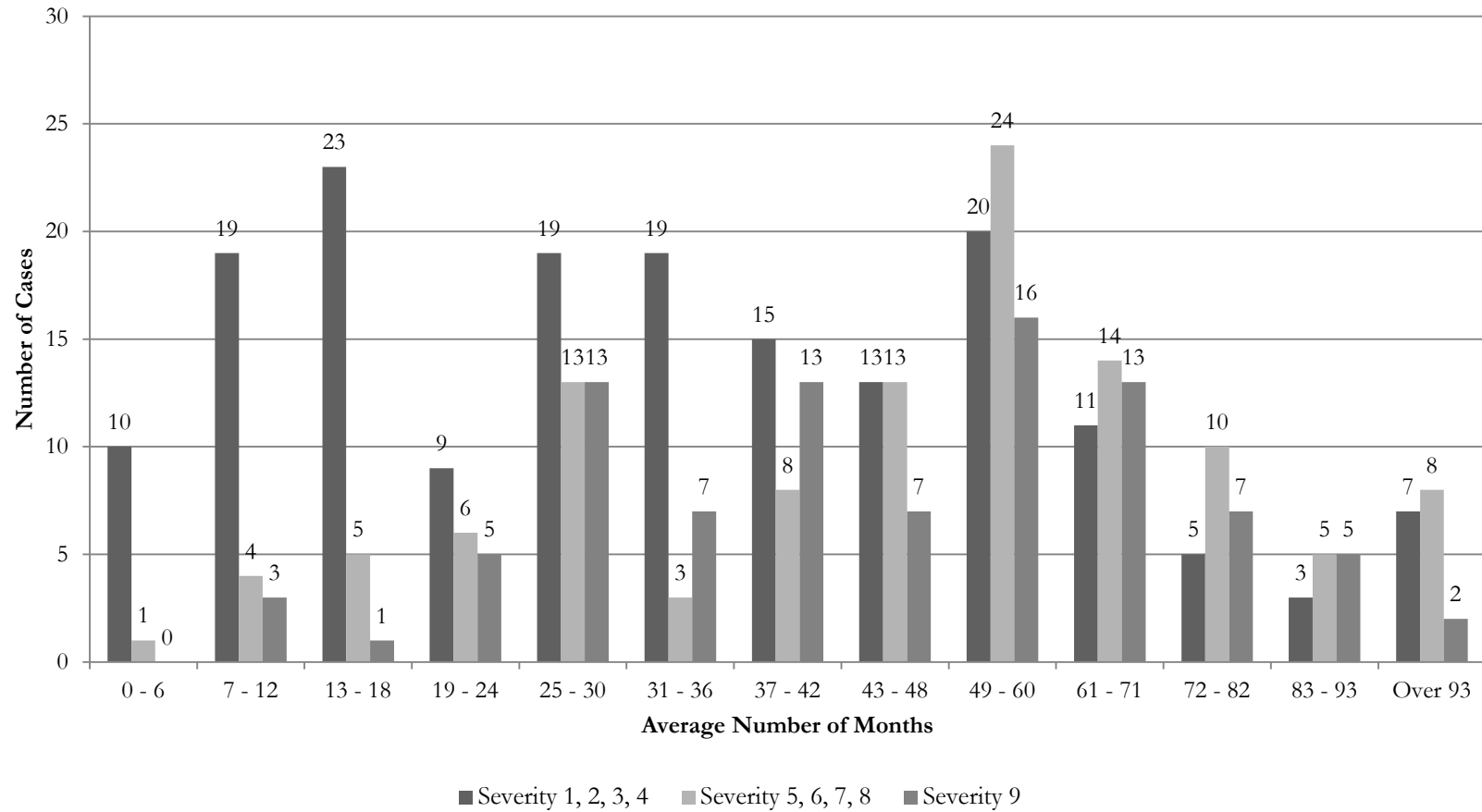
Malpractic Payments by Provider Type 2012



Indemnity by Bodily Injury Severity and Provider Type												
	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Profession Type	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Severity 1, 2, 3, 4												
Chiropractors	3	\$53,632	200.0%	-73.2%	1	\$200,000	-50.0%	215.0%	2	\$63,500	-50.0%	299.9%
Clinics & Corps	31	\$162,269	-35.4%	14.3%	48	\$141,988	17.1%	15.9%	41	\$122,474	-6.8%	5.5%
Dentists	20	\$34,244	53.8%	69.8%	13	\$20,168	18.2%	-58.8%	11	\$48,980	-21.4%	21.3%
Hospitals	68	\$61,256	-17.1%	-12.3%	82	\$69,887	-17.2%	-31.8%	99	\$102,411	6.5%	56.3%
Nurses	3	\$75,993	50.0%	461.2%	2	\$13,542	0.0%	-46.7%	2	\$25,400	-33.3%	-49.1%
Nursing Homes	8	\$104,564	-27.3%	19.8%	11	\$87,270	57.1%	-9.3%	7	\$96,239	75.0%	-15.4%
Optometrists	0	\$0	-	-100.0%	1	\$125,000	.	.	0	\$0	.	.
Pharmacies	9	\$21,534	-30.8%	129.8%	13	\$9,371	30.0%	-38.9%	10	\$15,337	-16.7%	96.3%
Physicians	44	\$145,144	100.0%	69.9%	22	\$85,441	-21.4%	-49.8%	28	\$170,048	-6.7%	18.5%
Podiatrist	1	\$45,000	.	.	0	\$0	-	-100.0%	4	\$145,375	100.0%	90.0%
Subtotal	187	\$94,819	-3.1%	13.5%	193	\$83,533	-5.4%	-22.7%	204	\$108,071	-1.0%	31.1%
Severity 5, 6, 7, 8												
Chiropractors	1	\$690,000	-66.7%	137.9%	3	\$290,000	200.0%	-27.5%	1	\$400,000	-50.0%	240.4%
Clinics & Corps	42	\$450,643	-14.3%	15.9%	49	\$388,928	8.9%	-21.0%	45	\$492,143	7.1%	77.3%
Dentists	2	\$23,767	100.0%	-81.0%	1	\$125,000	-66.7%	841.7%	3	\$13,274	200.0%	-59.2%
Hospitals	39	\$242,222	-27.8%	-40.7%	54	\$408,508	17.4%	-34.9%	46	\$627,088	27.8%	11.0%
Nurses	6	\$1,004,167	-14.3%	1812.7%	7	\$52,500	16.7%	-36.7%	6	\$83,000	.	.
Nursing Homes	1	\$67,500	-75.0%	18.7%	4	\$56,875	0.0%	-60.4%	4	\$143,750	33.3%	-6.7%
Optometrists	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Pharmacies	1	\$10,000	.	.	0	\$0	.	.	0	\$0	-	-100.0%
Physicians	51	\$433,480	-38.6%	-5.4%	83	\$458,017	38.3%	40.3%	60	\$326,533	-3.2%	-12.3%
Podiatrist	1	\$90,000	-50.0%	-52.0%	2	\$187,500	100.0%	87.5%	1	\$100,000	-50.0%	66.7%
Subtotal	144	\$398,689	-29.1%	-0.2%	203	\$399,494	22.3%	-8.1%	166	\$434,924	10.7%	15.8%

Indemnity by Bodily Injury Severity and Provider Type												
	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Profession Type	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Severity 9 (Fatality)												
Chiropractors	1	\$100,000	.	.	0	\$0	.	.	0	\$0	.	.
Clinics & Corp	35	\$235,153	0.0%	2.7%	35	\$229,012	-2.8%	-1.4%	36	\$232,264	-26.5%	42.2%
Dentists	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Hospitals	31	\$423,595	-32.6%	175.9%	46	\$153,511	-14.8%	-11.2%	54	\$172,849	17.4%	-11.6%
Nurses	4	\$141,250	0.0%	-36.9%	4	\$223,750	-33.3%	-0.6%	6	\$225,000	500.0%	-55.0%
Nursing Homes	10	\$121,349	-9.1%	0.1%	11	\$121,191	-15.4%	-14.2%	13	\$141,188	44.4%	10.5%
Pharmacies	0	\$0	-	-100.0%	1	\$2,237	.	.	0	\$0	-	-100.0%
Physicians	27	\$227,727	-47.1%	-13.1%	51	\$262,095	13.3%	-10.2%	45	\$291,971	-8.2%	73.1%
Podiatrist	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Total	108	\$272,120	-27.0%	31.3%	148	\$207,258	-3.9%	-6.2%	154	\$220,906	-1.3%	27.3%

Lapsed Months from Incident to Disposition 2013 Paid Incidents - All Cases



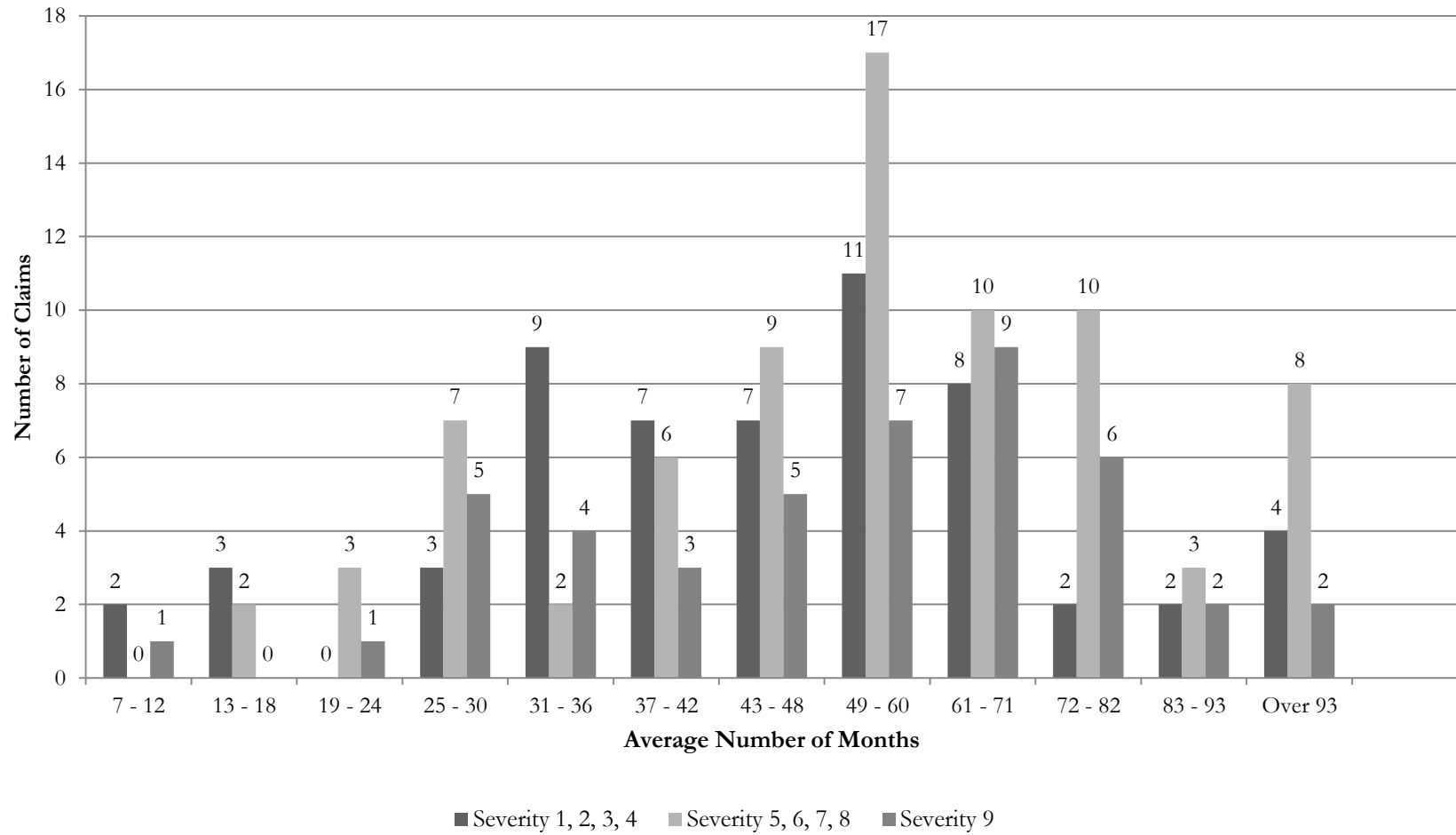
Average Indemnity by Bodily Injury and Months to Disposition All Cases												
Months from Injury to Disposition	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4												
0 - 6	10	\$13,168	-28.6%	283.2%	14	\$3,436	0.0%	-43.0%	14	\$6,028	-22.2%	-68.1%
7 - 12	19	\$11,731	-17.4%	-42.9%	23	\$20,559	4.5%	-19.6%	22	\$25,578	-24.1%	42.4%
13 - 18	23	\$33,461	-11.5%	-6.1%	26	\$35,621	-16.1%	-22.5%	31	\$45,959	34.8%	-24.9%
14 - 24	9	\$43,123	-65.4%	-48.9%	26	\$84,352	62.5%	-22.4%	16	\$108,700	-36.0%	79.2%
25 - 30	19	\$146,371	-29.6%	16.4%	27	\$125,770	35.0%	2.1%	20	\$123,208	-33.3%	76.8%
31 - 36	19	\$171,643	18.8%	70.9%	16	\$100,414	-5.9%	15.8%	17	\$86,698	88.9%	-55.1%
37 - 42	15	\$196,035	87.5%	203.6%	8	\$64,578	-55.6%	-66.2%	18	\$190,959	80.0%	36.2%
43 - 48	13	\$203,440	44.4%	83.2%	9	\$111,056	-18.2%	-75.9%	11	\$460,327	-31.3%	296.3%
48 - 60	20	\$95,781	5.3%	-53.2%	19	\$204,505	-26.9%	38.0%	26	\$148,159	116.7%	34.9%
61 - 71	11	\$157,275	120.0%	335.7%	5	\$36,100	-37.5%	-54.4%	8	\$79,199	14.3%	-3.8%
72 - 82	5	\$45,506	25.0%	-38.2%	4	\$73,625	33.3%	-63.4%	3	\$201,333	0.0%	231.0%
83 - 93	3	\$31,271	50.0%	-77.7%	2	\$140,000	-33.3%	70.1%	3	\$82,301	200.0%	-90.2%
94 - 104	4	\$135,000	100.0%	8.0%	2	\$125,000	.	.	0	\$0	-100.0%	-100.0%
105 - 115	1	\$37,500	0.0%	-85.0%	1	\$250,000	.	.	0	\$0	-100.0%	-100.0%
116 - 126	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$185,000	0.0%	-21.0%
127 - 137	1	\$1,852	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	1	\$45,000	.	.	0	\$0	-100.0%	-100.0%	1	\$30,000	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$5,000	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	-100.0%	-100.0%	2	\$411,250	100.0%	356.9%	1	\$90,000	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Over 225	0	\$0	.	.	0	\$0	-100.0%	-100.0%	3	\$50,000	200.0%	-75.1%

Average Indemnity by Bodily Injury and Months to Disposition All Cases												
	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Subtotal	173	\$102,492	-6.0%	17.0%	184	\$87,619	-6.1%	-22.1%	196	\$112,482	2.6%	26.5%
Severity 5, 6, 7 and 8												
0 - 6	1	\$780	.	.	0	\$0	-100.0%	-100.0%	2	\$62,500	100.0%	6150.0%
7 - 12	4	\$33,375	33.3%	-90.0%	3	\$333,333	50.0%	1538.1%	2	\$20,349	100.0%	-64.1%
13 - 18	5	\$321,700	25.0%	287.4%	4	\$83,038	-20.0%	-94.3%	5	\$1,468,000	150.0%	1487.0%
14 - 24	6	\$253,083	50.0%	65.3%	4	\$153,125	-50.0%	-11.1%	8	\$172,148	60.0%	108.2%
25 - 30	13	\$212,552	-18.8%	-58.4%	16	\$511,408	100.0%	104.2%	8	\$250,443	-11.1%	37.4%
31 - 36	3	\$2,350,000	-62.5%	330.5%	8	\$545,938	-46.7%	11.7%	15	\$488,667	15.4%	-39.8%
37 - 42	8	\$483,438	-38.5%	79.0%	13	\$270,024	30.0%	-75.8%	10	\$1,116,265	-9.1%	77.4%
43 - 48	13	\$266,733	-43.5%	-48.3%	23	\$515,887	27.8%	11.0%	18	\$464,861	260.0%	-40.8%
48 - 60	24	\$589,021	-17.2%	-30.2%	29	\$843,392	38.1%	-15.2%	21	\$994,560	-8.7%	259.8%
61 - 71	14	\$493,929	16.7%	-25.8%	12	\$665,888	200.0%	0.4%	4	\$663,125	-71.4%	54.3%
72 - 82	10	\$996,917	66.7%	49.4%	6	\$667,500	0.0%	5.8%	6	\$630,833	-14.3%	-18.3%
83 - 93	5	\$126,600	-28.6%	-78.2%	7	\$580,714	0.0%	196.2%	7	\$196,071	16.7%	-50.6%
94 - 104	3	\$1,145,000	-25.0%	-24.3%	4	\$1,512,839	33.3%	78.0%	3	\$850,000	-25.0%	2.8%
105 - 115	0	\$0	-100.0%	-100.0%	3	\$912,500	0.0%	11.7%	3	\$816,667	200.0%	1533.3%
116 - 126	1	\$268,000	.	.	0	\$0	-100.0%	-100.0%	1	\$175,000	-83.3%	-86.1%
127 - 137	1	\$500,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	1	\$95,000	0.0%	-83.5%	1	\$575,000	-50.0%	98.3%	2	\$290,000	.	.
149 - 159	1	\$100,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
160 - 170	0	\$0	-100.0%	-100.0%	1	\$144,000	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	1	\$950,000	0.0%	58.3%	1	\$600,000	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury and Months to Disposition All Cases												
Months from Injury to Disposition	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
204 - 214	0	\$0	-100.0%	-100.0%	1	\$600,000	.	.	0	\$0	.	.
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	114	\$503,607	-16.2%	-15.5%	136	\$596,303	18.3%	-5.0%	115	\$627,803	3.6%	23.7%
Severity 9												
0 - 6	0	\$0	.	.	0	\$0	-100.0%	-100.0%	2	\$175,000	.	.
7 - 12	3	\$126,667	50.0%	-41.1%	2	\$215,000	-33.3%	43.3%	3	\$150,000	-25.0%	-52.7%
13 - 18	1	\$150,000	-50.0%	-80.2%	2	\$755,750	-33.3%	789.1%	3	\$85,000	0.0%	-32.0%
14 - 24	5	\$128,500	-16.7%	-49.2%	6	\$252,833	20.0%	-19.0%	5	\$312,000	-54.5%	20.7%
25 - 30	13	\$268,471	85.7%	-45.6%	7	\$493,458	-50.0%	126.0%	14	\$218,357	7.7%	-19.2%
31 - 36	7	\$157,070	-56.3%	-57.0%	16	\$365,438	14.3%	32.5%	14	\$275,783	40.0%	66.2%
37 - 42	13	\$317,308	-43.5%	50.5%	23	\$210,815	91.7%	-15.5%	12	\$249,375	-42.9%	49.6%
43 - 48	7	\$529,643	-50.0%	110.1%	14	\$252,124	40.0%	-6.4%	10	\$269,500	-16.7%	-29.3%
48 - 60	16	\$219,676	-20.0%	59.2%	20	\$137,950	-4.8%	-39.8%	21	\$228,974	31.3%	8.3%
61 - 71	13	\$226,885	18.2%	8.6%	11	\$208,909	0.0%	-16.0%	11	\$248,835	37.5%	22.9%
72 - 82	7	\$1,059,286	75.0%	522.7%	4	\$170,125	-50.0%	30.0%	8	\$130,875	14.3%	-5.8%
83 - 93	5	\$136,000	66.7%	81.3%	3	\$75,000	-25.0%	-95.6%	4	\$1,707,250	0.0%	399.5%
94 - 104	1	\$235,000	-66.7%	127.4%	3	\$103,333	50.0%	25.3%	2	\$82,500	-50.0%	-20.1%
105 - 115	1	\$1,000,000	0.0%	300.0%	1	\$250,000	-75.0%	-59.8%	4	\$621,674	100.0%	12.1%
116 - 126	0	\$0	-100.0%	-100.0%	2	\$1,117,977	-50.0%	1016.0%	4	\$100,175	0.0%	54.1%
127 - 137	0	\$0	-100.0%	-100.0%	1	\$12,500	0.0%	-87.5%	1	\$100,000	-50.0%	2540.6%
138 - 148	0	\$0	-100.0%	-100.0%	2	\$352,500	.	.	0	\$0	-100.0%	-100.0%
149 - 159	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$225,000	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury and Months to Disposition All Cases												
Months from Injury to Disposition	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
171 - 181	0	\$0	-100.0%	-100.0%	1	\$60,000	.	.	0	\$0	-100.0%	-100.0%
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	92	\$319,445	-22.0%	22.9%	118	\$259,950	-0.8%	-9.1%	119	\$285,878	-3.3%	29.9%

Lapsed Months from Incident to Disposition 2013 Paid Claims Involving At Least One Physician or Surgeon



Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4												
0 - 6	0	\$0	-100.0%	-100.0%	1	\$10,000	.	.	0	\$0	-100.0%	-100.0%
7 - 12	2	\$43,643	100.0%	81.8%	1	\$24,000	-66.7%	-81.9%	3	\$132,267	0.0%	833.6%
13 - 18	3	\$12,333	-40.0%	-68.6%	5	\$39,340	150.0%	-50.8%	2	\$80,000	-66.7%	-40.6%
14 - 24	0	\$0	-100.0%	-100.0%	4	\$179,709	33.3%	126.5%	3	\$79,333	-50.0%	-30.9%
25 - 30	3	\$57,169	-25.0%	25.6%	4	\$45,500	-33.3%	-64.0%	6	\$126,500	50.0%	-15.9%
31 - 36	9	\$273,889	80.0%	23.0%	5	\$222,650	66.7%	588.6%	3	\$32,333	-57.1%	-86.3%
37 - 42	7	\$346,393	600.0%	889.7%	1	\$35,000	-85.7%	-90.7%	7	\$375,062	133.3%	114.3%
43 - 48	7	\$238,929	75.0%	13.8%	4	\$210,000	-42.9%	-67.1%	7	\$638,214	-22.2%	457.8%
48 - 60	11	\$94,705	22.2%	-49.3%	9	\$186,642	-18.2%	13.1%	11	\$165,041	83.3%	58.3%
61 - 71	8	\$190,003	300.0%	204.0%	2	\$62,500	0.0%	-72.4%	2	\$226,798	-60.0%	108.1%
72 - 82	2	\$102,500	.	.	0	\$0	-100.0%	-100.0%	2	\$277,000	100.0%	3593.3%
83 - 93	2	\$46,827	100.0%	-81.3%	1	\$250,000	0.0%	150.0%	1	\$100,000	0.0%	-88.1%
94 - 104	1	\$25,000	0.0%	0.0%	1	\$25,000	.	.	0	\$0	-100.0%	-100.0%
105 - 115	1	\$37,500	0.0%	-85.0%	1	\$250,000	.	.	0	\$0	-100.0%	-100.0%
116 - 126	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$185,000	0.0%	-21.0%
127 - 137	1	\$1,852	.	.	0	\$0	.	.	0	\$0	.	.
138 - 148	1	\$45,000	.	.	0	\$0	-100.0%	-100.0%	1	\$30,000	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	-100.0%	-100.0%	1	\$97,500	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Over 225	0	\$0	.	.	0	\$0	-100.0%	-100.0%	2	\$12,500	.	.

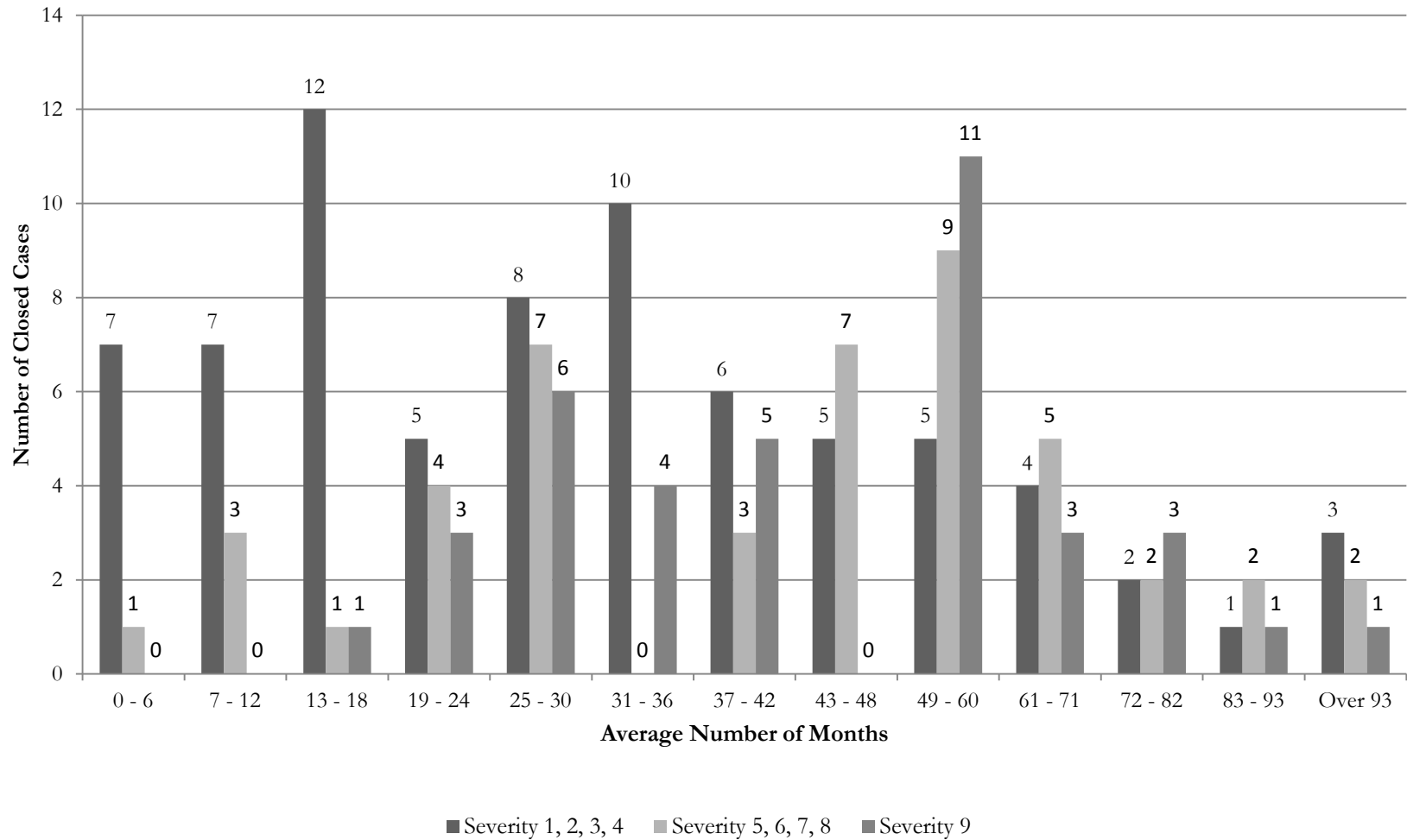
Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Subtotal	58	\$169,445	45.0%	22.2%	40	\$138,676	-21.6%	-40.6%	51	\$233,466	-10.5%	30.5%
Severity 5, 6, 7, 8												
7 - 12	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
13 - 18	2	\$460,500	100.0%	67.5%	1	\$275,000	-50.0%	6.8%	2	\$257,500	100.0%	106.0%
14 - 24	3	\$408,333	50.0%	49.8%	2	\$272,500	-50.0%	47.9%	4	\$184,250	100.0%	82.0%
25 - 30	7	\$185,714	-41.7%	-69.8%	12	\$614,377	140.0%	153.9%	5	\$242,000	0.0%	-15.4%
31 - 36	2	\$2,775,000	-71.4%	362.0%	7	\$600,714	-30.0%	63.5%	10	\$367,500	25.0%	12.1%
37 - 42	6	\$423,750	-25.0%	113.2%	8	\$198,789	-11.1%	-81.0%	9	\$1,046,034	28.6%	54.5%
43 - 48	9	\$303,059	-57.1%	-41.6%	21	\$519,186	40.0%	8.3%	15	\$479,500	275.0%	-47.1%
48 - 60	17	\$608,087	-22.7%	-13.0%	22	\$698,790	29.4%	-26.4%	17	\$949,162	21.4%	199.6%
61 - 71	10	\$524,500	42.9%	3.3%	7	\$507,950	133.3%	-29.2%	3	\$717,500	-72.7%	57.0%
72 - 82	10	\$996,917	66.7%	49.4%	6	\$667,500	0.0%	5.8%	6	\$630,833	0.0%	-28.8%
83 - 93	3	\$181,000	-57.1%	-68.8%	7	\$580,714	16.7%	173.8%	6	\$212,083	50.0%	-34.4%
94 - 104	3	\$1,145,000	-25.0%	-24.3%	4	\$1,512,839	300.0%	202.6%	1	\$500,000	-66.7%	-54.0%
105 - 115	0	\$0	-100.0%	-100.0%	2	\$1,193,750	-33.3%	46.2%	3	\$816,667	200.0%	1533.3%
116 - 126	1	\$268,000	.	.	0	\$0	-100.0%	-100.0%	1	\$175,000	-83.3%	-86.1%
127 - 137	1	\$500,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	1	\$95,000	0.0%	-83.5%	1	\$575,000	0.0%	51.3%	1	\$380,000	.	.
149 - 159	1	\$100,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
160 - 170	0	\$0	-100.0%	-100.0%	1	\$144,000	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	1	\$950,000	0.0%	58.3%	1	\$600,000	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	-100.0%	-100.0%	1	\$600,000	.	.	0	\$0	.	.
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	77	\$593,619	-25.2%	-1.8%	103	\$604,346	24.1%	1.1%	83	\$597,525	10.7%	8.7%
Severity 9												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	1	\$15,000	.	.	0	\$0	-100.0%	-100.0%	1	\$200,000	0.0%	-10.3%
13 - 18	0	\$0	-100.0%	-100.0%	1	\$936,500	.	.	0	\$0	.	.
14 - 24	1	\$155,000	0.0%	-22.5%	1	\$200,000	.	.	0	\$0	-100.0%	-100.0%
25 - 30	5	\$316,524	25.0%	-41.6%	4	\$542,302	-33.3%	122.6%	6	\$243,667	0.0%	25.5%
31 - 36	4	\$185,000	-55.6%	-60.7%	9	\$470,556	12.5%	51.2%	8	\$311,250	60.0%	45.8%
37 - 42	3	\$533,333	-75.0%	65.5%	12	\$322,250	300.0%	109.0%	3	\$154,167	-78.6%	0.5%
43 - 48	5	\$729,000	-28.6%	110.0%	7	\$347,143	-12.5%	31.0%	8	\$265,000	-11.1%	-31.4%
48 - 60	7	\$193,807	-46.2%	8.5%	13	\$178,692	18.2%	-35.8%	11	\$278,409	-15.4%	13.7%
61 - 71	9	\$262,000	80.0%	-3.3%	5	\$271,000	-28.6%	-21.2%	7	\$343,884	0.0%	58.4%
72 - 82	6	\$1,219,167	200.0%	343.3%	2	\$275,000	-50.0%	59.0%	4	\$173,000	0.0%	-2.9%
83 - 93	2	\$162,500	100.0%	62.5%	1	\$100,000	-50.0%	-97.0%	2	\$3,375,000	-33.3%	660.0%
94 - 104	1	\$235,000	-50.0%	154.1%	2	\$92,500	100.0%	-31.5%	1	\$135,000	-66.7%	18.0%
105 - 115	1	\$1,000,000	0.0%	300.0%	1	\$250,000	-75.0%	-59.8%	4	\$621,674	100.0%	12.1%
116 - 126	0	\$0	-100.0%	-100.0%	2	\$1,117,977	-50.0%	1016.0%	4	\$100,175	0.0%	54.1%
127 - 137	0	\$0	-100.0%	-100.0%	1	\$12,500	0.0%	-87.5%	1	\$100,000	0.0%	135035.1%
138 - 148	0	\$0	-100.0%	-100.0%	2	\$352,500	.	.	0	\$0	-100.0%	-100.0%
149 - 159	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$225,000	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	-100.0%	-100.0%	1	\$60,000	.	.	0	\$0	-100.0%	-100.0%
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

**Average Indemnity by Bodily Injury Level and Disposition Time
Cases Involving At Least One Physician or Surgeon**

	2013		2012 – 2013, % Change		2012		2011 – 2012, % Change		2011		2010 – 2011, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
204 -214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	45	\$451,717	-29.7%	33.8%	64	\$337,721	4.9%	-10.4%	61	\$376,944	-21.8%	63.2%

Lapsed Months from Incident to Disposition 2013 Paid Claims, Cases Involving At Least One Hospital



**Average Indemnity by Bodily Injury Level and Disposition Time
Cases Involving At Least One Hospital**

Months from Injury to Disposition	2013		2012 - 2013, % Change		2012		2011 - 2012, % Change		2011		2010 - 2011, % Change	
	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Severity 1, 2, 3, 4												
0 - 6	7	\$15,840	40.0%	284.5%	5	\$4,120	-16.7%	-55.3%	6	\$9,217	-25.0%	-75.7%
7 - 12	7	\$14,676	-46.2%	-24.4%	13	\$19,415	18.2%	-29.4%	11	\$27,510	-45.0%	51.9%
13 - 18	12	\$49,135	0.0%	-8.3%	12	\$53,583	-40.0%	27.9%	20	\$41,893	25.0%	-47.6%
14 - 24	5	\$17,304	-66.7%	-74.4%	15	\$67,692	50.0%	-43.3%	10	\$119,339	-23.1%	130.7%
25 - 30	8	\$31,031	-38.5%	-58.8%	13	\$75,245	30.0%	-49.4%	10	\$148,738	-28.6%	51.9%
31 - 36	10	\$86,523	100.0%	7.5%	5	\$80,500	-54.5%	3.9%	11	\$77,443	83.3%	-66.9%
37 - 42	6	\$136,333	100.0%	82.5%	3	\$74,707	-75.0%	17.6%	12	\$63,528	140.0%	-45.7%
43 - 48	5	\$280,000	150.0%	4.7%	2	\$267,500	-71.4%	-57.8%	7	\$633,371	75.0%	705.6%
48 - 60	5	\$135,775	-58.3%	-46.6%	12	\$254,356	20.0%	104.8%	10	\$124,167	233.3%	243.3%
61 - 71	4	\$223,750	33.3%	422.4%	3	\$42,833	0.0%	62.7%	3	\$26,333	-25.0%	-76.3%
72 - 82	2	\$6,265	0.0%	-82.0%	2	\$34,750	.	.	0	\$0	-100.0%	-100.0%
83 - 93	1	\$160	0.0%	-99.5%	1	\$30,000	-50.0%	-59.2%	2	\$73,452	.	.
94 - 104	2	\$220,000	100.0%	-2.2%	1	\$225,000	.	.	0	\$0	.	.
105 - 115	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
116 - 126	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
127 - 137	1	\$1,852	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$5,000	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	-100.0%	-100.0%	1	\$97,500	.	.	0	\$0	.	.
204 -214	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	75	\$83,329	-14.8%	-4.4%	88	\$87,204	-14.6%	-21.2%	103	\$110,650	5.1%	37.2%

**Average Indemnity by Bodily Injury Level and Disposition Time
Cases Involving At Least One Hospital**

Months from Injury to Disposition	2013		2012 - 2013, % Change		2012		2011 - 2012, % Change		2011		2010 - 2011, % Change	
	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Severity 5, 6, 7, 8												
0 - 6	1	\$780	.	.	0	\$0	-100.0%	-100.0%	1	\$100,000	0.0%	9900.0%
7 - 12	3	\$41,167	50.0%	-89.0%	2	\$375,000	100.0%	987.7%	1	\$34,478	.	.
13 - 18	1	\$650,000	-50.0%	2263.6%	2	\$27,500	100.0%	-99.4%	1	\$4,900,000	0.0%	3820.0%
14 - 24	4	\$260,875	100.0%	673.0%	2	\$33,750	-50.0%	-81.0%	4	\$177,671	300.0%	610.7%
25 - 30	7	\$235,097	16.7%	-55.9%	6	\$532,917	20.0%	170.9%	5	\$196,708	150.0%	30.1%
31 - 36	0	\$0	-100.0%	-100.0%	5	\$676,000	-28.6%	-7.9%	7	\$734,286	75.0%	-66.1%
37 - 42	3	\$472,500	-25.0%	11.2%	4	\$425,000	-42.9%	-71.8%	7	\$1,509,593	40.0%	105.7%
43 - 48	7	\$150,714	-50.0%	-79.7%	14	\$742,708	55.6%	28.1%	9	\$580,000	200.0%	-34.3%
48 - 60	9	\$619,836	-25.0%	11.5%	12	\$555,833	100.0%	-54.0%	6	\$1,208,458	-25.0%	315.8%
61 - 71	5	\$818,000	0.0%	-35.0%	5	\$1,259,130	150.0%	366.3%	2	\$270,000	-50.0%	-20.6%
72 - 82	2	\$543,750	-33.3%	-42.4%	3	\$943,333	0.0%	7.8%	3	\$875,000	-40.0%	1.8%
83 - 93	2	\$127,500	-50.0%	-74.4%	4	\$497,500	0.0%	190.5%	4	\$171,250	0.0%	-69.2%
94 - 104	0	\$0	-100.0%	-100.0%	1	\$20,000	-50.0%	-98.0%	2	\$1,025,000	100.0%	127.8%
105 - 115	0	\$0	-100.0%	-100.0%	2	\$1,300,000	.	.	0	\$0	-100.0%	-100.0%
116 - 126	1	\$268,000	.	.	0	\$0	-100.0%	-100.0%	1	\$175,000	-75.0%	-81.4%
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$380,000	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
160 - 170	0	\$0	-100.0%	-100.0%	1	\$144,000	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	1	\$950,000	0.0%	58.3%	1	\$600,000	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	-100.0%	-100.0%	1	\$600,000	.	.	0	\$0	.	.
215 - 225	0	\$0	.	.	0	\$0	.	.	0.0%	\$0	.	.

**Average Indemnity by Bodily Injury Level and Disposition Time
Cases Involving At Least One Hospital**

Months from Injury to Disposition	2013		2012 - 2013, % Change		2012		2011 - 2012, % Change		2011		2010 - 2011, % Change	
	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Over 225	0	\$0			0	\$0			0	\$0		
Subtotal	46	\$394,891	-29.2%	-37.8%	65	\$635,347	20.4%	-17.1%	54	\$765,956	17.4%	15.0%
Severity 9												
0 - 6	0	\$0			0	\$0	-100.0%	-100.0%	2	\$175,000		
7 - 12	0	\$0	-100.0%	-100.0%	1	\$225,000	-66.7%	50.0%	3	\$150,000	0.0%	-56.9%
13 - 18	1	\$150,000			0	\$0	-100.0%	-100.0%	2	\$77,500	0.0%	-11.4%
14 - 24	3	\$158,333	-25.0%	-39.4%	4	\$261,125	-20.0%	-16.3%	5	\$312,000	66.7%	-34.1%
25 - 30	6	\$275,437	20.0%	-42.3%	5	\$477,508	-28.6%	115.2%	7	\$221,929	75.0%	-53.0%
31 - 36	4	\$183,750	-55.6%	-57.2%	9	\$429,000	12.5%	72.8%	8	\$248,245	100.0%	34.2%
37 - 42	5	\$438,000	-37.5%	220.4%	8	\$136,688	100.0%	-55.3%	4	\$305,625	-50.0%	83.8%
43 - 48	0	\$0	-100.0%	-100.0%	8	\$261,217	100.0%	4.0%	4	\$251,250	-20.0%	-51.0%
48 - 60	11	\$212,086	57.1%	5.5%	7	\$201,071	-12.5%	-0.7%	8	\$202,438	-11.1%	-16.7%
61 - 71	3	\$136,667	-57.1%	-36.0%	7	\$213,429	0.0%	109.8%	7	\$101,741	75.0%	-55.5%
72 - 82	3	\$2,316,667	50.0%	3450.4%	2	\$65,250	-60.0%	-58.2%	5	\$156,000	0.0%	-9.1%
83 - 93	1	\$24,999	-50.0%	-60.0%	2	\$62,500	-50.0%	-96.3%	4	\$1,707,250	100.0%	224.9%
94 - 104	1	\$235,000	0.0%	88.0%	1	\$125,000			0	\$0	-100.0%	-100.0%
105 - 115	0	\$0	-100.0%	-100.0%	1	\$250,000	-50.0%	-61.9%	2	\$656,348	100.0%	499.2%
116 - 126	0	\$0	-100.0%	-100.0%	1	\$2,010,954	-50.0%	1260.1%	2	\$147,850	0.0%	119.0%
127 - 137	0	\$0	-100.0%	-100.0%	1	\$12,500	0.0%	-87.5%	1	\$100,000	0.0%	1233.3%
138 - 148	0	\$0	-100.0%	-100.0%	1	\$230,000			0	\$0		
149 - 159	0	\$0			0	\$0			0	\$0		
160 - 170	0	\$0			0	\$0			0	\$0		
171 - 181	0	\$0	-100.0%	-100.0%	1	\$60,000			0	\$0		
182 - 192	0	\$0			0	\$0			0	\$0		
193 - 203	0	\$0			0	\$0			0	\$0		

**Average Indemnity by Bodily Injury Level and Disposition Time
Cases Involving At Least One Hospital**

	2013		2012 - 2013, % Change		2012		2011 - 2012, % Change		2011		2010 - 2011, % Change	
	Months from Injury to Disposition	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims
Over 225	0	\$0			0	\$0			0	\$0		
Subtotal	38	\$398,831	-35.6%	42.2%	59	\$280,453	-7.8%	-9.9%	64	\$311,423	16.4%	17.2%

Section IV

Indemnity Analysis by Company

Section IV contains the total number of claims reported to the insurer, total number of closed claims, the number of claims closed with payment, the total indemnity paid (economic + non-economic), then total economic damage paid and the total non-economic damage paid by each company. Self-insured hospitals are reported in aggregate.

Each of the past three years is reported separately, and the companies are listed in descending order by the number of paid claims.

Medical Professional Liability Actions by Company, 2013
Sorted by Descending # of Closed Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity	Economic Damages	Non-Economic Damages
All Self-Insured Entities	309	368	185	\$72,709,249	\$27,245,312	\$45,453,937
Missouri Hospital Plan	123	117	34	\$4,375,367	\$2,540,805	\$1,834,562
Missouri Professionals Mutual	70	105	29	\$9,644,158	\$6,554,393	\$3,089,765
Medical Protective Company	76	73	14	\$2,645,786	\$1,098,886	\$1,546,900
Proassurance Indemnity Company Inc	39	37	2	\$48,500	\$0	\$48,500
Medical Liability Alliance	22	36	13	\$4,853,401	\$3,025,240	\$1,828,161
Physicians Professional Indemnity	30	36	14	\$2,243,653	\$749,903	\$1,493,750
Doctors Company An Interins Exchange	44	33	14	\$1,377,524	\$0	\$1,377,524
Columbia Casualty Company	22	27	12	\$1,374,351	\$671,250	\$703,101
Lexington Insurance Company	22	24	3	\$460,000	\$98,430	\$361,570
Everest Indemnity Insurance Company	2	21	4	\$2,040,500	\$13,000	\$2,027,500
Continental Casualty Company	11	17	9	\$336,404	\$67,582	\$268,822
Missouri Doctors Mutual Insurance	18	16	10	\$1,840,500	\$1,428,787	\$411,713
American Casualty Company Of Reading	9	14	7	\$748,500	\$43,000	\$705,500
Intermed Insurance Company	2	14	4	\$1,401,852	\$1,146,348	\$255,504
Pharmacists Mutual Insurance Company	5	13	9	\$226,308	\$144,301	\$82,007
NCMIC Insurance Company	6	11	4	\$260,895	\$130,895	\$130,000
St Lukes Health System Risk Retention	13	9	5	\$760,000	\$380,000	\$380,000
Preferred Physicians Medical RRG Inc	6	9	0	\$0	\$0	\$0
Galen Insurance Company	7	8	3	\$390,000	\$192,287	\$197,713
Evanston Insurance Company	1	8	3	\$1,350,000	\$551,612	\$798,388
Emergency Physicians Insurance Co RRG	2	7	3	\$1,098,000	\$0	\$1,098,000
MMIC Insurance Inc	9	7	0	\$0	\$0	\$0
Hudson Specialty Insurance Company	1	7	4	\$1,082,765	\$0	\$1,082,765
Cincinnati Insurance Company The	2	6	5	\$325,250	\$0	\$325,250
Podiatry Insurance Company Of America	3	6	2	\$135,000	\$117,500	\$17,500
National Union Fire Insurance Company Of	7	6	3	\$22,067	\$14,067	\$8,000
Fortress Insurance Company	1	5	2	\$130,000	\$130,000	\$0
Health Care Industry Liability Reciprocal	4	5	0	\$0	\$0	\$0
Preferred Professional Insurance Company	0	5	3	\$1,165,000	\$0	\$1,165,000
Darwin Select Insurance Company	3	4	1	\$1,500	\$0	\$1,500
Kansas Medical Mutual Insurance Company	1	4	2	\$95,000	\$95,000	\$0
Southwest Physicians Risk Retention Group	0	3	2	\$1,029,500	\$0	\$1,029,500
Ace American Insurance Company	2	3	1	\$40,000	\$0	\$40,000
Admiral Insurance Company	4	3	1	\$50,000	\$50,000	\$0
Ironshore Specialty Insurance Company	2	3	2	\$312,736	\$39,346	\$273,390
Oms National Insurance Company RRG	5	3	1	\$10,000	\$10,000	\$0
Lloyds Syndicate #2987	0	3	2	\$160,000	\$19,589	\$140,411
Emergency Medicine Risk Retention Group	7	2	0	\$0	\$0	\$0
Oceanus Insurance Company RRG	2	2	1	\$25,000	\$7,500	\$17,500

Medical Professional Liability Actions by Company, 2013
Sorted by Descending # of Closed Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity	Economic Damages	Non-Economic Damages
Missouri Medical Malpractice Joint	2	2	2	\$239,000	\$161,695	\$77,305
Zurich American Insurance Company	0	2	1	\$225,000	\$225,000	\$0
Darwin National Assurance Company	2	2	1	\$37,500	\$0	\$37,500
Church Mutual Insurance Company	0	2	1	\$200,000	\$1,865	\$198,135
National Fire And Marine Insurance	0	2	2	\$110,000	\$3,000	\$107,000
Chicago Insurance Company	4	2	0	\$0	\$0	\$0
General Star Indemnity Company	4	2	2	\$38,000	\$35,000	\$3,000
Paco Assurance Company Inc	1	1	0	\$0	\$0	\$0
Professional Solutions Insurance Company	4	1	1	\$500,000	\$250,000	\$250,000
Medicus Insurance Company	31	1	0	\$0	\$0	\$0
Capson Physicians Insurance Company	9	1	0	\$0	\$0	\$0
American Alternative Insurance Corporation	0	1	1	\$40,000	\$0	\$40,000
Liberty Insurance Underwriters Inc	1	1	0	\$0	\$0	\$0
Arch Specialty Insurance Company	0	1	0	\$0	\$0	\$0
Firemans Fund Insurance Company	0	1	1	\$2,689	\$2,689	\$0
TIG Insurance Company	1	1	0	\$0	\$0	\$0
Homeland Insurance Company Of New	6	1	1	\$109,492	\$0	\$109,492
TDC Specialty Insurance Company	0	1	0	\$0	\$0	\$0
Centennial Casualty Company	0	1	1	\$118,174	\$0	\$118,174
Essex Insurance Company	3	1	0	\$0	\$0	\$0
Proassurance Specialty Insurance Inc	8	0	0	\$0	\$0	\$0
Physicians Insurance Mutual	2	0	0	\$0	\$0	\$0
Orthoforum Insurance Company A Risk	1	0	0	\$0	\$0	\$0
St Paul Fire & Marine Insurance Company	1	0	0	\$0	\$0	\$0
Steadfast Insurance Company	3	0	0	\$0	\$0	\$0
Health Care Indemnity Inc	1	0	0	\$0	\$0	\$0

Medical Malpractice Actions by Company, 2012

Name	Number Reported	Number Closed	Number Paid	Total Indemnity	Economic Damages	Non-Economic Damages
All Self-Insured Entities	358	435	234	\$79,605,567	\$44,299,513	\$35,306,054
Missouri Professionals Mutual	95	124	51	\$12,473,139	\$10,128,438	\$2,344,701
Missouri Hospital Plan	151	122	42	\$6,436,009	\$3,850,263	\$2,585,746
Proassurance Indemnity Company Inc	42	52	11	\$2,882,116	\$2,106,232	\$775,884
Medical Protective Company	62	45	17	\$3,355,000	\$1,039,832	\$2,315,168
Physicians Professional Indemnity Association	31	35	15	\$3,942,825	\$2,924,312	\$1,018,513
Intermed Insurance Company	10	33	5	\$1,852,204	\$1,386,996	\$465,208
Medical Liability Alliance	36	32	7	\$1,181,145	\$708,687	\$472,458
Lexington Insurance Company	45	29	3	\$1,160,000	\$0	\$1,160,000
Columbia Casualty Company	22	22	10	\$646,405	\$179,679	\$466,726
Continental Casualty Company	17	21	7	\$420,000	\$10,000	\$410,000
Pharmacists Mutual Insurance Company	18	16	14	\$124,063	\$46,139	\$77,924
Doctors Company An Interins Exchange	21	16	6	\$571,774	\$136,419	\$379,000
Everest Indemnity Insurance Company	4	14	2	\$425,000	\$0	\$425,000
Preferred Physicians Medical RRG Inc	7	14	3	\$300,000	\$235,000	\$65,000
Missouri Doctors Mutual Insurance Company	13	13	3	\$225,000	\$55,000	\$170,000
American Casualty Company Of Reading	12	13	5	\$422,083	\$67,710	\$354,373
Darwin Select Insurance Company	7	13	5	\$1,154,500	\$0	\$1,154,500
St Lukes Health System Risk Retention Group	10	9	5	\$635,000	\$600,000	\$35,000
Galen Insurance Company	11	8	2	\$277,500	\$151,250	\$126,250
Cincinnati Insurance Company The	2	7	6	\$893,231	\$0	\$893,231
Professional Solutions Insurance Company	3	7	4	\$540,000	\$245,000	\$295,000
Health Care Industry Liability Reciprocal	5	7	5	\$523,500	\$62,559	\$460,941
Oms National Insurance Company RRG	4	7	0	\$0	\$0	\$0
Fortress Insurance Company	6	6	2	\$23,312	\$23,312	\$0
Hudson Specialty Insurance Company	5	6	4	\$984,300	\$0	\$984,300
Missouri Medical Malpractice Joint	0	5	3	\$602,500	\$160,291	\$442,209
National Union Fire Insurance Company Of	4	5	2	\$30,000	\$30,000	\$0
Admiral Insurance Company	2	5	2	\$675,000	\$325,000	\$350,000
Homeland Insurance Company Of New York	2	5	3	\$217,500	\$6,053	\$211,447
Essex Insurance Company	5	5	0	\$0	\$0	\$0
Emergency Physicians Insurance Co RRG	6	4	1	\$200,000	\$0	\$200,000
Emergency Medicine Risk Retention Group	0	4	1	\$350,000	\$0	\$350,000
Podiatry Insurance Company Of America	4	4	1	\$300,000	\$300,000	\$0
Ace American Insurance Company	2	4	2	\$349,000	\$150,000	\$199,000
NCMIC Insurance Company	12	3	2	\$620,000	\$310,000	\$310,000
Paco Assurance Company Inc	0	2	2	\$325,000	\$315,000	\$10,000
Professional Liability Insurance Company Of	0	2	1	\$300,000	\$0	\$300,000

Medical Malpractice Actions by Company, 2012

Name	Number Reported	Number Closed	Number Paid	Total Indemnity	Economic Damages	Non-Economic Damages
Arch Specialty Insurance Company	2	2	0	\$0	\$0	\$0
Onebeacon Insurance Company	1	2	1	\$8,000	\$3,686	\$4,314
Chicago Insurance Company	2	2	1	\$450,000	\$100,000	\$350,000
Ironshore Speciality Insurance Company	6	2	1	\$100,000	\$42,464	\$57,536
Illinois Union Insurance Company	0	2	2	\$104,000	\$0	\$104,000
Evanston Insurance Company	4	2	0	\$0	\$0	\$0
Health Care Indemnity Inc	0	2	1	\$100,000	\$100,000	\$0
Oceanus Insurance Company RRG	1	1	1	\$325,000	\$0	\$325,000
Zurich American Insurance Company	3	1	1	\$187,500	\$93,750	\$93,750
MMIC Insurance Inc	5	1	1	\$1,000,000	\$1,000,000	\$0
Truck Insurance Exchange	0	1	1	\$575,000	\$0	\$575,000
St Paul Fire & Marine Insurance Company	0	1	0	\$0	\$0	\$0
TIG Insurance Co Of Michigan	0	1	0	\$0	\$0	\$0
AIG Specialty Insurance Company	0	1	1	\$225,000	\$0	\$225,000
Kansas Medical Mutual Insurance Company	2	1	0	\$0	\$0	\$0
Preferred Professional Insurance Company	4	1	1	\$400,000	\$400,000	\$0
General Star Indemnity Company	3	1	1	\$525,000	\$0	\$525,000
Lloyds Syndicate #2987	0	1	1	\$20,000	\$15,000	\$5,000
Proassurance Specialty Insurance Inc	2	0	0	\$0	\$0	\$0
Medicus Insurance Company	25	0	0	\$0	\$0	\$0
Physicians Insurance Mutual	2	0	0	\$0	\$0	\$0
Community Blood Centers Exchange	1	0	0	\$0	\$0	\$0
Darwin National Assurance Company	3	0	0	\$0	\$0	\$0
Church Mutual Insurance Company	3	0	0	\$0	\$0	\$0
American Alternative Insurance Corporation	1	0	0	\$0	\$0	\$0
National Fire And Marine Insurance Company	2	0	0	\$0	\$0	\$0
Firemans Fund Insurance Company	1	0	0	\$0	\$0	\$0
Centennial Casualty Company	2	0	0	\$0	\$0	\$0

Medical Malpractice Actions by Company, 2011

Name	Number Reported	Number Closed	Number Paid	Total Indemnity	Economic Damages	Non-Economic Damages
All Self-Insured Entities	344	429	238	\$73,250,791	\$38,418,502	\$34,832,289
Missouri Professionals Mutual	135	124	49	\$15,353,150	\$13,849,893	\$1,503,257
Missouri Hospital Plan	122	116	51	\$13,083,423	\$9,510,544	\$3,572,879
Proassurance Indemnity Company Inc	42	65	15	\$3,974,720	\$3,317,584	\$657,136
Medical Protective Company	44	53	21	\$3,838,015	\$2,331,175	\$1,506,840
Intermed Insurance Company	19	33	9	\$2,231,450	\$905,650	\$1,325,800
Doctors Company An Interins Exchange	38	26	5	\$1,194,395	\$1,040,800	\$153,595
Preferred Physicians Medical RRG Inc	8	22	5	\$1,650,000	\$775,000	\$875,000
Physicians Professional Indemnity	30	21	11	\$4,276,000	\$2,706,645	\$1,569,355
Pharmacists Mutual Insurance Company	21	21	11	\$154,008	\$49,542	\$104,466
Missouri Doctors Mutual Insurance	17	18	9	\$422,500	\$205,820	\$216,680
Lexington Insurance Company	29	17	4	\$955,000	\$730,000	\$225,000
Continental Casualty Company	15	17	4	\$256,395	\$208,395	\$48,000
Columbia Casualty Company	25	17	8	\$1,070,322	\$568,466	\$501,856
Medical Liability Alliance	31	16	5	\$1,702,500	\$1,021,500	\$681,000
Galen Insurance Company	7	12	2	\$525,000	\$311,211	\$213,789
American Casualty Company Of Reading	13	12	5	\$924,000	\$530,000	\$394,000
Everest Indemnity Insurance Company	17	11	0	\$0	\$0	\$0
Medicus Insurance Company	5	10	2	\$519,500	\$325,000	\$194,500
NCMIC Insurance Company	6	9	3	\$527,000	\$264,500	\$262,500
Darwin Select Insurance Company	11	8	2	\$59,936	\$20,000	\$39,936
Cincinnati Insurance Company The	9	6	5	\$1,034,000	\$0	\$1,034,000
Professional Liability Insurance Company	0	6	3	\$720,000	\$0	\$720,000
Podiatry Insurance Company Of America	6	6	4	\$651,500	\$580,068	\$71,432
National Union Fire Insurance Company	4	6	2	\$240,000	\$10,000	\$230,000
St Lukes Health System Risk Retention	7	5	3	\$2,500,000	\$2,200,000	\$300,000
Emergency Physicians Insurance Co RRG	5	5	0	\$0	\$0	\$0
Health Care Industry Liability Reciprocal	1	5	3	\$430,000	\$20,939	\$409,061
Chicago Insurance Company	2	5	1	\$499,000	\$0	\$499,000
Homeland Insurance Company Of New	2	5	2	\$305,000	\$198,168	\$106,832
Oms National Insurance Company RRG	4	5	2	\$39,116	\$39,116	\$0
Professional Solutions Insurance Company	8	4	1	\$216,000	\$108,000	\$108,000
Missouri Medical Malpractice Joint	3	4	3	\$371,083	\$6,083	\$365,000
National Fire And Marine Insurance	2	4	0	\$0	\$0	\$0
Ace American Insurance Company	5	4	2	\$42,500	\$0	\$42,500
Kansas Medical Mutual Insurance	1	4	0	\$0	\$0	\$0
Health Care Indemnity Inc	1	4	1	\$9,000	\$3,572	\$5,428
Nautilus Insurance Company	0	3	0	\$0	\$0	\$0

Medical Malpractice Actions by Company, 2011

Name	Number Reported	Number Closed	Number Paid	Total Indemnity	Economic Damages	Non-Economic Damages
Admiral Insurance Company	5	3	1	\$150,000	\$0	\$150,000
Evanston Insurance Company	5	3	0	\$0	\$0	\$0
Preferred Professional Insurance Company	2	3	1	\$50,000	\$0	\$50,000
Hudson Specialty Insurance Company	3	3	0	\$0	\$0	\$0
Proassurance Specialty Insurance Inc	1	2	0	\$0	\$0	\$0
Oceanus Insurance Company RRG	1	2	2	\$32,500	\$25,000	\$7,500
Proassurance Company Of Wisconsin Inc	0	2	1	\$200,000	\$125,000	\$75,000
St Paul Fire & Marine Insurance Company	0	2	2	\$80,000	\$10,000	\$70,000
Illinois Union Insurance Company	1	2	2	\$540,000	\$0	\$540,000
Essex Insurance Company	5	2	0	\$0	\$0	\$0
Fortress Insurance Company	3	1	0	\$0	\$0	\$0
Emergency Medicine Risk Retention	4	1	0	\$0	\$0	\$0
Southwest Physicians Risk Retention	2	1	0	\$0	\$0	\$0
Darwin National Assurance Company	2	1	0	\$0	\$0	\$0
Church Mutual Insurance Company	1	1	1	\$55,000	\$11,000	\$44,000
American Home Assurance Company	0	1	1	\$12,500	\$0	\$12,500
Arch Specialty Insurance Company	3	1	0	\$0	\$0	\$0
Onebeacon Insurance Company	1	1	0	\$0	\$0	\$0
Greater New York Mutual Ins Co	0	1	1	\$247,500	\$100,000	\$147,500
Granite State Insurance Company	0	1	0	\$0	\$0	\$0
Ironshore Speciality Insurance Company	6	1	0	\$0	\$0	\$0
Ismie Mutual Insurance Company	0	1	1	\$25,000	\$0	\$25,000
Centennial Casualty Company	0	1	1	\$25,000	\$0	\$25,000
Lloyds Syndicate #2003	0	1	0	\$0	\$0	\$0
Paco Assurance Company Inc	1	0	0	\$0	\$0	\$0
MMIC Insurance Inc	2	0	0	\$0	\$0	\$0
TDC Specialty Insurance Company	1	0	0	\$0	\$0	\$0
General Star Indemnity Company	2	0	0	\$0	\$0	\$0
Lloyds Syndicate #2987	1	0	0	\$0	\$0	\$0

Section V

Indemnity Analysis by Professional Specialty

This exhibit contains the total number of claims reported to each insurers, total number of closed claims, the number of claims closed with payment, the total indemnity paid (economic + non-economic), the total economic damage paid and the total non-economic damage paid for each medical specialty.

Data are ranked in descending order by the total number of paid claims.

Data presented in this section is based on each individual / entity with a payment made on their behalf. Data are not aggregated by incident, as in other sections. For example, if a single incident resulted in a payment by both a hospital and physician, each payment will be reported separately rather than added together.

Indemnity by Specialty of Individual / Entity With Payment Made on Their Behalf, 2013
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity	Economic Damages	Noneconomic Damages
Hospitals	306	343	142	\$27,287,069	\$12,244,201	\$15,032,868
Misc . Corporations / Partnership, etc	188	225	70	\$24,818,822	\$10,307,961	\$14,510,861
General Physician / Surgeon	116	177	32	\$11,848,750	\$6,105,221	\$5,743,529
Clinics - Outpatient Only, No Surgery	58	98	31	\$9,222,264	\$4,103,409	\$5,118,855
Nurses (excluding anesthesiologist)	53	82	17	\$7,487,980	\$1,861,898	\$5,626,082
Dentists	64	67	26	\$772,699	\$399,554	\$373,145
Internal Medicine	42	57	12	\$3,505,986	\$2,161,020	\$1,344,966
OB / GYN	56	49	12	\$3,642,500	\$1,502,696	\$2,139,804
Orthopedics	52	44	6	\$2,276,852	\$437,922	\$1,838,930
Emergency Medicine	55	32	11	\$1,921,310	\$186,250	\$1,735,060
Cardiologists / Vascular Specialists	38	28	12	\$2,439,500	\$650,000	\$1,789,500
Cosmetic Surgery	14	27	17	\$1,606,176	\$146,652	\$1,459,524
Radiology	39	27	2	\$2,450,000	\$1,030,000	\$1,420,000
Nursing Homes	11	26	16	\$1,756,829	\$546,114	\$1,210,715
Anesthesiology	23	24	2	\$30,000	\$0	\$30,000
Neurology / Neurosurgeons	29	20	4	\$1,540,000	\$1,295,866	\$244,134
Ophthalmology	11	18	5	\$655,000	\$55,000	\$600,000
Chiropractor	7	15	4	\$260,895	\$130,895	\$130,000
Hospitalists	14	13	1	\$3,401	\$2,040	\$1,361
Pathology	5	13	1	\$200,000	\$100,000	\$100,000
Podiatrists	15	13	2	\$135,000	\$117,500	\$17,500
Pharmacists / Pharmacies	6	12	9	\$219,833	\$135,617	\$84,216
Gastroenterology	8	11	2	\$337,286	\$189,886	\$147,400
Physicians / Surgeons Assistants	8	10	5	\$1,684,365	\$1,175,000	\$509,365
Otorhinolaryngology	7	10	1	\$3,500	\$0	\$3,500
Urologists	16	9	1	\$300,000	\$240,000	\$60,000
Physicians - Misc.	6	8	3	\$1,190,000	\$4,787	\$1,185,213
Clinics - Outpatient - Surgery	19	8	4	\$1,225,000	\$208,500	\$1,016,500
Psychiatry	4	7	3	\$595,000	\$282,500	\$312,500
Skilled Nursing Facilities	17	7	6	\$492,500	\$78,634	\$413,866
Pulmonologists	7	6	0	\$0	\$0	\$0
Endocrinology	0	4	1	\$500,000	\$500,000	\$0
Dermatology	2	4	0	\$0	\$0	\$0
Physical Medicine	3	3	1	\$4,500	\$2,500	\$2,000
Hematology	2	3	1	\$200,000	\$120,000	\$80,000
Psychologists	2	3	1	\$40,000	\$0	\$40,000
Nephrology	5	3	1	\$17,500	\$0	\$17,500
Occupational Medicine	1	2	0	\$0	\$0	\$0
Pediatricians	2	2	3	\$500,000	\$333,600	\$166,400
Intensive Care Physicians	0	2	0	\$0	\$0	\$0

Indemnity by Specialty of Individual / Entity With Payment Made on Their Behalf, 2013
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity	Economic Damages	Noneconomic Damages
Oncology	3	2	1	\$940,000	\$0	\$940,000
Cardiac Centers	4	2	1	\$1,000	\$0	\$1,000
Nurse Anesthetists	5	2	1	\$40,000	\$0	\$40,000
All other (speech therapists, massage therapist, etc.)	7	2	1	\$175,000	\$10,000	\$165,000
Pharmacologists	0	1	0	\$0	\$0	\$0
Infectious Disease	2	1	1	\$25,000	\$7,500	\$17,500
Allergy / Immunologists	1	1	0	\$0	\$0	\$0
Nuclear Medicine	0	1	0	\$0	\$0	\$0
Geriatrics	1	1	0	\$0	\$0	\$0
Radiologists - Non-Physicians (techs, etc)	2	1	0	\$0	\$0	\$0
EMT	0	1	1	\$40,000	\$0	\$40,000
Mental Institutions	0	1	0	\$0	\$0	\$0
Optometrists	0	1	0	\$0	\$0	\$0
Hospitals	306	343	142	\$27,287,069	\$12,244,201	\$15,032,868
Misc . Corporations / Partnership, etc	188	225	70	\$24,818,822	\$10,307,961	\$14,510,861
General Physician / Surgeon	116	177	32	\$11,848,750	\$6,105,221	\$5,743,529
Clinics - Outpatient Only, No Surgery	58	98	31	\$9,222,264	\$4,103,409	\$5,118,855
Nurses (excluding anesthesiologist)	53	82	17	\$7,487,980	\$1,861,898	\$5,626,082
Dentists	64	67	26	\$772,699	\$399,554	\$373,145

Indemnity by Specialty of Individual / Entity With Payment Made on Their Behalf, 2012
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity	Economic Damages	Noneconomic Damages
Hospitals	375	453	256	\$54,954,920	\$27,400,219	\$27,544,701
Misc . Corporations / Partnership, etc.	216	192	80	\$17,418,199	\$8,806,561	\$8,555,283
General Physician / Surgeon	144	152	45	\$16,770,375	\$11,427,854	\$5,342,521
Clinics - Outpatient Only, No Surgery	97	116	61	\$11,722,907	\$5,078,275	\$6,644,632
Nurses (excluding anesthesiologist)	81	67	19	\$2,113,480	\$399,525	\$1,713,955
Dentists	56	62	23	\$534,599	\$282,033	\$252,566
OB / GYN	55	54	16	\$10,030,791	\$7,543,291	\$2,487,500
Internal Medicine	52	54	11	\$2,112,622	\$1,570,643	\$541,979
Emergency Medicine	55	49	17	\$3,683,370	\$362,245	\$3,321,125
Neurology / Neurosurgeons	22	47	19	\$8,282,454	\$5,958,007	\$2,324,447
Orthopedics	42	44	14	\$2,711,000	\$1,698,865	\$1,012,135
Physicians - Misc.	14	44	13	\$2,560,000	\$1,426,121	\$1,133,879
Radiology	30	36	7	\$1,135,500	\$870,250	\$265,250
Anesthesiology	26	33	5	\$777,825	\$503,628	\$274,197
Nursing Homes	28	32	31	\$3,967,083	\$460,314	\$3,506,769
Cardiologists / Vascular Specialists	32	30	10	\$7,630,000	\$5,737,043	\$1,892,957
Gastroenterology	18	22	6	\$762,286	\$387,386	\$374,900
Pharmacists / Pharmacies	15	19	18	\$193,563	\$48,801	\$144,762
Cosmetic Surgery	15	17	8	\$1,248,913	\$584,325	\$664,588
Urologists	21	11	3	\$1,068,250	\$833,250	\$235,000
Pulmonologists	8	11	1	\$50,000	\$0	\$50,000
Physical Medicine	12	10	3	\$148,700	\$11,700	\$137,000
Ophthalmology	5	10	5	\$1,010,000	\$38,294	\$971,706
Hospitalists	5	7	0	\$0	\$0	\$0
Nuclear Medicine	1	7	0	\$0	\$0	\$0
Pediatricians	3	7	1	\$890,000	\$0	\$890,000
Nurse Anesthetists	3	7	2	\$206,583	\$56,583	\$150,000
Podiatrists	10	7	2	\$375,000	\$350,678	\$24,322
Otorhinolaryngology	6	6	1	\$20,000	\$12,000	\$8,000
Chiropractor	15	5	5	\$1,070,895	\$660,895	\$410,000
Infectious Disease	2	4	1	\$25,000	\$7,500	\$17,500
Psychologists	3	4	0	\$0	\$0	\$0
Physicians / Surgeons Assistants	7	3	3	\$566,365	\$35,000	\$531,365
Hematology	2	3	2	\$175,020	\$87,012	\$88,008
Pathology	7	3	0	\$0	\$0	\$0
Dermatology	5	3	1	\$15,000	\$0	\$15,000
Oncology	1	3	0	\$0	\$0	\$0
Nephrology	0	2	0	\$0	\$0	\$0
Geriatrics	2	2	1	\$225,000	\$125,000	\$100,000
Intensive Care Physicians	2	2	0	\$0	\$0	\$0

Indemnity by Specialty of Individual / Entity With Payment Made on Their Behalf, 2012
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity	Economic Damages	Noneconomic Damages
Clinics - Outpatient - Surgery	5	2	1	\$400,000	\$200,000	\$200,000
Skilled Nursing Facilities	4	2	3	\$100,000	\$11,134	\$88,866
Midwives	0	2	0	\$0	\$0	\$0
Sports Medicine	1	1	0	\$0	\$0	\$0
Occupational Medicine	1	1	0	\$0	\$0	\$0
Public Health	0	1	0	\$0	\$0	\$0
Psychiatry	1	1	1	\$99,000	\$0	\$99,000
Otology	0	1	0	\$0	\$0	\$0
Endocrinology	1	1	0	\$0	\$0	\$0
Rehabilitation Hospitals	0	1	1	\$25,000	\$0	\$25,000
Optometrists	2	1	1	\$125,000	\$115,000	\$10,000
Pharmacologists	1	0	0	\$0	\$0	\$0
Forensic / Legal Medicine	1	0	0	\$0	\$0	\$0
Radiologists - Non-Physicians (techs, EMT	2	0	0	\$0	\$0	\$0
EMT	1	0	0	\$0	\$0	\$0
Mental Institutions	1	0	0	\$0	\$0	\$0
Blood Banks	1	0	0	\$0	\$0	\$0
All other (speech therapists, massage therapists, etc.)	3	0	0	\$0	\$0	\$0
HMO Related	1	0	0	\$0	\$0	\$0

Indemnity by Specialty of Individual / Entity With Payment Made on Their Behalf, 2011
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity	Economic Damages	Noneconomic Damages
Hospitals	386	460	313	\$78,096,965	\$39,785,434	\$38,311,531
Misc. Corporations / Partnership, etc.	165	152	65	\$15,936,127	\$8,970,478	\$6,965,649
General Physician / Surgeon	154	131	51	\$11,917,145	\$7,454,345	\$4,462,800
Clinics - Outpatient Only, No Surgery	114	117	80	\$26,176,354	\$16,966,403	\$9,209,951
OB / GYN	52	71	25	\$9,929,000	\$6,765,972	\$3,163,028
Physicians - Misc.	58	65	29	\$6,035,500	\$3,924,108	\$2,111,392
Nurses (excluding anesthesiologist)	90	61	21	\$2,831,000	\$1,277,500	\$1,553,500
Internal Medicine	60	54	18	\$2,139,449	\$967,687	\$1,171,762
Dentists	60	53	30	\$1,569,505	\$849,363	\$720,142
Emergency Medicine	34	45	11	\$2,750,750	\$1,973,495	\$777,255
Orthopedics	41	43	8	\$1,985,000	\$1,004,781	\$980,219
Nursing Homes	24	34	36	\$4,401,429	\$636,841	\$3,764,588
Anesthesiology	23	33	7	\$2,488,750	\$1,650,000	\$838,750
Radiology	22	33	11	\$2,900,700	\$1,233,622	\$1,667,078
Cardiologists / Vascular Specialists	29	31	7	\$1,160,000	\$601,000	\$559,000
Neurology / Neurosurgeons	32	26	13	\$6,366,500	\$5,090,200	\$1,276,300
Pharmacists / Pharmacies	22	25	23	\$376,800	\$211,910	\$164,890
Gastroenterology	11	21	2	\$380,000	\$30,000	\$350,000
Cosmetic Surgery	24	18	17	\$2,187,976	\$881,465	\$1,306,511
Ophthalmology	12	12	3	\$591,095	\$50,000	\$541,095
Otorhinolaryngology	15	12	3	\$223,500	\$212,000	\$11,500
Podiatrists	11	11	6	\$726,500	\$607,568	\$118,932
Urologists	12	8	2	\$618,250	\$618,250	\$0
Psychiatry	0	8	3	\$112,500	\$80,000	\$32,500
Chiropractor	10	8	6	\$1,427,000	\$739,500	\$687,500
Nurse Anesthetists	10	8	2	\$35,800	\$18,300	\$17,500
Hospitalists	5	7	1	\$3,401	\$2,040	\$1,361
Pediatricians	3	7	2	\$340,000	\$200,000	\$140,000
Dermatology	3	7	0	\$0	\$0	\$0
Clinics - Outpatient - Surgery	6	7	6	\$1,671,401	\$115,283	\$1,556,118
Physical Medicine	8	5	1	\$75,000	\$24,000	\$51,000
Pathology	6	5	1	\$300,000	\$145,000	\$155,000
Pulmonologists	6	5	2	\$70,000	\$15,000	\$55,000
Nephrology	5	4	0	\$0	\$0	\$0
Nuclear Medicine	3	4	2	\$650,000	\$581,687	\$68,313
Hematology	2	3	1	\$425,000	\$425,000	\$0
EMT	0	3	2	\$780,000	\$500,000	\$280,000
Occupational Medicine	2	2	1	\$140,000	\$30,000	\$110,000
Infectious Disease	3	2	0	\$0	\$0	\$0
Psychologists	6	2	2	\$52,500	\$0	\$52,500

Indemnity by Specialty of Individual / Entity With Payment Made on Their Behalf, 2011						
Sorted by Number of Closed Actions						
Specialty	Reported	Closed	Closed with Payment	Total Indemnity	Economic Damages	Noneconomic Damages
Intensive Care Physicians	0	2	0	\$0	\$0	\$0
Public Health	0	1	1	\$98,000	\$55,530	\$42,470
Endocrinology	2	1	0	\$0	\$0	\$0
Geriatrics	1	1	0	\$0	\$0	\$0
Optometrists	2	1	1	\$125,000	\$115,000	\$10,000
Physicians / Surgeons Assistants	3	0	2	\$1,640,000	\$1,140,000	\$500,000
Otology	1	0	0	\$0	\$0	\$0
Oncology	2	0	1	\$940,000	\$0	\$940,000
Rehabilitation Hospitals	1	0	1	\$25,000	\$0	\$25,000
Skilled Nursing Facilities	4	0	2	\$47,500	\$7,500	\$40,000
Midwives	1	0	0	\$0	\$0	\$0
All other (speech therapists, massage therapists, etc.)	2	0	1	\$175,000	\$10,000	\$165,000

Section VI

Claim Study by Means of Disposition

This sections presents claims data by means of disposition. Data are presented separately for cases involving hospitals, and physicians & surgeons. Each table displays:

- Number of closed cases
- Percentage of claims by means of disposition
- Average number of months from incident to report
- Average number of months from incident to disposition
- Average bodily injury severity
- Average economic damage amounts per case
- Average non-economic damage amounts per case
- Average total indemnity per case
- Average loss adjustment expense per case

Means of Disposition, All Cases, 2013									
Disposition	Claim Reports		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Resulting in Payment									
Claims settled before litigation	117	30.9%	10	23	4.1	\$41,004	\$75,201	\$116,290	\$6,279
Settled before judgment	259	68.3%	18	53	5.8	\$158,191	\$186,964	\$345,156	\$118,979
Total Settled	376	99.2%	16	44	5.3	\$121,726	\$152,187	\$273,939	\$83,910
Judgment for plaintiff	1	0.3%	25	71	8	\$1,000,000	.	\$1,000,000	\$366,301
Total Court Dispositions	1	0.3%	25	71	8	\$1,000,000	.	\$1,000,000	\$366,301
Total paid claim dispositions	379	100.0%	16	44	5.3	\$124,191	\$151,590	\$275,808	\$86,509
Closed Without Payment									
Claims closed before litigation	187	37.9%	14	32	3.8	.	.	.	\$9,536
Lawsuit closed or abandoned before trial	281	56.9%	22	47	5	.	.	.	\$39,015
Total closed without trial	468	94.7%	19	41	4.5	.	.	.	\$27,236
Direct verdict for defendant	9	1.8%	12	60	5.4	.	.	.	\$148,080
Judgment for defendant	14	2.8%	13	49	5.1	.	.	.	\$142,628
Judgment for defendant after appeal	1	0.2%	50	95	1
Total Court Dispositions	24	4.9%	14	55	5	.	.	.	\$138,730
Total unpaid claim dispositions	494	100.0%	19	42	4.5	.	.	.	\$33,132

Means of Disposition, Cases Involving At Least One Physician or Surgeon, 2013									
Disposition	Cases Closed		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	26	14.40%	10	27	5.5	\$143,337	\$209,329	\$352,666	\$11,652
Settled before judgment	152	84.40%	22	60	5.8	\$210,361	\$220,655	\$431,016	\$149,591
Total Settled	178	98.90%	20	55	5.7	\$200,571	\$219,001	\$419,572	\$129,443
Judgment for plaintiff	1	0.60%	25	71	8	\$1,000,000	.	\$1,000,000	\$366,301
Total Court Dispositions	1	0.60%	25	71	8	\$1,000,000	.	\$1,000,000	\$366,301
Total paid claim dispositions	180	100.00%	20	55	5.8	\$204,481	\$216,984	\$421,465	\$134,149
Claims Closed Without Payment									
Claims closed before litigation	51	20.30%	15	31	4.1	.	.	.	\$4,974
Lawsuit closed or abandoned before	186	74.10%	23	48	5.1	.	.	.	\$45,921
Total closed without trial	237	94.40%	21	45	4.9	.	.	.	\$37,109
Direct verdict for defendant	6	2.40%	13	59	6.2	.	.	.	\$198,447
Judgment for defendant	6	2.40%	12	47	6	.	.	.	\$161,109
Judgment for defendant after appeal	1	0.40%	50	95	1
Total Court Dispositions	13	5.20%	15	56	5.7	.	.	.	\$165,949
Total unpaid claim dispositions	251	100.00%	21	45	4.9	.	.	.	\$44,760

Means of Disposition, Cases Involving At Least One Hospital, 2013									
Disposition	Cases Closed		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	62	39.0%	7	21	4.1	\$26,612	\$64,009	\$90,782	\$7,294
Settled before judgment	96	60.4%	17	52	6.1	\$171,700	\$179,985	\$351,684	\$140,869
Settlement after Judgment	1	0.6%	15	92	7	\$105,000	\$75,000	\$180,000	\$739,760
Total Settled	159	100.0%	13	41	5.4	\$114,705	\$134,101	\$248,869	\$92,549
Total paid claim dispositions	159	100.0%	13	41	5.4	\$114,705	\$134,101	\$248,869	\$92,549
Incidents Closed Without Payment									
Claims closed before litigation	92	53.5%	12	32	3.8	.	.	.	\$6,954
Lawsuit closed or abandoned before trial	79	45.9%	24	54	5.7	.	.	.	\$42,745
Total closed without trial	171	99.4%	17	43	4.7	.	.	.	\$23,489
Direct verdict for defendant	1	0.6%	2	97	3	.	.	.	\$127,695
Total Court Dispositions	1	0.6%	2	97	3	.	.	.	\$127,695
Total unpaid claim dispositions	172	100.0%	17	43	4.7	.	.	.	\$24,095

Means of Disposition, All Cases, 2012									
Disposition	Cases Closed		Average Months			Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	127	29.0%	9	22	3.6	\$19,759	\$39,955	\$59,714	\$7,072
Settled before judgment	303	69.2%	17	51	6.3	\$217,911	\$166,126	\$384,222	\$129,199
Total Settled	430	98.2%	15	42	5.5	\$159,387	\$128,861	\$288,379	\$93,129
Direct verdict for plaintiff	1	0.2%	24	95	7	\$20,500	\$179,500	\$200,000	\$187,071
Judgment for plaintiff	6	1.4%	18	63	6.7	\$204,317	\$75,569	\$279,886	\$255,870
Judgment for plaintiff after appeal	1	0.2%	25	116	9	\$1,345,746	\$665,208	\$2,010,954	\$2,433,620
Total Court Dispositions	8	1.8%	20	74	7	\$324,018	\$162,265	\$486,283	\$519,489
Total paid claim dispositions	438	100.0%	15	43	5.5	\$162,394	\$129,471	\$291,994	\$100,916
Incidents Closed Without Payment									
Claims closed before litigation	183	38.0%	10	28	3.7	.	.	.	\$1,817
Lawsuit closed or abandoned before trial	267	55.5%	23	48	5	.	.	.	\$39,451
Total closed without trial	450	93.6%	18	40	4.5	.	.	.	\$24,146
Direct verdict for defendant	7	1.5%	11	59	6.3	.	.	.	\$181,339
Judgment for defendant	20	4.2%	12	44	5.2	.	.	.	\$174,375
Judgment for defendant after appeal	4	0.8%	8	58	8.5	.	.	.	\$126,180
Total Court Dispositions	31	6.4%	11	49	5.9	.	.	.	\$169,729
Total unpaid claim dispositions	481	100.0%	18	41	4.6	.	.	.	\$33,529

Means of Disposition, All Involving At Least One Physician or Surgeon, 2012									
Disposition	Cases Closed		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	18	9.20%	7	31	4	\$42,277	\$53,195	\$95,472	\$40,221
Settled before judgment	169	86.70%	22	57	6.5	\$341,608	\$133,322	\$474,930	\$130,803
Total Settled	187	95.90%	20	54	6.2	\$312,796	\$125,609	\$438,405	\$122,084
Judgment for plaintiff	5	2.60%	22	60	5.8	\$93,066	\$129,071	\$222,137	\$238,921
Judgment for plaintiff after appeal	3	1.50%	21	122	9	\$46,457	\$421,043	\$467,500	\$637,070
Total Court Dispositions	8	4.10%	21	83	7	\$75,588	\$238,561	\$314,148	\$388,227
Total paid claim dispositions	195	100.00%	20	56	6.3	\$303,064	\$130,243	\$433,307	\$133,003
Claims settled before litigation	18	9.20%	7	31	4	\$42,277	\$53,195	\$95,472	\$40,221
Incidents Closed Without Payment									
Claims closed before litigation	54	22.20%	10	28	3.8	.	.	.	\$2,672
Lawsuit closed or abandoned before trial	163	67.10%	24	49	5.5	.	.	.	\$30,820
Total closed without trial	217	89.30%	21	43	5.1	.	.	.	\$23,815
Direct verdict for defendant	2	0.80%	13	34	3	.	.	.	\$97,048
Judgment for defendant	19	7.80%	26	64	5.1	.	.	.	\$121,252
Judgment for defendant after appeal	5	2.10%	18	103	6.6	.	.	.	\$254,555
Total Court Dispositions	26	10.70%	23	69	5.2	.	.	.	\$145,026
Total unpaid claim dispositions	243	100.00%	21	46	5.1	.	.	.	\$36,784

Means of Disposition, Cases Involving At Least One Hospital, 2012									
Disposition	Cases Closed		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	64	30.20%	10	24	3.9	\$19,193	\$38,072	\$57,265	\$7,949
Settled before judgment	143	67.50%	18	52	6.4	\$205,759	\$202,807	\$408,567	\$156,236
Total Settled	207	97.60%	16	44	5.6	\$148,077	\$151,875	\$299,952	\$110,389
Judgment for plaintiff	4	1.90%	14	60	5.5	\$300,975	\$53,353	\$354,328	\$224,162
Judgment for plaintiff after appeal	1	0.50%	25	116	9	\$1,345,746	\$665,208	\$2,010,954	\$2,433,620
Total Court Dispositions	5	2.40%	17	72	6.2	\$509,929	\$175,724	\$685,653	\$666,053
Total paid claim dispositions	212	100.00%	16	44	5.7	\$156,611	\$152,437	\$309,048	\$123,494
Incidents Closed Without Payment									
Claims closed before litigation	80	43.00%	7	30	4	.	.	.	\$2,686
Lawsuit closed or abandoned before trial	96	51.60%	25	51	5.3	.	.	.	\$51,078
Total closed without trial	176	94.60%	17	41	4.7	.	.	.	\$29,082
Direct verdict for defendant	3	1.60%	15	85	6	.	.	.	\$239,316
Judgment for defendant	4	2.20%	13	57	5.5	.	.	.	\$367,247
Judgment for defendant after appeal	3	1.60%	3	60	9	.	.	.	\$70,166
Total Court Dispositions	10	5.40%	11	66	6.7	.	.	.	\$239,743
Total unpaid claim dispositions	186	100.00%	16	43	4.8	.	.	.	\$40,407

Means of Disposition, All Cases, 2011									
Disposition	Cases Closed		Average Months			Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	127	29.50%	7	21	3.9	\$30,291	\$38,941	\$69,232	\$8,888
Settled before judgment	293	68.10%	20	53	6.2	\$249,035	\$149,666	\$398,701	\$91,892
Total Settled	420	97.70%	16	43	5.5	\$182,891	\$116,185	\$299,076	\$66,793
Judgment for plaintiff	7	1.60%	20	58	5.3	\$75,168	\$103,265	\$178,433	\$184,562
Judgment for plaintiff after appeal	3	0.70%	21	122	9	\$46,457	\$421,043	\$467,500	\$637,070
Total Court Dispositions	10	2.30%	20	77	6.4	\$66,555	\$198,599	\$265,153	\$320,314
Total paid claim dispositions	430	100.00%	16	44	5.5	\$180,186	\$118,101	\$298,287	\$72,689
Incidents Closed Without Payment									
Claims closed before litigation	193	39.70%	8	25	3.7	.	.	.	\$1,590
Lawsuit closed or abandoned before trial	264	54.30%	23	47	5	.	.	.	\$25,212
Total closed without trial	457	94.00%	16	38	4.5	.	.	.	\$15,236
Direct verdict for defendant	3	0.60%	10	33	3	.	.	.	\$85,301
Judgment for defendant	21	4.30%	24	60	4.8	.	.	.	\$110,920
Judgment for defendant after appeal	5	1.00%	18	103	6.6	.	.	.	\$254,555
Total Court Dispositions	29	6.00%	22	65	4.9	.	.	.	\$133,035
Total unpaid claim dispositions	486	100.00%	17	39	4.5	.	.	.	\$22,265

Means of Disposition, Cases Involving At Least One Physician, 2011									
Disposition	Cases Closed		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	18	9.20%	7	31	4	\$42,277	\$53,195	\$95,472	\$40,221
Settled before judgment	169	86.70%	22	57	6.5	\$341,608	\$133,322	\$474,930	\$130,803
Total Settled	187	95.90%	20	54	6.2	\$312,796	\$125,609	\$438,405	\$122,084
Judgment for plaintiff	5	2.60%	22	60	5.8	\$93,066	\$129,071	\$222,137	\$238,921
Judgment for plaintiff after appeal	3	1.50%	21	122	9	\$46,457	\$421,043	\$467,500	\$637,070
Total Court Dispositions	8	4.10%	21	83	7	\$75,588	\$238,561	\$314,148	\$388,227
Total paid claim dispositions	195	100.00%	20	56	6.3	\$303,064	\$130,243	\$433,307	\$133,003
Incidents Closed Without Payment									
Claims closed before litigation	54	22.20%	10	28	3.8	.	.	.	\$2,672
Lawsuit closed or abandoned before trial	163	67.10%	24	49	5.5	.	.	.	\$30,820
Total closed without trial	217	89.30%	21	43	5.1	.	.	.	\$23,815
Direct verdict for defendant	2	0.80%	13	34	3	.	.	.	\$97,048
Judgment for defendant	19	7.80%	26	64	5.1	.	.	.	\$121,252
Judgment for defendant after appeal	5	2.10%	18	103	6.6	.	.	.	\$254,555
Total Court Dispositions	26	10.70%	23	69	5.2	.	.	.	\$145,026
Total unpaid claim dispositions	243	100.00%	21	46	5.1	.	.	.	\$36,784

Means of Disposition, Cases Involving At Least One Hospital, 2010									
Disposition	Cases Closed		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	68	30.80%	8	23	4	\$29,217	\$49,178	\$78,396	\$10,728
Settled before judgment	147	66.50%	18	46	6.2	\$268,550	\$178,845	\$447,395	\$98,523
Total Settled	215	97.30%	15	39	5.5	\$192,854	\$137,834	\$330,688	\$70,755
Judgment for plaintiff	3	1.40%	18	52	4.7	\$30,282	\$32,750	\$63,032	\$96,208
Judgment for plaintiff after appeal	3	1.40%	21	122	9	\$46,457	\$421,043	\$467,500	\$637,070
Total Court Dispositions	6	2.70%	19	87	6.8	\$38,369	\$226,897	\$265,266	\$366,639
Total paid claim dispositions	221	100.0%	15	40	5.6	\$188,660	\$140,252	\$328,912	\$78,788
Incidents Closed Without Payment									
Claims closed before litigation	91	52.6%	8	26	4	.	.	.	\$1,992
Lawsuit closed or abandoned before trial	78	45.1%	24	51	5.6	.	.	.	\$36,739
Total closed without trial	169	97.7%	15	38	4.8	.	.	.	\$18,029
Direct verdict for defendant	1	0.6%	4	30	3	.	.	.	\$61,809
Judgment for defendant	3	1.7%	12	86	5.7	.	.	.	\$195,962
Total Court Dispositions	4	2.3%	10	72	5	.	.	.	\$162,424
Total unpaid claim dispositions	173	100.0%	15	39	4.8	.	.	.	\$21,368

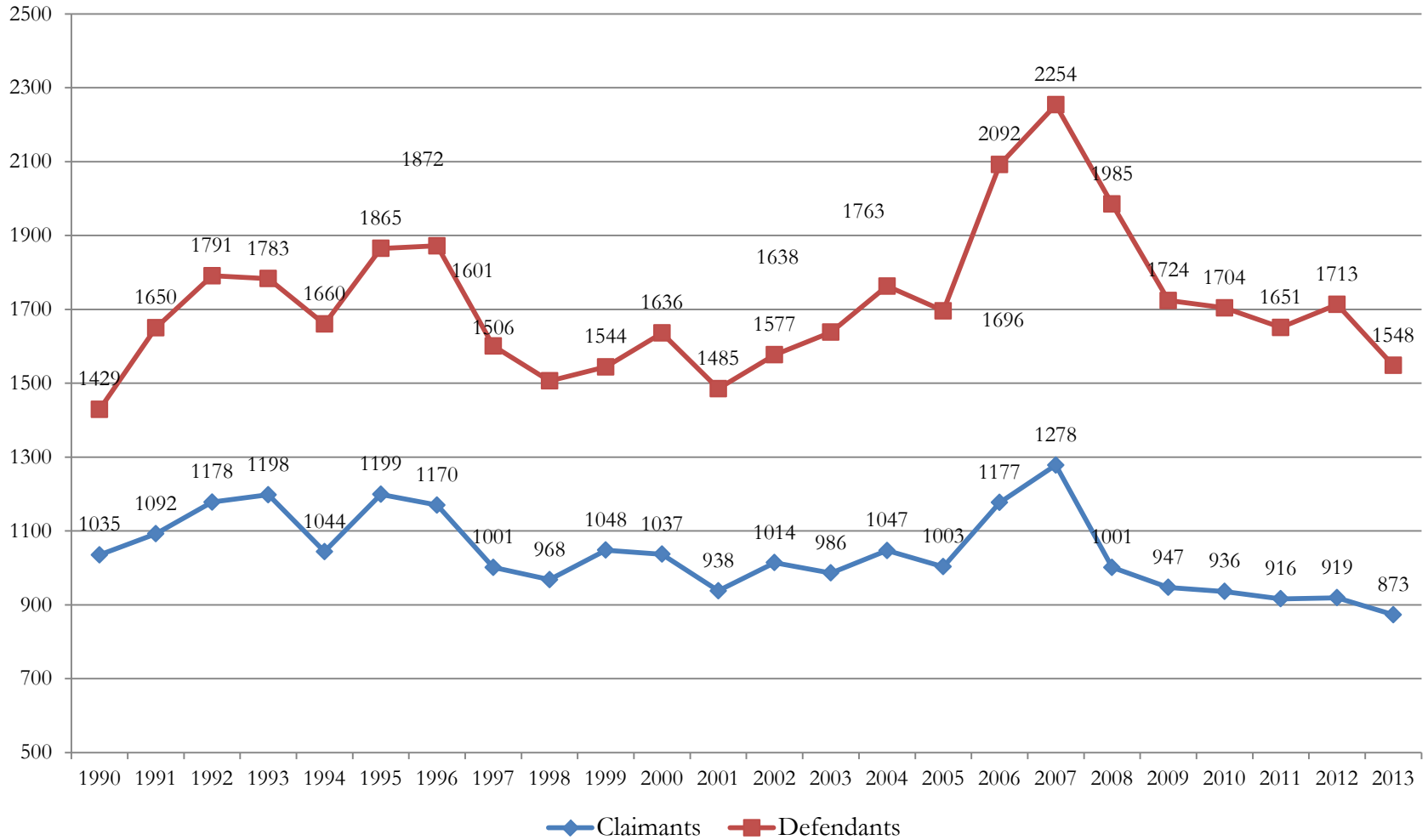
Section VII

Analysis by Occurrence and Defendant

An occurrence represents an event or series of events that are alleged to have produced harm to a claimant. Previous reports presented data on the number of claims. A claim corresponds to a single policy against which a demand for damages has been made, or may otherwise be liable for payout. In fact, multiple claims may be associated with the same practitioner for the same incident. For example, a primary insurer may report a claim for a given insured. That same insured's excess carrier may report an additional claim if it also makes a payment over and above the liability assumed by the primary carrier. In addition, if an insurer closes and subsequently reopens a claim, two claims are counted in the DIFP database.

This report presents two alternative methods of aggregating the data, only recently available to DIFP's efforts to more effectively code the data. First, data are presented on a *per defendant* basis, such that a single practitioner is not counted more than once, regardless of the number of claims against that practitioner. Secondly, data are presented on a *per occurrence* basis, where an occurrence corresponds to a single injured party (or in rare cases, more than one injured party as in the case of a mother and child both injured during childbirth). A single occurrence may include multiple claims as well as multiple defendants. The table below illustrates the different methods of aggregating the DIFP claims data. See the executive summary for further discussion.

Defendant and Claimant Count, By Close Year



Defendants by Type`										
Year Case Was Closed	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
	Total	Paid	Total Indemnity	Average Recovery Per Claimant	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1990	1035	451	\$48,508,270	\$107,557	826	442	161	281	184	77
1991	1092	478	\$80,609,076	\$168,638	922	505	223	296	200	101
1992	1178	439	\$67,440,716	\$153,623	931	663	197	245	226	67
1993	1198	461	\$92,188,436	\$199,975	907	650	226	264	218	81
1994	1044	468	\$67,023,431	\$143,212	889	600	171	250	223	73
1995	1199	510	\$81,596,615	\$159,993	996	699	170	293	261	75
1996	1170	512	\$95,102,860	\$185,748	965	707	200	268	263	73
1997	1001	437	\$89,262,936	\$204,263	766	672	163	202	259	72
1998	968	420	\$73,073,271	\$173,984	702	623	181	137	253	83
1999	1048	484	\$77,005,522	\$159,102	706	683	155	210	289	63
2000	1037	393	\$103,221,836	\$262,651	801	676	159	207	225	45
2001	938	395	\$86,460,489	\$218,887	684	661	140	200	247	53
2002	1014	446	\$110,002,907	\$246,643	761	685	131	201	280	44
2003	986	447	\$118,799,306	\$265,770	730	760	148	208	302	42
2004	1047	427	\$128,704,434	\$301,416	827	760	176	223	255	56
2005	1003	401	\$136,180,518	\$339,602	820	694	182	196	247	60
2006	1177	438	\$121,275,893	\$276,886	979	884	229	173	288	64
2007	1278	582	\$132,699,469	\$228,006	1032	1028	194	232	389	76
2008	1001	458	\$119,999,675	\$262,008	908	892	185	162	392	39
2009	947	412	\$120,822,788	\$293,259	752	791	181	155	293	54
2010	936	425	\$100,371,371	\$236,168	766	782	156	141	326	45
2011	916	430	\$128,263,359	\$298,287	659	803	189	133	345	46
2012	919	438	\$127,893,307	\$291,994	724	816	173	156	340	48
2013	873	379	\$104,531,251	\$275,808	628	727	193	122	265	52

*A case is considered closed only when the last claim against the last defendant is closed.

Cases Involving At Least One Physician Defendant, Closed 1990-2013*										
	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1990	574	241	\$30,726,876	\$127,497	826	112	9	281	43	4
1991	631	270	\$60,075,895	\$222,503	922	197	35	296	71	17
1992	674	246	\$53,736,373	\$218,441	931	304	19	245	91	5
1993	667	252	\$67,266,804	\$266,932	907	265	33	264	71	11
1994	638	262	\$51,660,982	\$197,179	889	299	24	250	75	8
1995	736	293	\$63,770,921	\$217,648	996	327	33	293	100	11
1996	690	293	\$68,390,019	\$233,413	965	336	41	268	90	16
1997	553	229	\$70,822,477	\$309,268	766	317	21	202	106	8
1998	497	184	\$50,275,731	\$273,238	702	276	14	137	88	3
1999	541	240	\$54,021,376	\$225,089	706	267	16	210	89	3
2000	581	225	\$70,913,034	\$315,169	801	315	21	207	93	2
2001	504	200	\$64,239,819	\$321,199	684	282	28	200	83	11
2002	559	217	\$60,898,939	\$280,640	761	289	23	201	81	6
2003	520	236	\$76,069,069	\$322,327	730	363	23	208	118	6
2004	581	233	\$94,393,306	\$405,121	827	372	30	223	93	11
2005	575	227	\$100,584,047	\$443,102	820	355	46	196	111	13
2006	678	222	\$88,892,272	\$400,416	979	489	64	173	123	8
2007	721	306	\$93,738,618	\$306,335	1032	565	49	232	164	16
2008	562	246	\$90,534,536	\$368,027	908	513	62	162	195	5
2009	507	232	\$96,331,197	\$415,221	752	437	54	155	159	6
2010	518	210	\$69,433,806	\$330,637	766	427	40	141	147	3
2011	438	195	\$84,494,922	\$433,307	659	393	77	133	138	11
2012	456	207	\$89,408,842	\$431,927	724	417	54	156	139	5
2013	431	180	\$75,863,781	\$421,465	628	358	64	122	97	10

*The tables in this section are not mutually exclusive. For example, the category “closed cases with at least one paid physician defendant” is a subset of the category “closed cases involving at least one physician.”

Cases Involving At Least One Payment Made on Behalf of a Physician Defendant, Closed 1990-2013										
Year Closed	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1990	229	229	\$28,344,126	\$123,773	354	58	6	281	32	3
1991	243	243	\$52,346,864	\$215,419	387	89	17	296	42	13
1992	207	207	\$47,782,874	\$230,835	314	116	7	245	52	
1993	221	221	\$62,092,452	\$280,961	332	97	17	264	41	6
1994	223	223	\$48,361,653	\$216,868	324	113	14	250	39	5
1995	256	256	\$55,829,056	\$218,082	359	121	17	293	58	8
1996	244	244	\$61,066,911	\$250,274	350	119	24	268	40	14
1997	180	180	\$57,761,609	\$320,898	249	102	5	202	40	2
1998	127	127	\$33,115,745	\$260,754	176	76	2	137	27	
1999	192	192	\$44,453,963	\$231,531	253	89	7	210	35	3
2000	184	184	\$59,843,903	\$325,239	255	104	13	207	44	2
2001	170	170	\$54,623,300	\$321,314	245	118	9	200	55	7
2002	177	177	\$52,936,844	\$299,078	252	106	7	201	39	5
2003	189	189	\$66,283,798	\$350,708	284	148	10	208	61	3
2004	192	192	\$87,623,411	\$456,372	302	139	8	223	51	5
2005	175	175	\$87,682,017	\$501,040	270	140	15	196	59	8
2006	152	152	\$65,123,400	\$428,443	249	139	5	173	49	3
2007	207	207	\$70,049,826	\$338,405	321	157	21	232	56	13
2008	146	146	\$69,281,143	\$474,528	256	129	13	162	59	3
2009	146	146	\$64,462,802	\$441,526	217	136	8	155	67	3
2010	129	129	\$50,452,262	\$391,103	213	118	8	141	56	1
2011	112	112	\$59,693,455	\$532,977	208	101	19	133	46	6
2012	133	133	\$67,044,675	\$504,095	224	120	11	156	62	3
2013	112	112	\$45,762,423	\$408,593	161	79	8	122	25	5

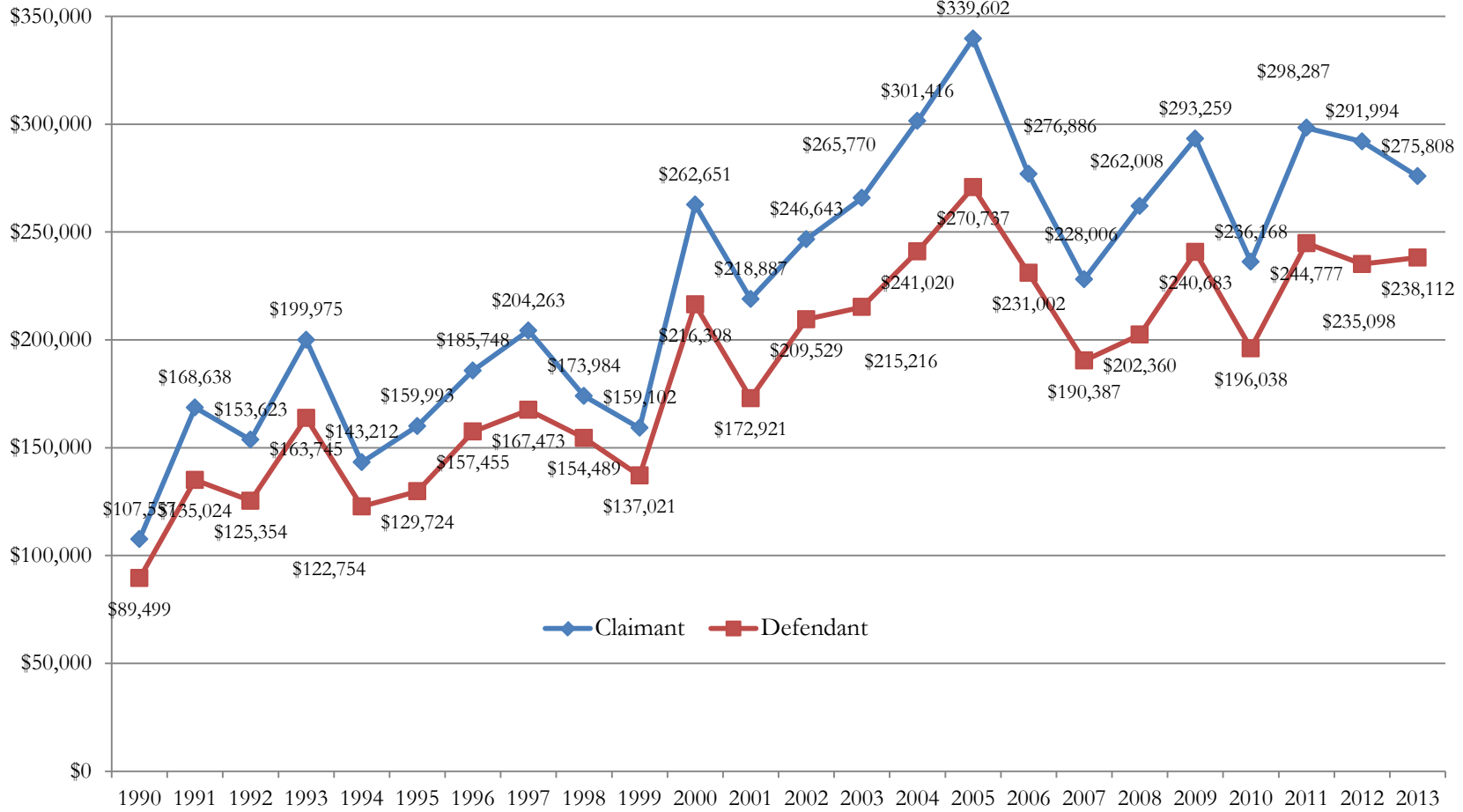
**Cases Involving At Least One Institutional Defendant
(Including Nursing Homes, Hospitals, Clinics & Group Practices)
Closed 1990-2013**

	Claimants				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1990	424	202	\$25,987,622	\$128,652	172	434	8	65	183	2
1991	468	223	\$47,900,412	\$214,800	282	497	25	89	199	9
1992	599	260	\$50,521,109	\$194,312	434	657	25	118	225	4
1993	586	246	\$69,604,585	\$282,945	356	648	26	100	217	4
1994	528	274	\$44,839,004	\$163,646	403	600	32	104	223	10
1995	614	293	\$54,013,344	\$184,346	431	694	29	111	260	12
1996	626	315	\$64,879,898	\$205,968	449	706	36	109	262	14
1997	567	273	\$68,931,780	\$252,497	392	671	26	95	258	8
1998	545	273	\$59,869,106	\$219,301	348	623	25	67	253	4
1999	604	310	\$52,450,674	\$169,196	335	680	19	85	288	4
2000	575	244	\$79,323,199	\$325,095	393	674	22	90	224	2
2001	546	269	\$66,089,252	\$245,685	325	658	29	105	246	12
2002	585	312	\$86,048,579	\$275,797	361	684	16	92	279	6
2003	624	327	\$93,081,105	\$284,652	384	759	26	114	301	9
2004	623	302	\$104,195,247	\$345,017	439	760	33	125	255	14
2005	592	277	\$109,172,786	\$394,126	447	694	37	114	247	11
2006	727	328	\$100,775,111	\$307,241	584	883	59	105	288	13
2007	853	433	\$103,435,430	\$238,881	657	1,028	49	131	389	15
2008	675	361	\$102,954,137	\$285,192	596	891	48	93	391	4
2009	641	312	\$100,169,236	\$321,055	514	789	45	100	292	7
2010	638	331	\$84,163,226	\$254,270	509	773	44	83	325	5
2011	669	358	\$117,693,342	\$328,752	442	800	80	91	345	13
2012	672	359	\$110,721,145	\$308,415	489	804	45	108	342	7
2013	538	261	\$82,186,753	\$314,892	351	614	57	58	235	10

**Cases Involving At Least One Payment Made on Behalf of an Institutional Defendant
(Including Nursing Homes, Hospitals, Clinics & Group Practices)
Closed 1990-2013**

	Claimants				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1990	181	181	\$22,938,665.00	\$126,733	72	189	2	39	184	2
1991	189	189	\$41,613,199	\$220,176	113	206	13	52	200	5
1992	215	215	\$43,241,507	\$201,123	153	247	11	63	226	3
1993	204	204	\$56,974,798	\$279,288	124	240	15	54	218	1
1994	214	214	\$33,809,747	\$157,989	105	257	20	42	223	5
1995	245	245	\$43,839,545	\$178,937	144	289	16	57	261	10
1996	252	252	\$49,716,804	\$197,289	164	290	15	45	263	8
1997	228	228	\$55,222,780	\$242,205	144	292	8	44	259	4
1998	234	234	\$52,297,871	\$223,495	121	273	11	26	253	2
1999	267	267	\$46,329,612	\$173,519	116	319	10	35	289	2
2000	204	204	\$68,896,156	\$337,726	134	260	11	46	225	1
2001	231	231	\$56,089,110	\$242,810	112	294	14	65	247	9
2002	263	263	\$73,040,216	\$277,719	124	311	7	38	280	2
2003	274	274	\$80,285,669	\$293,013	162	353	8	56	302	6
2004	238	238	\$82,691,043	\$347,441	138	306	8	58	255	6
2005	228	228	\$89,402,773	\$392,117	164	289	15	57	247	5
2006	273	273	\$84,154,472	\$308,258	201	362	38	49	288	8
2007	367	367	\$88,010,658	\$239,811	242	454	18	60	389	8
2008	329	329	\$90,872,297	\$276,208	266	470	20	56	392	2
2009	273	273	\$91,100,590	\$333,702	231	360	25	61	293	3
2010	305	305	\$73,947,171	\$242,450	222	380	20	53	326	4
2011	327	327	\$108,936,642	\$333,140	205	401	39	57	345	10
2012	318	318	\$90,390,637	\$284,247	219	387	19	64	340	1
2013	253	253	\$78,740,235	\$311,226	148	297	36	27	265	6

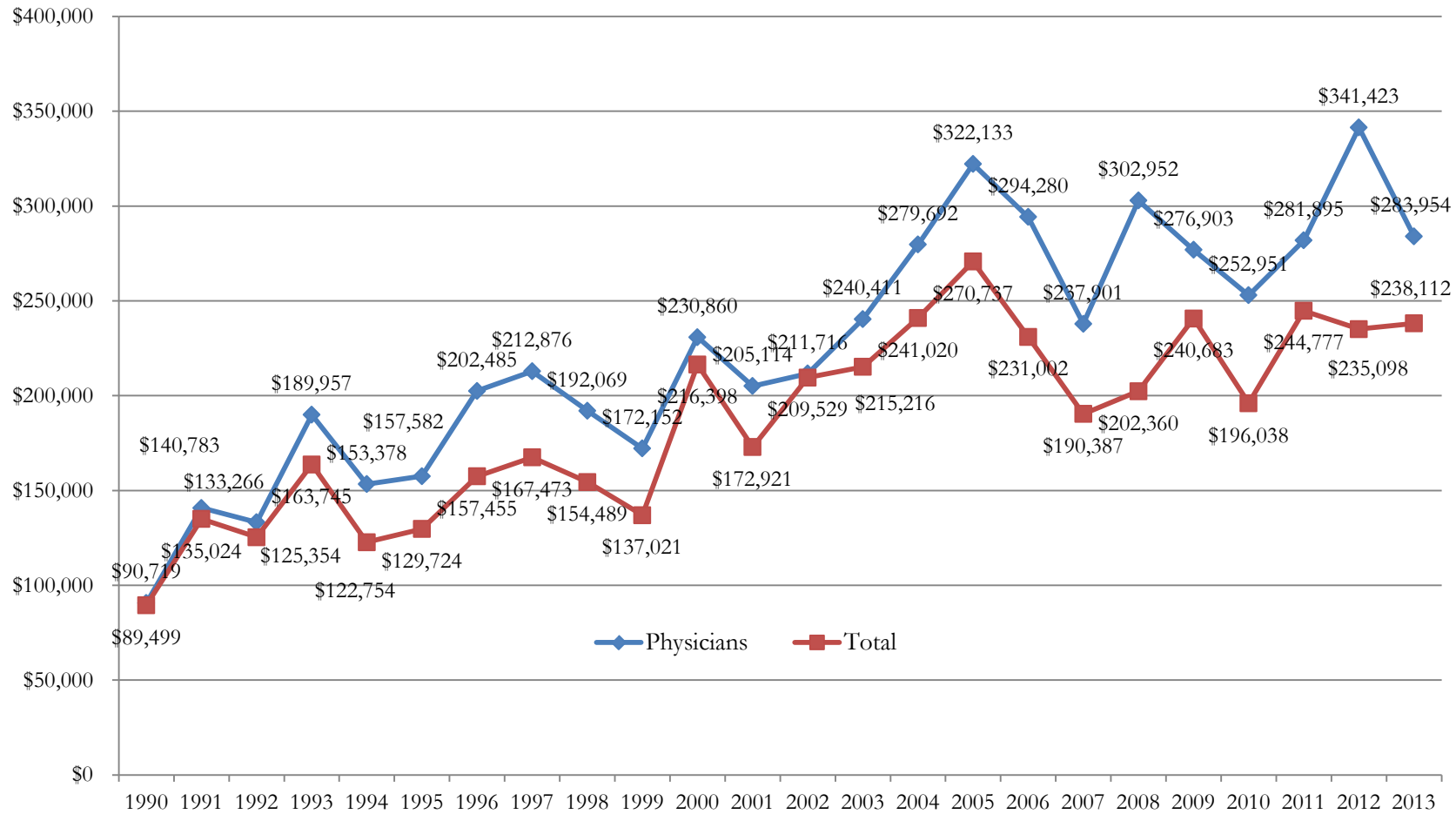
Average Payment Received by Claimant, and Paid on Behalf of Defendant



Number of Defendants, 1990 – 2013*												
	Physicians			Institutions (Including Nursing Homes, Hospitals, Clinics, & Group Practices)			All Other (Nurses, Pharmacists, etc.)			Total		
Year	Defs.	Defs. With Payment	Average Indemnity	Defs.	Defs. With Payment	Average Indemnity	Defs.	Defs. With Payment	Average Indemnity	Defs.	Defs. With Payment	Average Indemnity
1990	826	281	\$90,719	442	184	\$109,757	161	77	\$36,633	1429	542	89498.6531
1991	922	296	\$140,783	505	200	\$169,234	223	101	\$50,402	1650	597	135023.578
1992	931	245	\$133,266	663	226	\$144,589	197	67	\$31,541	1791	538	125354.491
1993	907	264	\$189,957	650	218	\$181,323	226	81	\$31,005	1783	563	163745.002
1994	889	250	\$153,378	600	223	\$106,450	171	73	\$67,679	1660	546	122753.537
1995	996	293	\$157,582	699	261	\$120,586	170	75	\$52,695	1865	629	129724.348
1996	965	268	\$202,485	707	263	\$143,975	200	73	\$40,705	1872	604	157455.066
1997	766	202	\$212,876	672	259	\$171,095	163	72	\$27,063	1601	533	167472.675
1998	702	137	\$192,069	623	253	\$174,304	181	83	\$32,059	1506	473	154488.945
1999	706	210	\$172,152	683	289	\$132,716	155	63	\$39,663	1544	562	137020.502
2000	801	207	\$230,860	676	225	\$239,245	159	45	\$35,639	1636	477	216397.979
2001	684	200	\$205,114	661	247	\$170,256	140	53	\$63,858	1485	500	172920.978
2002	761	201	\$211,716	685	280	\$228,640	131	44	\$77,931	1577	525	209529.347
2003	730	208	\$240,411	760	302	\$210,645	148	42	\$123,313	1638	552	215216.134
2004	827	223	\$279,692	760	255	\$246,580	176	56	\$61,698	1763	534	241019.539
2005	820	196	\$322,133	694	247	\$267,119	182	60	\$117,736	1696	503	270736.616
2006	979	173	\$294,280	884	288	\$219,170	229	64	\$113,196	2092	525	231001.701
2007	1032	232	\$237,901	1028	389	\$181,161	194	76	\$92,565	2254	697	190386.613
2008	908	162	\$302,952	892	392	\$171,217	185	39	\$97,546	1985	593	202360.329
2009	752	155	\$276,903	791	293	\$250,969	181	54	\$80,904	1724	502	240682.845
2010	766	141	\$252,951	782	326	\$190,987	156	45	\$54,301	1704	512	196037.834
2011	659	133	\$281,895	803	345	\$251,977	189	46	\$83,463	1651	524	244777.403
2012	724	156	\$341,423	816	340	\$209,590	173	48	\$70,226	1713	544	235097.991
2013	628	122	\$283,954	727	265	\$230,373	193	52	\$170,002	1548	439	238112.189

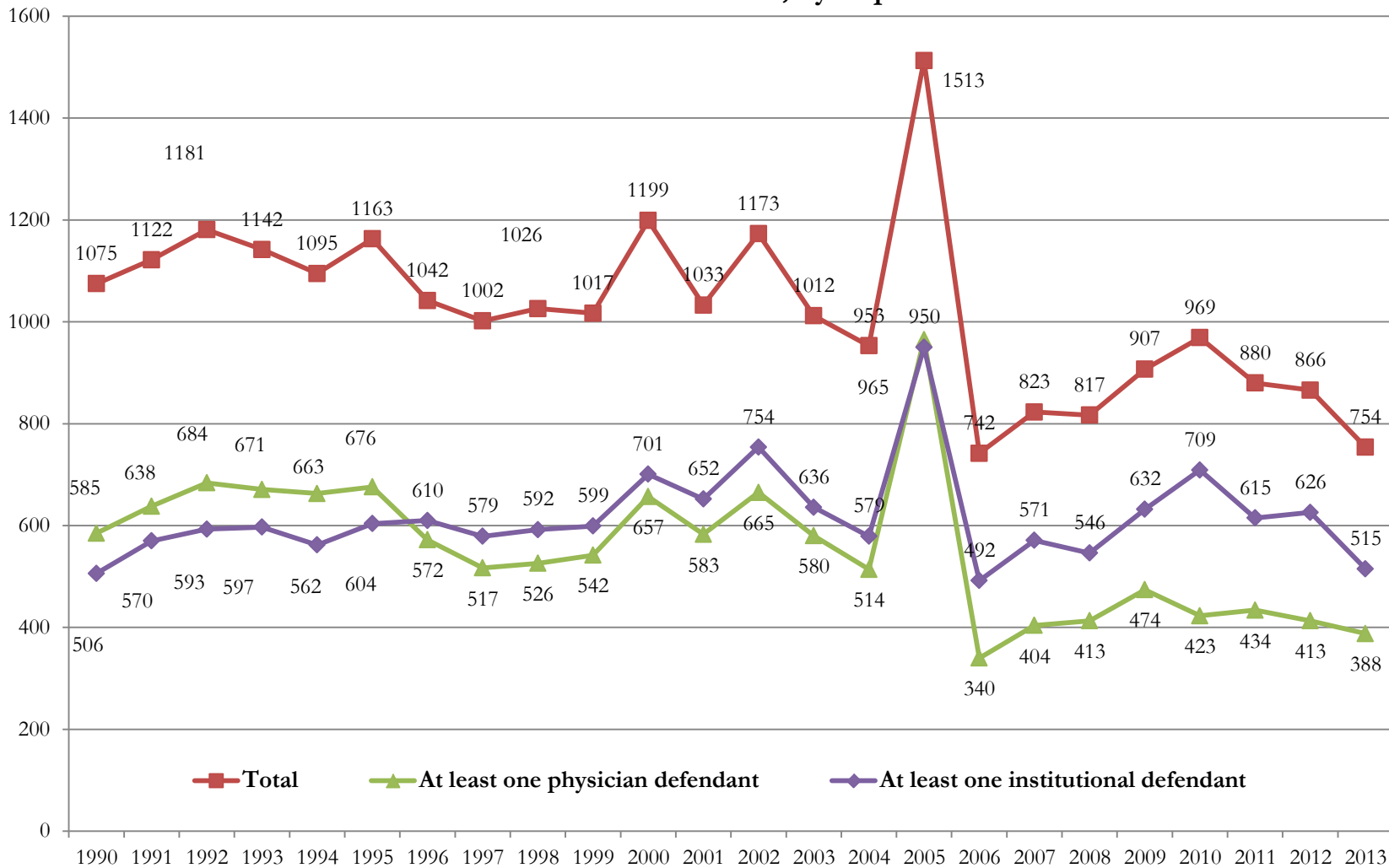
*Each defendant is counted in the year the occurrence was closed, regardless of whether the claim against the individual practitioner was closed in an earlier year.

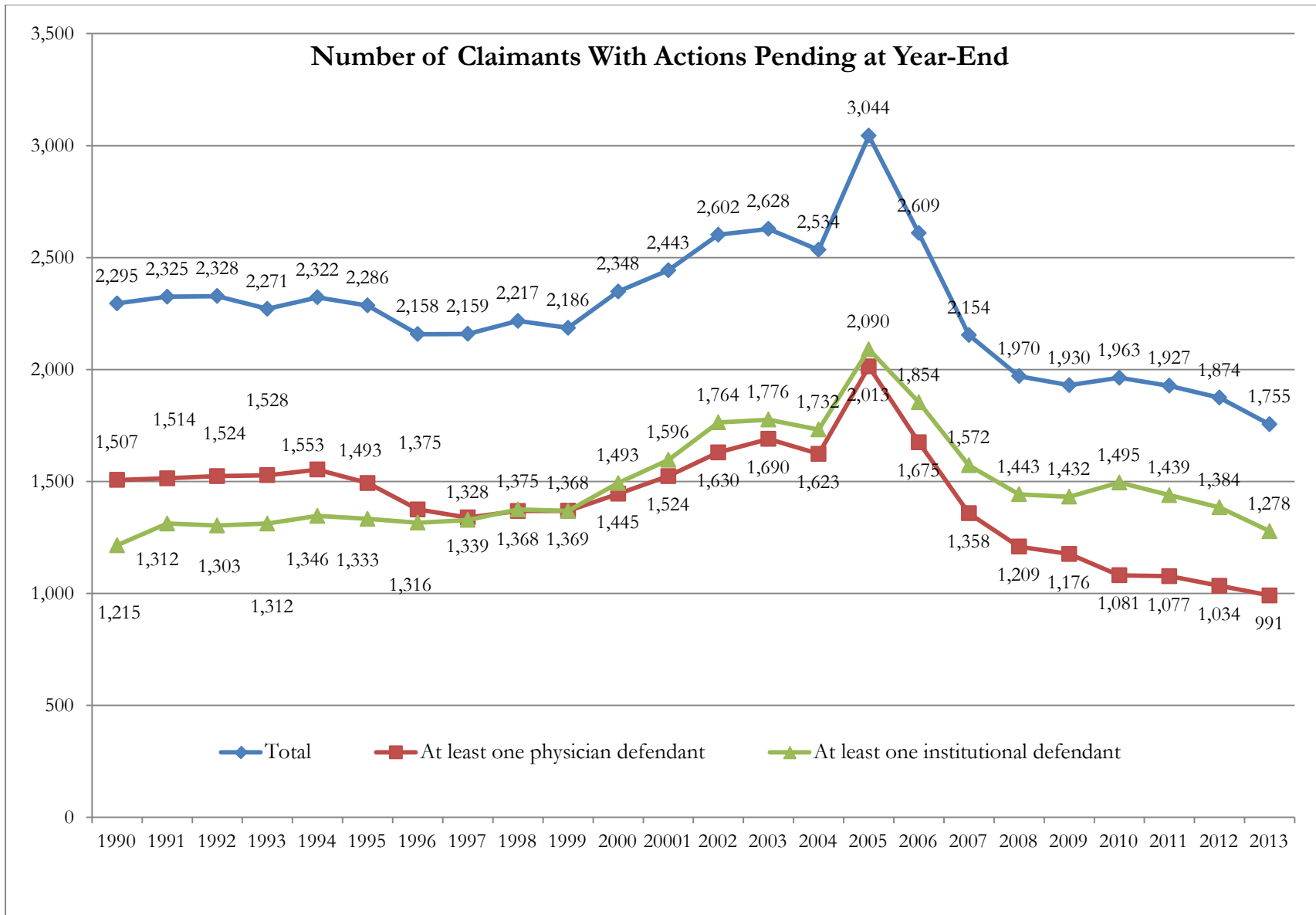
Average Indemnity Per Defendant

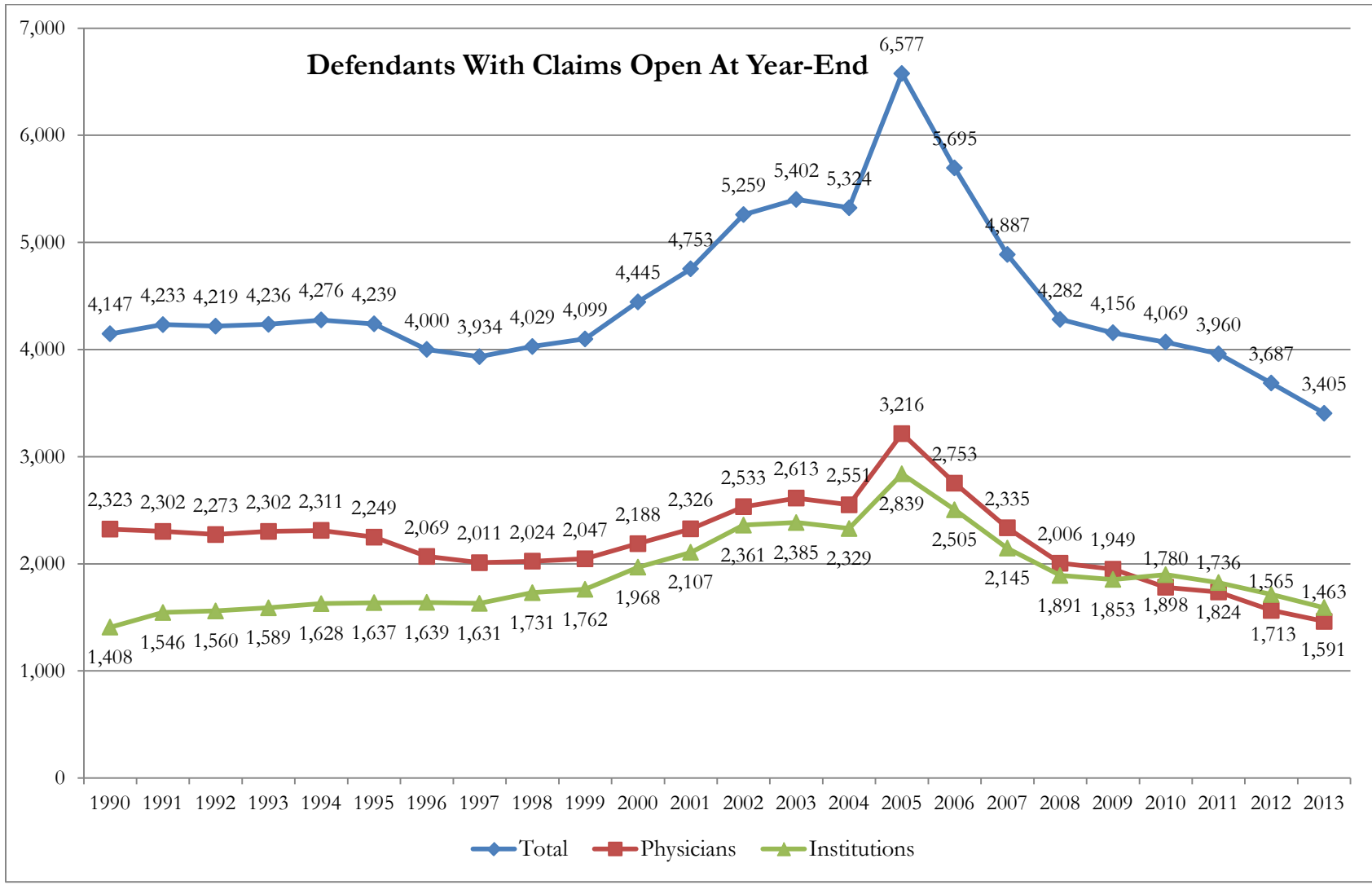


Claimants and Associated Number of Defendants By Report Year					
		Defendants			
Year Reported	Claimants	Physicians	Institutions	All Other	Total
1990	1,075	798	561	243	1,602
1991	1,122	901	643	192	1,736
1992	1,181	902	677	198	1,777
1993	1,142	936	680	185	1,801
1994	1,095	898	639	163	1,700
1995	1,163	934	708	186	1,828
1996	1,042	785	709	139	1,633
1997	1,002	708	664	163	1,535
1998	1,026	715	723	163	1,601
1999	1,017	729	714	171	1,614
2000	1,199	942	882	158	1,982
2001	1,033	822	800	171	1,793
2002	1,173	968	939	176	2,083
2003	1,012	810	784	187	1,781
2004	953	765	704	216	1,685
2005	1,513	1485	1204	260	2,949
2006	742	516	550	144	1,210
2007	823	614	668	164	1,446
2008	817	579	638	163	1,380
2009	907	695	753	150	1,598
2010	969	597	827	193	1,617
2011	880	615	729	198	1,542
2012	866	553	705	182	1,440
2013	754	526	605	135	1,266

Number of New Claimants, by Report Year







Section VIII

Nature and Substance of Allegations and Outcomes

Recently, the DIFP added a new data field derived from the “allegation codes” used by the National Practitioner Databank (NPDB). The allegation code is a rudimentary typology that captures information about the nature and substance of the alleged medical error or omission. However, this field has proven quite limited. In many instances, it captures information at such a high level of generality as to be nearly tautological. For example, a high percentage of claims were coded as *improper performance*, a description that conveys no additional information beyond the knowledge obtained from the mere fact that a claim has been filed.

As part of data enhancements, additional typologies were developed to capture more meaningful details about the nature of allegations of malpractice. As of 2011, over 15,000 records have been manually reviewed and allegation and outcome codes were derived from the written narratives that accompany each claim that is filed with the DIFP. In addition, new classifications were developed to capture greater information about the nature and severity of injuries than was captured by the traditional 9-point injury severity scale. Basic tables derived from the recoded data are presented in this report.

Readers are cautioned that the figures presented in the following tables are not intended to be an absolute accounted of all types of errors. The number of occurrences will not reconcile with those presented in other sections of the report. This is because the data were produced prior to the due date for the filing on which the remainder of the report is based. In addition, some records had to be discarded due to missing or incomplete narratives. However, the numbers should provide readers with a good sense of typical allegations, as well as their relative (if not absolute) frequencies. The figures should be interpreted as an *undercount* of the true and (currently) unknown frequencies of various allegations.

Adverse Outcomes by Medical Category Closed Occurrences, 2002-2013			
Category	Claimants	Claimants With Payment	Average Indemnity Per Paid Claimant
Diagnosis	1,988	932	\$396,083
Anesthesia	207	86	\$278,431
Surgery	3,502	1,536	\$300,751
Medication	1,017	445	\$172,997
IV & Blood Products	174	102	\$115,600
Pregnancy & childbirth	703	343	\$707,600
Treatment	2,000	881	\$227,515
Patient Safety / Ethical	1,530	708	\$126,472
Total	11,121	5,033	\$293,366

Category	Claimants	Claimants With Payment	Total Indemnity
Diagnosis	17.9%	18.5%	25.0%
Anesthesia	1.9%	1.7%	1.6%
Surgery	31.5%	30.5%	31.3%
Medication	9.1%	8.8%	5.2%
IV & Blood Products	1.6%	2.0%	0.8%
Pregnancy & childbirth	6.3%	6.8%	16.4%
Treatment	18.0%	17.5%	13.6%
Other / miscellaneous	13.8%	14.1%	6.1%
Total	100.0%	100.0%	100.0%

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Diagnostic Allegations by Condition - Infectious Conditions				
Central nervous system, including meningitis, encephalitis	34	22	\$1,094,904	7.9
Spine / spinal cord	12	6	\$888,889	6.7
Other skeletal	11	6	\$834,167	5.6
Heart	8	4	\$408,750	8.4
Integumentary system - skin, hair, nails etc	6	2	\$600,000	4.5
Auditory	4	1	\$65,000	5.8
Visual	1	1	\$3,000	4.0
Blood & immune disorders	2	2	\$900,000	8.0
Respiratory	41	22	\$248,125	6.8
Digestive system	20	7	\$60,929	5.2
Genitourinary system	7	3	\$145,833	7.4
Reproductive system	5	4	\$179,737	6.0
Gangrene or other necrotizing condition	1	1	\$733,000	9.0
Staph infection	2	1	\$1,155,850	9.0
Septic condition	10	6	\$740,000	7.4
Unknown	34	18	\$228,754	5.8
Subtotal - Infectious Conditions	198	106	\$534,126	6.6
Diagnostic Allegations by Condition - Non-Infectious Conditions				
Cardiovascular Conditions				
Heart Condition	195	103	\$401,562	7.9
Embolism/ thrombosis	60	33	\$322,580	7.6
Hematoma / aneurysm	48	30	\$449,775	8.0
Ischemia / vascular deficiency	11	7	\$673,571	7.4
Stroke	113	55	\$437,474	6.5
Subtotal	427	228	\$413,488	7.5
Cancers				
Cancer - oral	15	2	\$120,000	7.4
Cancer - digestive tract	67	31	\$492,876	7.3
Cancer - respiratory tract	82	39	\$424,749	8.0
Cancer - bone and cartilage	22	12	\$388,031	7.4
Cancer - skin	35	14	\$408,214	6.3
Cancer - mesothelial and soft tissue	1			9.0
Cancer - breast	106	43	\$435,359	7.3
Cancer - reproductive organs	34	19	\$379,940	7.9
Cancer - kidney, bladder and related	24	12	\$264,742	6.7
Cancer - central nervous system	10	6	\$189,283	7.4
Cancer - Thyroid and other endocrine glands	23	12	\$337,568	6.6
Cancer - Hodgkins, lymphoma, and related	10	3	\$604,500	7.5
Cancer - unknown type	34	16	\$269,675	6.4
Subtotal	463	209	\$375,942	6.8

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Traumatic Injuries				
Trauma - fracture	148	47	\$111,987	3.7
Trauma - dislocation w/out fracture	6	4	\$318,750	4.8
Trauma - Cuts, burns, abrasions	2	1	\$200,000	4.0
Trauma - neurological	4	4	\$96,604	4.3
Trauma - spine	34	15	\$1,202,456	6.0
Trauma - peripheral nervous system	1			5.0
Trauma - sprains or other soft tissue injury	1			3.0
Trauma - injury to tendons or muscle	30	7	\$91,143	3.9
Trauma - injury to nerves	1			5.0
Trauma - injury to internal organs	50	28	\$393,125	7.3
Poison, exposure to toxin	7	3	\$136,667	6.6
Trauma - details unknown	4	1	\$170,000	2.8
Subtotal	288	110	\$339,883	4.7
Misc. Conditions				
Nervous system disorders	27	10	\$635,505	6.3
Integumentary system - skin, hair, nails etc.	1	1	\$125,000	4.0
Auditory condition	3	1	\$45,000	4.7
Visual condition	16	10	\$587,110	6.2
Spine / spinal cord disorder	43	16	\$607,583	6.0
Musculoskeletal disorder order- excluding spine	13	5	\$538,000	3.8
Compartment syndrome	8	6	\$214,167	5.1
Unknown or benign neoplasms	40	17	\$414,237	5.6
Blood and immune disorders	14	8	\$660,208	7.1
Diabetes	11	7	\$334,184	6.4
Endocrine, nutritional, and metabolic disorders	24	16	\$365,583	7.4
Respiratory condition	10	5	\$499,994	7.7
Digestive disorders	151	73	\$335,672	6.0
Diseases of the genitourinary system	23	13	\$375,192	6.1
Diseases of the reproductive system	21	11	\$236,023	5.2
Development of fistula	1	1	\$35,000	3.0
Healthy patient misdiagnosed with condition	54	21	\$159,485	3.6
Subtotal	460	221	\$382,202	5.7
Unknown diagnostic issue	153	58	\$238,969	6.0
Complications of Anesthesia				
Intubation Injuries				
Traumatic injury during intubation	99	25	\$48,113	3.2
Premature extubation	6	4	\$269,435	7.0
Other improper intubation	13	10	\$643,600	7.8
Subtotal	118	39	\$223,502	3.9

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Dosage / Medication Errors				
Wrong dosage	4	4	\$451,979	6.8
Wrong medication	2	2	\$17,500	2.5
Unknown dosage / medication error	1	1	\$2,304	3.0
Subtotal	7	7	\$263,603	5.0
Cardiovascular / Respiratory Complications of Anesthesia				
Hematoma / aneurysm	1	1	\$300,000	9.0
Ischemia / vascular deficiency	5	3	\$622,333	6.6
Hypoxia	12	5	\$296,250	7.2
Myocardial infarction	2			6.0
Stroke	1			7.0
Injury from aspiration	2	1	\$25,000	5.5
Other respiratory distress	14	8	\$458,337	7.2
Subtotal	37	18	\$407,775	7.0
Other Anesthesia Complications				
Injection into wrong body part	1			4.0
Cut, puncture, tear during injection	2	1	\$690,000	5.5
Injury from equipment malfunction	2	1	\$35,000	6.0
Allergic reaction to medication	6	2	\$138,375	4.7
Other negative side-effect	12	4	\$355,000	4.6
Anesthetic or intra-operative awareness	10	7	\$42,861	1.4
Other inadequate anesthetization	9	6	\$548,599	6.0
Subtotal	42	21	\$156,742	2.6
Unknown	2	1	\$30,000	9.0
Surgical Complications				
Cardiovascular / Respiratory Complications of Surgery				
Hematoma / aneurysm	24	16	\$645,453	6.7
Embolism/ thrombosis	56	26	\$283,369	7.2
Ischemia / vascular deficiency	47	24	\$711,761	6.9
Hypoxia	26	15	\$1,049,739	7.7
Injury from aspiration	15	5	\$165,613	6.3
Other respiratory distress	17	8	\$436,500	7.5
Myocardial infarction	51	26	\$455,410	8.0
Stroke	23	8	\$236,182	6.8
Excess blood loss during surgery or treatment	16	6	\$758,981	7.1
Postoperative bleeding	81	38	\$535,732	7.0
Subtotal	356	172	\$543,518	7.2
Complications With Prosthetic / Therapeutic or Other Devices				
Defective implant	13	2	\$137,500	3.9
Improper placement of prosthetic device	118	41	\$329,920	4.6
Incorrect prosthetic device, or wrong size	54	16	\$133,078	4.2
Improper placement of therapeutic device	46	18	\$217,968	5.7

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Incorrect therapeutic device, or wrong size	5	2	\$338,500	5.2
Failure to introduce or remove other medical implement	3	1	\$70,000	3.7
G-tube or feeding tube improperly placed or malfunction	16	11	\$151,182	7.3
Subtotal	255	91	\$244,664	4.8
Informed Consent Issues				
Treatment lacked salutary effect	313	85	\$152,820	4.3
Unnecessary surgery or procedure	109	35	\$269,171	4.5
Failure to warn of risks of procedure	5	1	\$150,000	4.2
Did not consent to procedure	15	5	\$119,000	4.0
Subtotal	442	126	\$183,775	4.4
Surgical Trauma				
Unintentional cut, puncture, tear during heart catheterization	31	12	\$627,064	6.5
Unintentional cut, puncture, tear during other surgery	634	338	\$316,480	5.2
Unintentional cut, puncture, tear during injection	11	4	\$82,500	4.9
Injury from patient positioning	45	18	\$136,237	4.3
Inappropriate temperature in local application	8	6	\$95,665	4.1
Sutures, staples, etc. improperly placed	49	25	\$639,030	5.2
Injury from improper operation of equipment	6	4	\$201,019	4.5
Injury from equipment malfunction	28	11	\$141,970	5.7
Other surgical injury - central nervous system	16	8	\$845,000	6.8
Other surgical injury - veins or arteries	1	1	\$202,000	9.0
Other surgical injury - fracture	9	1	\$35,000	4.0
Other surgical injury - internal organ	29	9	\$199,969	5.4
Other surgical injury - non-fracture musculoskeletal injury	2			5.0
Other surgical injury - nerve injury	93	37	\$397,542	5.0
Other surgical injury - peripheral nervous system	9	6	\$547,079	5.4
Other surgical injury - impaired vision	11	6	\$287,500	5.1
Other surgical injury - morphology problem / disfigurement	5	2	\$225,000	5.2
Other injury during surgical procedure	31	17	\$245,853	4.5
Subtotal	1,018	505	335317.9307	5.2
Surgical Infections				
Pressure ulcers during care	17	9	\$168,611	4.5
Development of gangrene or other necrotizing condition	19	7	\$371,429	5.5

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Staph infection contracted during care	44	12	\$206,008	5.0
Other infection contracted during care	321	111	\$345,115	5.3
Development of septic condition during care	39	12	\$797,701	6.8
Subtotal	440	151	\$360,727	5.4
Problems with Surgical Site				
Failure in suture or ligature	3	1	\$225,000	4.0
Improper closure of surgical site	75	36	\$400,964	5.3
Other problem with surgical site	22	8	\$134,688	3.8
Development of fistula	34	12	\$298,592	4.5
Misc. Surgical Issues				
Foreign body retained	244	142	\$110,742	3.9
Wrong patient	2	1	\$122,000	5.0
Procedure performed on wrong body part	90	69	\$179,040	4.3
Contaminated substance taken or injected	6	2	\$312,500	3.3
Wrong fluid used in transfusion	1	1	\$175,000	6.0
Failure to identify or treat compartment syndrome	19	12	\$511,884	6.4
Misset fracture or non-union	86	37	\$243,288	4.3
Failure to stabilize prior to transfer / discharge	2	1	\$225,000	9.0
Allergic reaction to medical materials, excluding medications	12	3	\$185,500	3.1
Inappropriate handling of transplantable material	42	39	\$164,971	6.1
Aborted surgery	22	8	\$68,418	3.5
Other problem in post-surgical care	16	5	\$426,000	6.3
Failed sterilization	11	6	\$68,500	2.0
Accidental or unnecessary sterilization	6			5.0
Insurance coverage or monetary dispute	2			1.0
Retained body part	2	1	\$85,000	3.5
Physician delay or failure to respond to call	1	1	\$5,500	3.0
Subtotal	564	328	\$166,279	4.3
Unknown surgical issues	290	103	\$245,128	5.0
Medication-Related Allegations				
Medication administered via the wrong rte.	4	3	\$2,019,327	7.0
Wrong dosage administered	192	128	\$212,303	5.0
Wrong medication administered	209	146	\$40,790	3.3
Unknown dosage / medication error	13	7	\$152,714	4.1
Injection into wrong body part	4	2	\$1,293,750	6.3
Injury from long-term use of medication	33	17	\$211,544	5.7
Improper operation of equipment	3	2	\$426,250	3.7
Injury from equipment malfunction	2	1	\$1,250,000	5.5

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Physical accident while taking medicine	4	2	\$5,512	3.5
Allergic reaction to medication	63	31	\$136,789	4.3
Interaction of two or more medications	44	23	\$269,870	6.5
Addiction or withdrawal issues	12	3	\$21,667	3.5
Premature cessation of medications	1			1.0
Adverse Reactions to Correct Dose and Medication				
Steroids	12	6	\$119,167	4.3
Anti-seizure medications	4	2	\$270,000	5.3
Digestives medications	5	3	\$312,500	6.0
Anticoagulants	51	18	\$331,719	5.3
Heart medications	9	2	\$116,250	7.6
Hypertension medications	5			5.4
Weight loss medications	29			3.7
Topical applications	1			3.0
Adrenaline & related	3	2	\$525,000	5.3
Pain management, non-narcotics	15	1	\$100,000	5.9
Pain management, narcotics	26	8	\$116,201	6.2
Sedatives & relaxants	4	2	\$267,500	7.3
Chemotherapy agents	6	1	\$5,000	7.0
Cholesterol agents	7	1	\$100,000	4.7
Hormonal treatments	1			6.0
Vaccines	2			6.0
Cognitive & affective disorders	108	2	\$11,250	4.5
Substance abuse medications	1			9.0
Diabetic medications	7	2	\$35,500	5.0
Immune medications	3	1	\$325,000	5.3
Antibiotics	20	7	\$291,314	5.1
Antifungal agents	1			5.0
Antiviral agents	1	1	\$51,000	4.0
Antiparasitic agents	2	1	\$40,000	5.5
Anti-inflammatory, excluding steroids	5			4.0
Side-effect of unknown medications	93	16	\$175,161	4.6
Unknown	10	3	\$122,167	6.8
IV & Blood Products				
IV infiltration event	100	59	\$90,072	4.2
Embolism/ thrombosis	9	4	\$285,275	3.9
Injection into wrong body part	4	4	\$104,375	4.3
Cut, puncture, tear during injection	23	11	\$35,093	3.4
Foreign body retained during injection	3	3	\$21,667	3.7
Excessive amount of blood or other fluid	1	1	\$275,000	4.0
Incorrect dilution of fluid	1	1	\$54,000	4.0
Inappropriate temperature in local application	2	2	\$77,500	4.5

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Contaminated substance taken or injected	3	1	\$15,000	3.3
Incorrect blood type	9	8	\$835,875	7.2
Failure to identify or treat compartment syndrome	2			4.0
Staph infection contracted during care	6	3	\$678,667	5.0
Other infection contracted during care	6	5	\$45,060	3.3
Development of septic condition during care	1			9.0
Injury from improper operation of equipment	1			3.0
Unknown IV/ Blood Issue	5	1	\$20,000	4.3
Pregnancy & Childbirth				
Ectopic pregnancy	27	9	\$141,278	4.1
Spontaneous abortion / stillbirth	37	18	\$154,269	7.9
Complications w/ abortion	7	3	\$43,333	5.7
Complications w hypertension	1			6.0
Eclampsia	17	8	\$663,932	7.5
Injury from maternal infections	34	14	\$1,294,143	6.3
Complications of gestational diabetes	4	2	\$237,500	8.8
Complications of multiple gestation	4	1	\$300,000	8.5
Complications from disproportion	17	10	\$817,973	5.7
Other maternal complications related to pregnancy	2	2	\$210,000	9.0
Fetal abnormality	11	3	\$883,333	6.7
RH Isoimmunization	2	2	\$136,329	5.0
Complications of placental disorders	46	23	\$1,070,553	8.0
Complications from prolonged pregnancy	1	1	\$85,000	5.0
Pre-term labor	21	8	\$409,063	6.9
Failed induction of labor	2	2	\$2,741,363	7.5
Prolonged labor	8	5	\$913,800	6.6
Shoulder dystocia	76	39	\$598,652	5.8
Other obstructed labor	8	5	\$187,000	6.1
Umbilical cord complications	3	1	\$175,000	7.0
Other obstetric trauma	6	4	\$350,000	6.7
Postpartum hemorrhage	4	2	\$475,000	7.0
Retained placenta and membranes	3			3.3
Fetus / newborn affected by maternal condition unrelated to pregnancy	7	3	\$1,115,000	7.4
Deficient fetal growth rate	2	1	\$400,000	7.0
Intracranial laceration or hemorrhage due to birth injury	9	5	\$804,500	6.9
Other birth injuries to central nervous system	19	13	\$864,832	7.1
Birth injury to peripheral nervous system	15	8	\$520,625	6.0

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Other birth injuries	3	3	\$471,667	7.0
Intrauterine hypoxia	98	56	\$1,403,359	7.6
Respiratory distress of newborn	1	1	\$300,000	9.0
Pulmonary hemorrhage originating in the perinatal period	1	1	\$425,000	8.0
Hemolytic disease of fetus or newborn	1			9.0
Kernicterus	1	1	\$3,000,000	8.0
Metabolic / endocrine disorders of fetus or newborn	1	1	\$250,000	7.0
Seizure disorder of infant	2	1	\$100,000	7.0
Mix-up of newborn at discharge	1			1.0
Reaction to medication	2	1	\$50,000	9.0
Unintentional cut, tear, perforation	27	9	\$372,469	4.1
Retained surgical or other material	23	14	\$151,076	3.4
Cardiovascular complications of pregnancy	11	5	\$1,063,743	8.1
Wrong dosage administered	1			2.0
Inappropriate temperature in local application	1	1	\$10,000	3.0
Improper placement of therapeutic device	1			2.0
Sutures, staples, etc improperly placed	1	1	\$85,000	3.0
Other improper closure of surgical site	2	1	\$7,500	3.0
Other respiratory distress	1			4.0
Development of fistula	3			4.3
Failure to stabilize prior to transfer / discharge	2	1	\$100,000	9.0
Other inadequate anesthetization	5	2	\$26,450	2.4
Unnecessary surgery or procedure	1			9.0
Development of gangrene or other necrotizing condition	4	1	\$275,000	5.8
Development of septic condition during care	1	1	\$450,000	9.0
Excess blood loss during surgery or treatment	1	1	\$1,091,298	7.0
Postoperative bleeding	3	1	\$25,000	6.7
Other problem with surgical site	1			5.0
Failed resuscitation	1			9.0
Retained body part	2			4.5
Physician delay or failure to respond to call	1	1	\$1,725,000	7.0
Injury to fetus or mother due to procedure unrelated to pregnancy	12	3	\$110,000	7.3
Injury during transporting or repositioning	1			1.0
Other injury incidental to medical procedure	3	2	\$475,000	7.7
Injury from equipment malfunction	1			3.0
Other injury unrelated to medical	1	1	\$16,500	3.0

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
treatment				
Not applicable, no clear allegation of medical injury	1	1	\$7,500	1.0
Unknown pregnancy & childbirth issue	89	41	\$370,047	7.0
Complications of Non-Surgical Treatment				
Cardiovascular / Respiratory Complications				
Hematoma / aneurysm	12	5	\$146,650	7.6
Embolism/ thrombosis	21	11	\$238,243	5.7
Ischemia / vascular deficiency	9	3	\$391,667	6.7
Hypoxia	8	6	\$300,167	8.5
Myocardial infarction	32	18	\$364,352	8.2
Stroke	25	6	\$864,167	7.0
Injury from aspiration	24	11	\$328,439	7.4
Other respiratory distress	16	9	\$523,611	8.1
Subtotal	147	69	\$382,588	7.4
Allegations Related to Medical & Biological Agents				
Excessive amount of blood or other fluid	3	1	\$230,000	7.3
Incorrect dilution of fluid	3	2	\$47,500	4.0
Overdose of radiation during therapy	53	41	\$283,637	6.7
Inadvertent exposure to radiation	2	2	\$42,500	6.5
Dosage failure in electroshock therapy	4	3	\$543,167	5.3
Wrong agent administered	1	1	\$1,200,000	9.0
Wrong fluid used in transfusion	5	5	\$287,000	4.8
Wrong agent administered	6	6	\$439,167	5.5
Wrong dosage administered	4	2	\$683,354	5.0
Contaminated substance taken or injected	2			3.5
Inappropriate handling of transplantable material	3	1	\$20,000	1.0
Other negative side-effect of medical agents	1			4.0
Subtotal	87	64	\$317,584	6.0
Problem With Medical Equipment				
Inappropriate temperature in local application	21	17	\$31,256	3.6
Improper placement of prosthetic device	2	1	\$20,000	4.5
Incorrect prosthetic device, or wrong size	2	1	\$2,000	2.5
Improper placement of therapeutic device	21	12	\$165,340	4.4
Incorrect therapeutic device, or wrong size	3	1	\$43,500	3.0
Allergic reaction to medical materials, excluding medications	18	8	\$33,649	4.4
Injury from improper operation of equipment	22	14	\$51,539	5.0
Injury from equipment malfunction	14	7	\$259,357	5.5
G-tube or feeding tube improperly placed	13	5	\$1,875,000	7.5

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
of malfunction				
Failure to timely / properly intubate	24	18	\$541,000	8.3
Subtotal	140	84	\$291,669	5.4
Physical Injuries Resulting from Procedure				
Cut, puncture, tear during injection	93	41	\$204,640	4.2
Cut, puncture, tear during endoscopic exam	83	32	\$258,693	5.5
Cut, puncture, tear during catheterization	46	18	\$116,005	4.8
Cut, puncture, tear during other medical procedure	60	36	\$56,049	3.8
Extravasation from injection	5	4	\$63,802	3.2
Injection into wrong body part	8	3	\$248,333	6.0
Injury during intubation	2	2	\$56,500	4.0
Injury from patient positioning	9			3.2
Injury caused by physical therapy	155	66	\$109,445	3.7
Sutures, staples, etc improperly placed	5			3.2
Other injury resulting from medical procedure	30	12	\$68,346	3.8
Subtotal	496	214	\$139,865	4.2
Infections & Related				
Pressure ulcers during care	236	129	\$159,899	6.5
Development of gangrene or other necrotizing condition	22	10	\$311,065	5.7
Staph infection contracted during care	13	2	\$30,000	3.9
Development of septic condition during care	24	13	\$330,949	7.8
Other infection contracted during care	142	44	\$131,881	4.8
Subtotal	437	198	\$171,226	5.9
Retention of Foreign Object				
Foreign body retained during injection	3			3.0
Foreign body retained during endoscopic exam	1	1	\$35,000	3.0
Foreign body retained during catheterization	1			3.0
Foreign body retained during other medical procedure	13	7	\$56,766	3.1
Subtotal	18	8	\$54,045	3.1
Delays & Other Omissions				
Delay in transport	7	2	\$50,000	7.3
Delay in Emergency Department	17	4	\$100,331	5.2
Delay in scheduling surgery	8	4	\$372,402	8.1
Failure to make timely or appropriate referral	9	4	\$387,500	6.0
Other Delay	12	3	\$278,800	5.8

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Failure in follow-up care	12	4	\$356,250	5.8
Physician delay or failure to respond to call	2	1	\$58,500	9.0
Deficient monitoring of patient status	13	8	\$444,938	7.9
Non-administration of necessary drug or other substance	5	1	\$250,000	7.4
Other non-administration of necessary care	131	54	\$282,794	6.5
Subtotal	216	85	\$293,426	6.5
Misc.				
Performance of inappropriate operation or procedure	3	2	\$67,000	4.3
Did not consent to procedure	9	2	\$5,000	1.9
Unnecessary surgery or procedure	11	1	\$130,000	3.6
Failure to identify or treat compartment syndrome	7	5	\$228,420	4.9
Procedure performed on wrong body part	2	1	\$150,000	4.0
Misset fracture or non-union	50	22	\$98,771	4.1
Development of fistula	1	1	\$123,000	6.0
Failure to stabilize prior to transfer / discharge	24	14	\$404,434	7.2
Treatment lacked salutary effect	91	27	\$177,436	5.6
Failure to warn of risks of procedure	2			2.5
Wrong patient	5	4	\$85,000	4.2
Aborted procedure	2	1	\$12,500	3.0
Other problem with surgical site	1			2.0
Improper phone of other remote instructions	3	3	\$300,000	7.0
Failure to warn of health hazard	12			7.0
Failed resuscitation	10	5	\$583,000	8.7
Other failure to effectively treat	29	13	\$161,236	6.6
Failure to communicate with patient	2	1	\$50,000	6.5
Premature extubation	2	1	\$175,000	6.5
Failure to ensure proper nutrition or hydration	16	7	\$124,952	8.0
No clear allegation of medical injury	2	1	\$50,000	1.0
Subtotal	284	111	\$195,749	5.6
Unknown treatment issue	166	50	\$331,064	5.2
Patient Safety / Breach of Ethical or Regulatory Standard				
Patient abandonment	6	1	\$153,255	2.8
Assault & battery	22	12	\$65,583	2.5
Breach of patient confidentiality	82	41	\$44,531	1.1
Breach of specific regulation	16	4	\$370,612	1.4
False imprisonment	18	4	\$13,231	1.3
Other legal or ethical misconduct	47	12	\$57,490	1.2

Allegations by Category, 2002-2013				
Allegation	Claimants	Claimants With Payments	Average Indemnity	Average Injury Severity (1-9 Scale)
Religious issues	3	2	\$31,250	2.3
Sexual misconduct	44	18	\$91,736	1.3
Wrongful life / birth	2			1.0
All acts of self-harm	52	28	\$323,121	8.5
Patient harmed third party	3			2.0
Civil rights allegations (primarily from incarcerated population)	297	18	\$251,743	3.1
Injury from aspiration	10	3	\$93,333	8.0
Failure to warn of health hazard	16	2	\$8,750	4.8
Abuse / neglect	7	3	\$153,333	6.7
Insurance coverage or monetary dispute	7	1	\$13,232	1.0
EMTALA violation	2	1	\$2,000	2.0
Fall while under care or on premises	647	396	\$130,585	4.8
Harmed by 3rd party	41	21	\$102,850	4.6
Injury during transporting or repositioning	99	62	\$81,141	4.2
Injury while restraining patient	5	3	\$103,352	4.2
Elopement from facility	9	9	\$262,573	7.4
Other injury not directly related to medical treatment	83	63	\$104,223	4.9
No clear allegation of injury	14	6	\$24,433	1.6
Unknown patient safety issue	4			1.5
Unknown Category				
Unknown allegation	373	97	\$181,003	4.7

Clinical Outcomes, 2002-2013				
Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Emotional distress, pain-no lasting physical effects				
Emotional distress	433	131	\$41,827	1.1
Physical pain, little loss of function	185	62	\$23,230	2.5
Subtotal	618	193	\$35,853	1.5
Tissue and Musculoskeletal Injuries				
Amputation of hands/feet	27	11	\$620,423	5.6
Amputation of two or more limbs	10	6	\$528,064	7.1
Amputation of one limb	117	66	\$519,449	6.1
Full loss of function of limb	21	11	\$413,636	5.8
Amputation of other body part	151	71	\$390,247	5.6
Partial loss of function of limb	53	23	\$323,860	5.2
Skeletal problem complicated by error	197	46	\$149,496	3.7
Disfigurement / cosmetic	47	21	\$149,377	4.0
Amputation of fingers/toes	55	25	\$147,425	5.2
Other morphology problem	314	121	\$140,733	4.4
Soft tissue injury	41	19	\$85,881	3.3
Skeletal problem from error	214	78	\$81,289	3.3
Fracture from error	393	225	\$76,315	3.5
Fracture complicated by error	159	45	\$53,283	4.6
Skin - burns, lacerations, etc	417	229	\$47,805	3.4
Subtotal	2,216	997	\$153,660	4.1
Neurological / nervous system impairment				
Quadriplegia	42	30	\$1,898,397	8.0
Cerebral palsy	50	36	\$1,604,385	7.7
Paraplegia	92	55	\$1,137,133	7.0
Injury caused by stroke	83	40	\$532,942	6.2
Other cognitive or neurological deficit	454	229	\$930,621	6.3
Cauda equine syndrome	13	9	\$634,169	6.0
Hemiplegia	20	10	\$624,130	6.9
Brachial plexus disorders	54	31	\$497,619	5.6
ERBS palsy	21	11	\$441,136	6.0
Cut, perforation, or tear of nerve	35	19	\$275,039	5.3
Other damage to nerve	492	203	\$243,302	4.8
Other nervous system impairment	5	1	\$100,000	5.0
Monoplegia - lower limb	3	1	\$30,000	6.0
Subtotal	1,364	675	\$738,749	5.8
Cardiovascular/ circulatory outcomes				
Internal bleeding	116	36	\$354,989	4.1
Myocardial infarction	43	17	\$255,518	4.7
Damage to veins or arteries	16	4	\$111,797	4.4
Embolism/thrombosis	46	12	\$47,932	4.1
Other ischemic or anoxic event	2	1	\$5,000	4.5
Ruptured aneurism	3			5.7

Clinical Outcomes, 2002-2013				
Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Subtotal	309	110	\$358,804	4.8
Contraction or progression of various conditions while under care				
Contraction - meningitis	11	1	\$1,600,000	4.9
Progression - meningitis	8	5	\$1,080,600	6.1
Contraction - sepsis	40	17	\$502,816	4.5
Progression - cancer	313	146	\$359,019	6.2
Contraction - gangrene / necrotizing condition	27	16	\$231,573	4.7
Contraction - other infection	374	129	\$174,170	3.9
Contraction - peritonitis	11	6	\$159,250	4.5
Progression - other infection	52	13	\$131,817	3.4
Progression - non-infectious condition	67	15	\$103,054	3.2
Progression- staph infection	11	4	\$62,750	3.8
Contraction - staph infection	45	11	\$53,463	3.5
Contraction - hepatitis	5	1	\$50,000	4.4
Contraction - encephalitis	1			4.0
Progression - hepatitis	11			2.0
Progression - gangrene / necrotizing condition	1			4.0
Subtotal	977	364	\$272,650	4.6
Damage to internal organs				
Perm - full loss of organ	24	14	\$706,310	10.2
Perm - partial loss of organ	246	69	\$425,155	5.3
Cut, perforation, tear to internal organ	362	156	\$286,178	4.4
Leakage from internal organ	47	26	\$169,781	4.0
Temp - full loss of organ	17	8	\$166,563	3.9
Temp - partial loss of organ	85	25	\$119,718	3.5
Subtotal	781	298	\$310,764	4.7
Hearing and vision loss				
Full - loss of hearing	2	2	\$1,037,500	6.0
Full - loss of vision	41	23	\$809,376	6.6
Partial - loss of vision	130	57	\$248,097	5.3
Partial - loss of hearing	33	15	\$223,600	5.1
Subtotal	206	97	\$393,672	5.5
Nutritional issues				
Malnutrition / dehydration	4	3	\$31,467	2.8
Subtotal	4	3	\$31,467	2.8
Other / Misc.				
Wrong site surgery	1	1	\$1,000,000	5.0
Coma	7	5	\$930,000	5.6
Accidental / unnecessary sterilization	14	3	\$236,250	5.5
Unnecessary surgery - no complications	63	19	\$213,647	3.9
Partial loss of mobility	7	2	\$187,500	5.0

Clinical Outcomes, 2002-2013				
Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Respiratory distress	62	27	\$181,207	3.8
Additional surgery necessary	687	305	\$130,340	4.4
Unknown	1,592	557	\$127,727	3.3
Injury primarily psychological	16	7	\$103,450	2.1
Unnecessary surgery - complications	11	1	\$50,000	4.2
Legal or ethical issue	7	3	\$13,833	2.1
Subtotal	2,467	930	\$136,988	3.7
Death	2,704	1,515	\$303,799	9.0

Clinical Outcomes by Allegation Category, 2002 - 2013

Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Surgery Related				
Emotional distress	25	7	\$62,286	1.2
Physical pain, little loss of function	22	6	\$40,143	2.9
Skin - burns, lacerations, etc.	128	67	\$46,525	3.4
Soft tissue injury	12	6	\$95,382	3.7
Fracture from error	15	5	\$126,618	3.9
Skeletal problem from error	24	10	\$223,076	4.5
Fracture complicated by error	27	9	\$84,861	4.1
Skeletal problem complicated by error	86	21	\$182,716	4.0
Partial loss of function of limb	32	13	\$361,637	5.4
Full loss of function of limb	14	8	\$532,500	5.7
Amputation of fingers/toes	13	4	\$217,061	5.2
Amputation of hands/feet	3	2	\$375,000	6.3
Amputation of one limb	42	21	\$453,874	6.0
Amputation of two or more limbs	2	2	\$585,000	7.0
Amputation of other body part	63	34	\$416,800	5.5
Disfigurement / cosmetic	42	19	\$152,601	4.1
Other morphology problem	196	78	\$161,311	4.5
Cut, perforation, or tear of nerve	28	15	\$307,867	5.4
Other damage to nerve	278	114	\$306,808	5.0
Cauda equine syndrome	8	5	\$623,494	5.9
Brachial plexus disorders	1	1	\$210,000	5.0
Monoplegia - lower limb	3	1	\$30,000	6.0
Hemiplegia	6	3	\$258,333	7.0
Paraplegia	36	22	\$1,275,790	6.9
Quadriplegia	10	8	\$1,880,863	8.0
other cognitive or neurological deficit	80	35	\$1,029,288	6.3
Damage to veins or arteries	10	2	\$190,094	4.9
Internal bleeding	39	9	\$417,560	4.3
Embolism/thrombosis	12	2	\$128,750	5.1
Ruptured aneurism	1			5.0
Stroke	18	6	\$594,919	6.2
Myocardial infarction	9	3	\$325,000	5.2
Contraction - staph infection	26	8	\$52,137	3.5
Contraction - meningitis	5	1	\$1,600,000	5.2
Contraction - encephalitis	1			4.0
Contraction - peritonitis	9	5	\$186,100	4.1
Contraction - hepatitis	2	1	\$50,000	5.0
Progression - cancer	28	22	\$191,067	5.1
Contraction - sepsis	20	6	\$636,145	4.4
Contraction - gangrene / necrotizing condition	11	6	\$330,417	4.9

Clinical Outcomes by Allegation Category, 2002 - 2013

Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Contraction - other infection	195	55	\$234,644	4.0
Progression - non-infectious condition	4			5.0
Cut, perforation, tear to internal organ	224	108	\$320,835	4.5
Leakage from internal organ	18	8	\$257,500	3.8
Temp - partial loss of organ	26	5	\$151,445	3.7
Temp - full loss of organ	4	1	\$17,500	4.3
Perm - partial loss of organ	87	35	\$427,270	5.4
Perm - full loss of organ	10	6	\$919,083	15.7
Partial loss of mobility	4	1	\$200,000	4.8
Partial - loss of vision	75	31	\$224,186	5.2
Full - loss of vision	11	6	\$728,031	6.6
Partial - loss of hearing	8	6	\$172,917	5.1
Full - loss of hearing	1	1	\$225,000	6.0
Respiratory distress	7	1	\$15,000	3.9
Accidental / unnecessary sterilization	10	2	\$132,500	5.6
Coma	1	1	\$225,000	4.0
Unnecessary surgery - no complications	52	14	\$98,129	3.8
Unnecessary surgery - complications	8	1	\$50,000	4.0
Additional surgery necessary	547	248	\$138,294	4.6
Wrong site surgery	1	1	\$1,000,000	5.0
Unknown	280	96	\$192,926	3.8
Death	526	309	\$358,104	9.0
Subtotal	3,486	1,523	\$300,380	5.3
Anesthesia Related				
Emotional distress	7	4	\$19,382	1.0
Physical pain, little loss of function	12	4	\$56,201	2.1
Skin - burns, lacerations, etc.	3	1	\$3,048	3.0
Fracture from error	17	6	\$1,515	2.7
Skeletal problem from error	46	10	\$23,198	2.4
Fracture complicated by error	8	3	\$5,098	2.5
Skeletal problem complicated by error	1			2.0
Amputation of two or more limbs	1	1	\$690,000	7.0
Amputation of other body part	1			3.0
Cut, perforation, or tear of nerve	1	1	\$502,740	6.0
Other damage to nerve	9	1	\$450,000	5.0
other cognitive or neurological deficit	24	13	\$662,656	6.6
Stroke	1			7.0
Myocardial infarction	1			3.0
Cut, perforation, tear to internal organ	10	3	\$136,667	4.1
Temp - partial loss of organ	1	1	\$1,750	4.0
Perm - partial loss of organ	4	1	\$200,000	5.8
Partial - loss of vision	1	1	\$100,000	5.0

Clinical Outcomes by Allegation Category, 2002 - 2013				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Full - loss of vision	1	1	\$1,667,000	6.0
Respiratory distress	7	3	\$20,000	3.4
Injury primarily psychological	1	1	\$110,000	4.0
Additional surgery necessary	2	2	\$99,215	4.0
Unknown	7	2	\$20,000	3.1
Death	39	27	\$394,904	9.0
Subtotal	205	86	\$282,193	4.6
Medication Related				
Emotional distress	49	16	\$7,577	1.2
Physical pain, little loss of function	45	22	\$20,086	2.5
Skin - burns, lacerations, etc	19	8	\$21,703	3.4
Soft tissue injury	1			3.0
Fracture from error	3	2	\$68,750	3.0
Skeletal problem from error	10	3	\$134,418	3.8
Fracture complicated by error	2	1	\$237,500	5.5
Skeletal problem complicated by error	1			3.0
Partial loss of function of limb	1			6.0
Amputation of fingers/toes	1			5.0
Amputation of hands/feet	1	1	\$55,000	6.0
Amputation of one limb	2	2	\$405,000	6.5
Amputation of other body part	2	2	\$900,000	6.5
Disfigurement / cosmetic	1			4.0
Other morphology problem	3			3.7
Other damage to nerve	4	1	\$197,500	5.8
Cauda equine syndrome	1	1	\$85,000	7.0
Hemiplegia	1	1	\$1,250,000	7.0
Paraplegia	4	1	\$384,466	7.0
Quadriplegia	1	1	\$875,000	8.0
other cognitive or neurological deficit	45	27	\$549,754	5.1
Other nervous system impairment	1	1	\$100,000	5.0
Damage to veins or arteries	1	1	\$27,000	4.0
Internal bleeding	15	8	\$87,519	3.9
Embolism/thrombosis	1			4.0
Stroke	15	5	\$290,000	6.1
Myocardial infarction	9	4	\$92,202	4.6
Other ischemic or anoxic event	1	1	\$5,000	4.0
Progression - cancer	2			6.5
Contraction - sepsis	1	1	\$85,000	5.0
Contraction - gangrene / necrotizing condition	3	2	\$389,587	5.3
Progression - other infection	3	3	\$48,450	3.7
Progression - non-infectious condition	1	1	\$5,000	2.0

Clinical Outcomes by Allegation Category, 2002 - 2013

Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Cut, perforation, tear to internal organ	15	1	\$140,000	4.8
Temp - partial loss of organ	18	8	\$124,620	3.4
Temp - full loss of organ	6	3	\$165,833	3.8
Perm - partial loss of organ	75	9	\$220,278	5.0
Perm - full loss of organ	4	1	\$252,945	6.5
Partial loss of mobility	1	1	\$175,000	5.0
Partial - loss of vision	14	6	\$177,192	5.0
Full - loss of vision	3	1	\$1,804,000	6.7
Partial - loss of hearing	6	3	\$611,667	5.2
Respiratory distress	23	11	\$144,591	3.7
Coma	2	2	\$21,250	3.0
Death for cause NOC	1			4.0
Injury primarily psychological	3	1	\$280,000	3.7
Additional surgery necessary	1			4.0
Unknown	398	179	\$68,993	3.1
Death	206	104	\$272,809	9.0
Subtotal	1,026	446	\$172,338	4.7
Diagnosis Related				
Emotional distress	17	4	\$3,560	1.1
Physical pain, little loss of function	15	2	\$55,000	2.9
Skin - burns, lacerations, etc	5			4.2
Soft tissue injury	1	1	\$30,000	3.0
Fracture from error	3	1	\$32,500	3.3
Skeletal problem from error	24	7	\$221,286	3.8
Fracture complicated by error	73	22	\$46,035	3.5
Skeletal problem complicated by error	38	9	\$164,602	4.0
Partial loss of function of limb	11	6	\$295,000	5.1
Full loss of function of limb	2			5.5
Amputation of fingers/toes	5	3	\$85,833	5.0
Amputation of hands/feet	8	3	\$176,667	5.5
Amputation of one limb	27	18	\$677,128	6.1
Amputation of two or more limbs	2	2	\$350,000	7.0
Amputation of other body part	52	26	\$392,523	5.5
Disfigurement / cosmetic	2	1	\$200,000	4.0
Other morphology problem	52	16	\$68,044	4.0
Cut, perforation, or tear of nerve	1			5.0
Other damage to nerve	33	14	\$233,750	4.8
Cauda equine syndrome	3	3	\$835,015	6.3
Cerebral palsy	1			7.0
Hemiplegia	6	3	\$141,667	6.8
Paraplegia	35	19	\$1,330,443	6.9
Quadriplegia	10	7	\$2,462,143	8.0

Clinical Outcomes by Allegation Category, 2002 - 2013

Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
other cognitive or neurological deficit	101	45	\$634,958	6.1
Other nervous system impairment	1			6.0
Damage to veins or arteries	1			3.0
Internal bleeding	20	4	\$207,500	4.3
Embolism/thrombosis	9			4.3
Ruptured aneurism	1			7.0
Stroke	26	15	\$652,000	6.4
Myocardial infarction	16	9	\$330,000	4.8
Contraction - staph infection	1			4.0
Progression- staph infection	7	3	\$75,333	3.9
Progression - meningitis	8	5	\$1,080,600	6.1
Contraction - peritonitis	1	1	\$25,000	5.0
Progression - cancer	268	118	\$401,341	6.4
Contraction - sepsis	6	5	\$375,000	3.8
Contraction - gangrene / necrotizing condition	1			3.0
Progression - gangrene / necrotizing condition	1			4.0
Contraction - other infection	6	2	\$590,000	4.2
Progression - other infection	25	6	\$200,742	4.0
Progression - non-infectious condition	33	11	\$105,180	3.7
Cut, perforation, tear to internal organ	22	11	\$187,912	4.1
Leakage from internal organ	26	16	\$128,832	4.0
Temp - partial loss of organ	18	3	\$218,333	3.5
Temp - full loss of organ	4	3	\$199,167	3.8
Perm - partial loss of organ	44	16	\$322,264	5.4
Perm - full loss of organ	6	6	\$603,483	6.5
Partial - loss of vision	18	10	\$363,860	5.7
Full - loss of vision	16	11	\$689,366	6.8
Partial - loss of hearing	7	2	\$97,500	4.9
Full - loss of hearing	1	1	\$1,850,000	6.0
Respiratory distress	6	3	\$151,111	4.8
Accidental / unnecessary sterilization	1	1	\$443,750	6.0
Injury primarily psychological	1			1.0
Legal or ethical issue	1	1	\$35,000	1.0
Unnecessary surgery - no complications	10	4	\$221,375	4.1
Unnecessary surgery - complications	3			4.7
Additional surgery necessary	33	11	\$100,682	3.9
Unknown	96	24	\$203,008	3.7
Death	706	400	\$359,728	9.0
Subtotal	1,977	914	\$393,414	6.5
Treatment Related				
Emotional distress	50	6	\$14,000	1.1

Clinical Outcomes by Allegation Category, 2002 - 2013

Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Physical pain, little loss of function	39	14	\$13,086	2.4
Skin - burns, lacerations, etc	163	89	\$43,205	3.4
Soft tissue injury	12	3	\$182,333	3.5
Fracture from error	40	17	\$25,691	3.4
Skeletal problem from error	48	13	\$80,279	3.6
Fracture complicated by error	35	4	\$25,767	8.4
Skeletal problem complicated by error	49	11	\$80,224	3.2
Partial loss of function of limb	7	2	\$96,250	4.3
Full loss of function of limb	3	2	\$95,000	6.3
Amputation of fingers/toes	29	14	\$154,909	5.2
Amputation of hands/feet	12	3	\$1,718,217	5.4
Amputation of one limb	41	20	\$390,200	6.0
Amputation of two or more limbs	4			7.3
Amputation of other body part	23	6	\$161,250	6.5
Disfigurement / cosmetic	2	1	\$37,500	3.5
Other morphology problem	57	24	\$122,781	4.3
Cut, perforation, or tear of nerve	4	2	\$27,500	4.5
Other damage to nerve	94	39	\$180,677	4.4
Cauda equine syndrome	1			5.0
Brachial plexus disorders	4	1	\$10,000	2.5
Hemiplegia	5	1	\$200,000	6.6
Paraplegia	12	9	\$601,340	7.0
Quadriplegia	2	2	\$1,150,000	8.0
other cognitive or neurological deficit	44	30	\$1,211,532	6.0
Damage to veins or arteries	2			4.0
Internal bleeding	18	4	\$9,188	3.8
Embolism/thrombosis	12	6	\$18,763	3.7
Ruptured aneurism	1			5.0
Stroke	21	12	\$520,265	5.9
Myocardial infarction	7	1	\$30,000	4.0
Other ischemic or anoxic event	1			5.0
Contraction - staph infection	11			3.5
Progression- staph infection	2	1	\$25,000	2.5
Contraction - meningitis	3			4.7
Contraction - peritonitis	1			7.0
Contraction - hepatitis	3			4.0
Progression - hepatitis	11			2.0
Progression - cancer	14	6	\$142,495	5.4
Contraction - sepsis	12	5	\$554,200	5.1
Contraction - gangrene / necrotizing condition	6	4	\$218,750	4.7
Contraction - other infection	151	61	\$125,108	3.9

Clinical Outcomes by Allegation Category, 2002 - 2013				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Progression - other infection	16	4	\$90,955	2.9
Progression - non-infectious condition	20	3	\$127,941	2.6
Cut, perforation, tear to internal organ	70	24	\$183,880	4.2
Leakage from internal organ	2	1	\$275,000	5.0
Temp - partial loss of organ	18	6	\$77,833	3.3
Temp - full loss of organ	2			3.5
Perm - partial loss of organ	18	5	\$1,228,500	5.4
Perm - full loss of organ	2	1	\$500,000	5.0
Malnutrition / dehydration	4	3	\$31,467	2.8
Partial loss of mobility	2			5.5
Partial - loss of vision	15	5	\$356,500	5.6
Full - loss of vision	8	3	\$731,144	6.4
Partial - loss of hearing	10	5	\$96,300	5.1
Respiratory distress	13	6	\$383,542	3.7
Coma	2	1	\$1,862,500	7.5
Injury primarily psychological	1			1.0
Legal or ethical issue	1			3.0
Unnecessary surgery - no complications	1	1	\$1,800,000	5.0
Additional surgery necessary	56	20	\$69,715	3.8
Unknown	287	84	\$123,479	3.2
Death	607	329	\$250,330	9.0
Subtotal	2,211	914	\$233,832	5.4
IV and Blood Products Related				
Emotional distress	1	1	\$15,000	1.0
Physical pain, little loss of function	3	2	\$8,250	3.3
Skin - burns, lacerations, etc	23	12	\$80,932	3.7
Soft tissue injury	2	2	\$46,971	4.0
Fracture from error	1			4.0
Skeletal problem from error	7	4	\$24,500	3.4
Partial loss of function of limb	1	1	\$135,000	6.0
Full loss of function of limb	2	1	\$100,000	6.0
Amputation of fingers/toes	2	1	\$300,000	5.0
Amputation of hands/feet	2	1	\$150,000	6.0
Amputation of one limb	1	1	\$1,100,000	6.0
Amputation of other body part	1	1	\$100,000	6.0
Other morphology problem	1	1	\$31,000	5.0
Cut, perforation, or tear of nerve	1	1	\$50,000	5.0
Other damage to nerve	52	27	\$79,917	4.3
Quadriplegia	1	1	\$2,000,000	8.0
other cognitive or neurological deficit	1	1	\$1,000,000	8.0
Damage to veins or arteries	2	1	\$40,000	3.0
Internal bleeding	1			3.0

Clinical Outcomes by Allegation Category, 2002 - 2013				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Embolism/thrombosis	10	4	\$51,275	3.6
Contraction - staph infection	5	2	\$18,000	3.4
Contraction - gangrene / necrotizing condition	4	4	\$17,125	4.3
Contraction - other infection	9	7	\$38,400	3.7
Temp - partial loss of organ	1			3.0
Respiratory distress	1	1	\$140,000	3.0
Additional surgery necessary	9	7	\$51,643	3.9
Unknown	20	13	\$120,837	3.7
Death	10	6	\$147,000	9.0
Subtotal	174	103	\$115,448	4.3
Pregnancy & Childbirth				
Death	196	103	\$367,463	9.0
Emotional distress	10	2	\$10,000	1.0
Physical pain, little loss of function	14	3	\$17,833	2.8
Skin - burns, lacerations, etc	14	8	\$51,756	3.2
Fracture from error	2			3.0
Skeletal problem from error	1			1.0
Amputation of fingers/toes	1	1	\$55,000	5.0
Amputation of other body part	6	1	\$10,000	4.7
Other morphology problem	5	3	\$153,333	5.8
Other damage to nerve	16	3	\$126,667	4.9
ERBS palsy	21	11	\$441,136	6.0
Brachial plexus disorders	48	29	\$524,351	6.0
Cerebral palsy	49	36	\$1,604,385	7.7
Hemiplegia	2	2	\$1,795,649	7.0
Paraplegia	6	5	\$1,090,000	7.2
Quadriplegia	18	11	\$1,772,273	8.0
other cognitive or neurological deficit	148	72	\$1,168,612	6.8
Other nervous system impairment	3			4.7
Internal bleeding	3			3.0
Embolism/thrombosis	1			3.0
Contraction - staph infection	2	1	\$135,000	3.5
Progression- staph infection	2			5.0
Contraction - meningitis	3			4.7
Contraction - gangrene / necrotizing condition	2			4.0
Contraction - other infection	10	2	\$23,550	3.5
Cut, perforation, tear to internal organ	19	9	\$329,278	4.6
Leakage from internal organ	1	1	\$18,000	5.0
Temp - partial loss of organ	1	1	\$85,000	3.0
Temp - full loss of organ	1	1	\$220,000	4.0
Perm - partial loss of organ	5	2	\$75,000	5.8

Clinical Outcomes by Allegation Category, 2002 - 2013				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Perm - full loss of organ	2			6.0
Partial - loss of vision	3	1	\$155,000	5.7
Full - loss of vision	2	1	\$1,000,000	6.5
Respiratory distress	1			4.0
Accidental / unnecessary sterilization	3			5.0
Death for cause NOC	7	4	\$95,000	3.9
Injury primarily psychological	1	1	\$20,400	4.0
Additional surgery necessary	35	14	\$160,372	3.8
Unknown	38	15	\$368,670	4.8
Subtotal	702	343	\$707,532	6.6
Patient Safety				
Emotional distress	274	91	\$51,773	1.1
Physical pain, little loss of function	35	9	\$18,836	2.2
Skin - burns, lacerations, etc	60	43	\$55,999	3.1
Soft tissue injury	13	7	\$55,500	2.8
Fracture from error	311	194	\$82,072	3.5
Skeletal problem from error	53	31	\$25,288	3.1
Fracture complicated by error	14	6	\$44,229	3.2
Skeletal problem complicated by error	22	5	\$135,180	3.1
Partial loss of function of limb	1	1	\$650,000	6.0
Amputation of fingers/toes	4	2	\$18,078	5.3
Amputation of hands/feet	1	1	\$185,000	6.0
Amputation of one limb	3	3	\$908,333	6.0
Amputation of two or more limbs	1	1	\$608,384	7.0
Amputation of other body part	2			7.0
Other morphology problem	1			5.0
Other damage to nerve	3	1	\$10,000	4.0
Brachial plexus disorders	1			4.0
other cognitive or neurological deficit	7	5	\$654,000	6.0
Internal bleeding	20	11	\$677,696	4.3
Embolism/thrombosis	1			3.0
Stroke	2	2	\$137,500	6.0
Myocardial infarction	1			5.0
Progression - cancer	1			8.0
Contraction - sepsis	1			5.0
Contraction - other infection	2	1	\$10,000	2.0
Progression - other infection	8			2.3
Progression - non-infectious condition	9			2.3
Cut, perforation, tear to internal organ	2			3.0
Temp - partial loss of organ	2	1	\$30,000	3.5
Perm - partial loss of organ	11			5.0
Partial - loss of vision	3	2	\$176,250	4.0

Clinical Outcomes by Allegation Category, 2002 - 2013

Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Partial - loss of hearing	1			5.0
Respiratory distress	3	2	\$166,250	5.0
Coma	2	1	\$2,520,000	7.0
Injury primarily psychological	9	4	\$78,438	1.4
Legal or ethical issue	5	2	\$3,250	2.2
Additional surgery necessary	4	3	\$50,000	3.8
Unknown	207	80	\$61,276	3.0
Death	290	195	\$194,472	9.0
Subtotal	1,390	704	\$123,690	4.1
Unknown				
Skin - burns, lacerations, etc.	3	1	\$15,000	4.7
Fracture from error	1			3.0
Skeletal problem from error	1			4.0
Amputation of one limb	1	1	\$125,000	6.0
Amputation of other body part	1	1	\$453,238	5.0
Other damage to nerve	3	3	\$300,000	5.0
other cognitive or neurological deficit	4	1	\$300,000	5.3
Contraction - other infection	1	1	\$425,000	5.0
Perm - partial loss of organ	2	1	\$750,000	4.5
Partial - loss of vision	1	1	\$100,000	6.0
Partial - loss of hearing	2			6.0
Respiratory distress	1			3.0
Unknown	255	61	\$176,941	2.9
Death	116	38	\$191,693	9.0
Subtotal	392	109	\$194,000	4.8

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Surgery Related				
Emotional distress	23	6	\$67,667	1.2
Physical pain, little loss of function	23	6	\$40,143	3.0
Skin - burns, lacerations, etc.	120	64	\$42,914	3.3
Soft tissue injury	12	6	\$95,382	3.5
Fracture from error	15	5	\$126,618	3.9
Skeletal problem from error	19	9	\$87,227	4.4
Fracture complicated by error	25	9	\$84,861	4.2
Skeletal problem complicated by error	74	17	\$197,473	4.0
Partial loss of function of limb	26	11	\$366,026	5.3
Full loss of function of limb	13	7	\$594,286	5.8
Amputation of fingers/toes	14	5	\$263,649	5.3
Amputation of hands/feet	3	2	\$375,000	6.3
Amputation of one limb	41	19	\$450,072	6.0
Amputation of two or more limbs	2	2	\$585,000	7.0
Loss of other body part	53	31	\$433,157	5.5
Disfigurement / cosmetic	42	19	\$152,601	4.0
Other morphology problem	183	77	\$161,808	4.5
Cut, perforation, or tear of nerve	28	16	\$291,750	5.4
Other damage to nerve	258	103	\$301,879	4.9
Cauda equine syndrome	8	5	\$323,494	5.6
Brachial plexus disorders	1	1	\$210,000	5.0
Monoplegia - lower limb	3	1	\$30,000	5.7
Hemiplegia	5	3	\$500,000	7.0
Paraplegia	32	19	\$1,538,546	6.9
Quadriplegia	11	9	\$2,091,322	8.0
Other cognitive or neurological deficit	73	31	\$936,293	6.3
Other nervous system impairment	1	1	\$165,000	4.0
Damage to veins or arteries	9	2	\$190,094	4.6
Internal bleeding	40	11	\$374,367	4.3
Embolism/thrombosis	11	2	\$128,750	5.0
Ruptured aneurism	1			5.0
Stroke	15	6	\$594,919	5.9
Myocardial infarction	8	2	\$350,000	4.8
Contraction - staph infection	26	7	\$53,157	3.5
Contraction - meningitis	5	1	\$1,600,000	5.2
Contraction - encephalitis	1			4.0
Contraction - peritonitis	9	5	\$186,100	4.1
Contraction - hepatitis	2	1	\$50,000	5.0
Progression - cancer	29	25	\$203,864	5.1
Contraction - sepsis	17	5	\$684,374	4.4
Contraction - gangrene	8	4	\$95,625	4.4
Contraction - other infection	181	56	\$238,892	4.0

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Progression - non-infectious condition	4			4.0
Cut, perforation, tear to internal organ	200	99	\$316,441	4.4
Leakage from internal organ	18	8	\$257,500	3.7
Temporary partial loss of organ	26	5	\$151,445	3.6
Temporary full loss of organ	2			3.5
Permanent partial loss of organ	84	37	\$421,742	5.3
Permanent full loss of organ	11	7	\$919,929	14.9
Partial loss of mobility	4	1	\$200,000	4.8
Partial loss of vision	69	28	\$238,382	5.2
Full loss of vision	11	5	\$833,637	6.5
Partial loss of hearing	8	6	\$172,917	5.1
Full loss of hearing	1	1	\$225,000	6.0
Respiratory distress	8	1	\$15,000	3.8
Accidental / unnecessary sterilization	10	2	\$132,500	5.0
Coma	2	2	\$362,500	6.0
Unnecessary surgery - no complications	51	17	\$195,106	3.8
Unnecessary surgery - complications	9	1	\$50,000	3.9
Additional surgery necessary	495	225	\$139,385	3.8
Wrong site surgery	1	1	\$1,000,000	5.0
Unknown	227	77	\$164,472	3.8
Death	485	283	\$331,182	9.0
Subtotal	3,197	1,418	\$296,554	5.1
Anesthesia Related				
Emotional distress	7	4	\$19,382	1.0
Physical pain, little loss of function	12	4	\$56,201	2.1
Skin - burns, lacerations, etc.	3	1	\$3,048	3.0
Fracture from error	15	5	\$1,118	2.6
Skeletal problem from error	38	9	\$2,164	2.4
Fracture complicated by error	6	3	\$5,098	2.7
Skeletal problem complicated by error	1			2.0
Amputation of two or more limbs	1	1	\$690,000	7.0
Removal of other body part	1			3.0
Cut, perforation, or tear of nerve	1	1	\$502,740	6.0
Other damage to nerve	8	1	\$450,000	4.9
other cognitive or neurological deficit	21	13	\$662,656	6.5
Stroke	1			7.0
Myocardial infarction	1			3.0
Cut, perforation, tear to internal organ	11	4	\$127,500	4.3
Temporary partial loss of organ	1	1	\$1,750	4.0
Permanent partial loss of organ	2	1	\$200,000	5.5
Partial loss of vision	1	1	\$100,000	5.0
Full loss of vision	1	1	\$1,667,000	6.0
Respiratory distress	8	3	\$20,000	3.5

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Injury primarily psychological	1	1	\$110,000	1.0
Additional surgery necessary	1	1	\$98,430	4.0
Unknown	6	2	\$20,000	3.0
Death	36	26	\$385,631	9.0
Subtotal	184	83	\$282,128	4.6
Medication Related				
Emotional distress	49	15	\$6,549	1.3
Physical pain, little loss of function	46	23	\$23,083	2.5
Skin - burns, lacerations, etc.	14	6	\$25,083	3.0
Soft tissue injury	1			3.0
Fracture from error	3	2	\$68,750	3.0
Skeletal problem from error	10	3	\$134,418	3.8
Fracture complicated by error	2	1	\$237,500	5.5
Skeletal problem complicated by error	1			3.0
Partial loss of function of limb	1			6.0
Amputation of fingers/toes	1			5.0
Amputation of hands/feet	1	1	\$55,000	6.0
Amputation of one limb	2	2	\$405,000	6.5
Removal of other body part	2	2	\$900,000	6.5
Disfigurement / cosmetic	1			4.0
Other morphology problem	3			3.3
Other damage to nerve	5	2	\$473,750	5.8
Cauda equine syndrome	1	1	\$85,000	7.0
Paraplegia	4	1	\$384,466	7.0
Quadriplegia	1	1	\$875,000	8.0
other cognitive or neurological deficit	39	22	\$386,403	4.9
Other nervous system impairment	1	1	\$100,000	5.0
Damage to veins or arteries	1	1	\$27,000	4.0
Internal bleeding	11	7	\$78,593	4.0
Embolism/thrombosis	1			3.0
Stroke	15	5	\$290,000	5.9
Myocardial infarction	10	5	\$253,761	4.7
Other ischemic or anoxic event	1	1	\$5,000	4.0
Progression - cancer	2			6.5
Contraction - sepsis	1	1	\$85,000	5.0
Contraction - gangrene / necrotizing condition	1	1	\$709,173	6.0
Progression - other infection	2	2	\$72,500	4.5
Progression - non-infectious condition	1	1	\$5,000	2.0
Cut, perforation, tear to internal organ	14			4.7
Temporary partial loss of organ	15	5	\$188,662	3.2
Temporary full loss of organ	6	2	\$153,750	4.0
Permanent partial loss of organ	74	7	\$164,286	4.9

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Permanent full loss of organ	4	1	\$252,945	6.5
Partial loss of mobility	1	1	\$175,000	3.0
Partial loss of vision	12	4	\$177,500	5.4
Full loss of vision	3	1	\$1,804,000	6.7
Partial loss of hearing	4	2	\$299,000	4.5
Respiratory distress	21	10	\$159,025	3.7
Coma	2	2	\$21,250	3.0
Death for cause NOC	1			4.0
Injury primarily psychological	3	1	\$280,000	3.7
Unknown	365	169	\$70,290	3.2
Death	186	92	\$300,123	9.0
Subtotal	945	404	\$165,111	4.7
Diagnosis Related				
Emotional distress	16	4	\$3,560	1.1
Physical pain, little loss of function	13	1	\$100,000	2.9
Skin - burns, lacerations, etc.	4			4.5
Soft tissue injury	1	1	\$30,000	3.0
Fracture from error	3	1	\$32,500	3.3
Skeletal problem from error	23	6	\$216,500	3.8
Fracture complicated by error	69	23	\$48,446	3.4
Skeletal problem complicated by error	34	8	\$138,741	4.1
Partial loss of function of limb	9	6	\$171,250	5.0
Full loss of function of limb	4	1	\$750,000	5.8
Amputation of fingers/toes	6	4	\$114,375	5.0
Amputation of hands/feet	8	3	\$176,667	5.5
Amputation of one limb	27	20	\$679,415	6.1
Amputation of two or more limbs	2	2	\$350,000	7.0
Removal of other body part	44	21	\$405,028	5.5
Disfigurement / cosmetic	2	1	\$200,000	4.0
Other morphology problem	47	14	\$139,128	4.0
Cut, perforation, or tear of nerve	1			2.0
Other damage to nerve	31	14	\$211,786	4.6
Cauda equine syndrome	2	2	\$502,523	5.5
Cerebral palsy	1	1	\$250,000	7.0
Hemiplegia	4	1	\$150,000	6.8
Paraplegia	32	18	\$1,262,765	6.8
Quadriplegia	8	6	\$1,795,833	8.0
Other cognitive or neurological deficit	91	42	\$738,096	6.1
Other nervous system impairment	1			6.0
Damage to veins or arteries	1			3.0
Internal bleeding	18	3	\$226,667	4.2
Embolism/thrombosis	9			4.4
Ruptured aneurism	2	1	\$1,375	5.5

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Stroke	28	16	\$617,500	6.2
Myocardial infarction	11	6	\$455,833	5.0
Contraction - staph infection	1			4.0
Progression- staph infection	7	3	\$75,333	3.9
Progression - meningitis	8	6	\$2,264,667	6.5
Contraction - peritonitis	1	1	\$25,000	5.0
Progression - cancer	251	114	\$356,551	6.2
Contraction - sepsis	6	5	\$375,000	3.8
Contraction - other infection	6	2	\$178,225	4.0
Progression - other infection	21	5	\$280,000	3.9
Progression - non-infectious condition	30	9	\$128,000	3.7
Cut, perforation, tear to internal organ	21	12	\$184,753	4.1
Leakage from internal organ	26	16	\$193,832	4.1
Temporary partial loss of organ	18	3	\$218,333	3.5
Temporary full loss of organ	4	2	\$280,000	3.8
Permanent partial loss of organ	42	16	\$322,264	5.2
Permanent full loss of organ	7	7	\$588,699	6.6
Partial loss of mobility	1			5.0
Partial loss of vision	18	12	\$425,300	6.0
Full loss of vision	10	7	\$622,357	6.8
Partial loss of hearing	7	2	\$97,500	4.9
Full loss of hearing	1	1	\$1,850,000	6.0
Respiratory distress	4	1	\$28,333	4.8
Accidental / unnecessary sterilization	1	1	\$443,750	6.0
Coma	1	1	\$75,000	8.0
Injury primarily psychological	1			1.0
Legal or ethical issue	1	1	\$35,000	1.0
Unnecessary surgery - no complications	10	4	\$221,375	4.3
Unnecessary surgery - complications	3			5.3
Additional surgery necessary	35	10	\$107,250	3.9
Unknown	69	19	\$138,927	3.8
Death	654	372	\$360,409	9.0
Subtotal	1,817	858	\$395,588	6.5
Treatment Related				
Emotional distress	23	6	\$8,500	1.1
Physical pain, little loss of function	29	12	\$15,075	2.6
Skin - burns, lacerations, etc.	152	83	\$45,056	3.4
Soft tissue injury	12	3	\$182,333	3.5
Fracture from error	35	16	\$24,922	3.4
Skeletal problem from error	44	13	\$80,279	3.6
Fracture complicated by error	18	4	\$25,767	3.5
Skeletal problem complicated by error	31	10	\$84,746	3.9
Partial loss of function of limb	6	1	\$100,000	3.8

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Full loss of function of limb	3	2	\$95,000	6.3
Amputation of fingers/toes	25	12	\$126,560	5.1
Amputation of hands/feet	12	3	\$1,718,217	5.4
Amputation of one limb	37	19	\$387,053	6.0
Amputation of two or more limbs	4			7.3
Removal of other body part	23	6	\$161,250	6.5
Disfigurement / cosmetic	2	1	\$37,500	3.5
Other morphology problem	49	19	\$111,671	4.2
Cut, perforation, or tear of nerve	3	1	\$5,000	4.3
Other damage to nerve	81	33	\$190,337	4.4
Cauda equine syndrome	1			5.0
Brachial plexus disorders	3	1	\$10,000	2.7
Hemiplegia	6	2	\$225,000	6.7
Paraplegia	12	8	\$438,383	7.0
Quadriplegia	2	2	\$1,150,000	8.0
other cognitive or neurological deficit	36	25	\$1,186,238	5.9
Damage to veins or arteries	2			4.0
Internal bleeding	16	3	\$321,000	3.8
Embolism/thrombosis	11	6	\$18,763	3.5
Ruptured aneurism	1			5.0
Stroke	19	10	\$519,018	5.8
Myocardial infarction	6	1	\$30,000	4.2
Other ischemic or anoxic event	1			5.0
Contraction - staph infection	9	1	\$35,000	3.6
Progression- staph infection	1	1	\$25,000	3.0
Contraction - meningitis	3			4.7
Contraction - peritonitis	1			7.0
Contraction - hepatitis	3			6.0
Progression - hepatitis	2			3.0
Progression - cancer	13	7	\$189,996	5.5
Contraction - sepsis	11	5	\$554,200	4.9
Contraction - gangrene / necrotizing condition	6	4	\$218,750	4.5
Contraction - other infection	136	58	\$121,234	3.8
Progression - other infection	6	2	\$115,000	3.7
Progression - non-infectious condition	12	3	\$127,941	2.5
Cut, perforation, tear to internal organ	63	22	\$191,470	4.1
Leakage from internal organ	2	1	\$275,000	5.0
Temporary partial loss of organ	18	6	\$77,833	3.4
Temporary full loss of organ	1			3.0
Permanent partial loss of organ	16	5	\$1,283,500	5.4
Permanent full loss of organ	2	1	\$500,000	5.0
Malnutrition / dehydration	4	3	\$31,467	2.8
Partial loss of mobility	2			5.5

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Partial loss of vision	14	4	\$372,500	5.6
Full loss of vision	7	2	\$846,716	6.3
Partial loss of hearing	9	5	\$96,300	5.0
Respiratory distress	11	5	\$101,165	3.4
Coma	2	1	\$1,862,500	7.5
Injury primarily psychological	2	1	\$100,000	2.0
Legal or ethical issue	1			2.0
Additional surgery necessary	53	18	\$71,906	3.8
Unknown	147	62	\$131,058	3.5
Death	531	296	\$229,932	9.0
Subtotal	1,793	815	\$222,234	5.5
IV and Blood Products Related				
Emotional distress	1	1	\$15,000	1.0
Physical pain, little loss of function	2	1	\$15,000	4.0
Skin - burns, lacerations, etc.	17	8	\$56,625	3.6
Soft tissue injury	2	2	\$46,971	4.0
Fracture from error	1			4.0
Skeletal problem from error	7	4	\$24,500	3.4
Partial loss of function of limb	1	1	\$135,000	6.0
Full loss of function of limb	2	1	\$100,000	6.0
Amputation of fingers/toes	1	1	\$150,000	6.0
Amputation of hands/feet	1	1	\$150,000	6.0
Amputation of one limb	1	1	\$1,100,000	6.0
Removal of other body part	1	1	\$100,000	6.0
Other morphology problem	1	1	\$31,000	5.0
Cut, perforation, or tear of nerve	1	1	\$50,000	5.0
Other damage to nerve	44	24	\$79,490	4.3
other cognitive or neurological deficit	1	1	\$1,000,000	8.0
Damage to veins or arteries	2	1	\$40,000	3.0
Internal bleeding	1			3.0
Embolism/thrombosis	11	4	\$51,275	3.5
Stroke	1	1	\$275,000	4.0
Contraction - staph infection	5	2	\$18,000	3.4
Contraction - gangrene / necrotizing condition	4	4	\$17,125	4.3
Contraction - other infection	8	6	\$35,633	3.8
Temporary partial loss of organ	1			3.0
Respiratory distress	1	1	\$140,000	3.0
Additional surgery necessary	9	6	\$55,250	3.8
Unknown	19	12	\$130,782	3.7
Death	10	5	\$121,400	9.0
Subtotal	156	91	\$97,637	4.3
Pregnancy & Childbirth				

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Emotional distress	6	1	\$12,500	1.0
Physical pain, little loss of function	3	1	\$20,000	2.7
Skin - burns, lacerations, etc.	5	3	\$80,500	3.0
Fracture from error	2			3.0
Amputation of fingers/toes	1	1	\$55,000	5.0
Removal of other body part	2	1	\$10,000	5.0
Other morphology problem	5	3	\$153,333	5.8
Other damage to nerve	10	1	\$250,000	5.2
ERBS palsy	22	12	\$571,042	5.5
Brachial plexus disorders	42	24	\$561,716	5.8
Cerebral palsy	49	35	\$1,601,082	7.5
Paraplegia	6	5	\$1,090,000	7.2
Quadriplegia	19	11	\$1,772,273	8.0
other cognitive or neurological deficit	134	66	\$1,260,092	6.9
Other nervous system impairment	3			4.7
Internal bleeding	2			4.5
Progression- staph infection	2			5.0
Contraction - meningitis	1			6.0
Contraction - other infection	1	1	\$29,600	5.0
Cut, perforation, tear to internal organ	1	1	\$150,000	5.0
Leakage from internal organ	1			3.0
Temporary partial loss of organ	1	1	\$85,000	3.0
Temporary full loss of organ	1	1	\$220,000	4.0
Permanent partial loss of organ	1			6.0
Partial loss of vision	3	1	\$155,000	5.7
Full loss of vision	1			6.0
Respiratory distress	2	1	\$75,000	4.5
Death for cause NOC	1			5.0
Additional surgery necessary	3	1	\$113,851	4.7
Unknown	29	12	\$428,546	4.8
Death	8	4	\$750,000	9.0
Death	24	16	\$906,705	9.0
Emotional distress	4	1	\$7,500	1.0
Physical pain, little loss of function	10	2	\$16,750	2.8
Skin - burns, lacerations, etc.	6	4	\$40,638	3.0
Removal of other body part	3			4.3
Cut, perforation, or tear of nerve	1			4.0
Other damage to nerve	5	1	\$65,000	4.4
Brachial plexus disorders	1			7.0
Hemiplegia	1	1	\$2,500,000	7.0
other cognitive or neurological deficit	5	1	\$650,000	6.0
Internal bleeding	2			3.5
Embolism/thrombosis	1			3.0

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Contraction - staph infection	1	1	\$135,000	3.0
Contraction - meningitis	1			4.0
Contraction - gangrene / necrotizing condition	2			4.0
Contraction - other infection	9	1	\$17,500	3.1
Cut, perforation, tear to internal organ	18	8	\$351,688	4.4
Leakage from internal organ	1	1	\$18,000	5.0
Permanent partial loss of organ	4	2	\$75,000	5.8
Permanent full loss of organ	1			6.0
Full loss of vision	1			7.0
Accidental / unnecessary sterilization	3			5.0
Injury primarily psychological	1	1	\$20,400	4.0
Additional surgery necessary	31	12	\$229,017	3.8
Unknown	2	1	\$62,500	4.5
Death	157	82	\$239,906	8.7
Subtotal	662	322	\$739,335	6.6
Patient Safety				
Emotional distress	246	67	\$42,559	1.1
Physical pain, little loss of function	40	8	\$19,941	2.2
Skin - burns, lacerations, etc.	56	39	\$34,948	3.0
Soft tissue injury	13	7	\$55,500	2.8
Fracture from error	293	180	\$82,500	3.5
Skeletal problem from error	49	30	\$26,048	3.0
Fracture complicated by error	27	5	\$35,175	9.7
Skeletal problem from error	49	30	\$26,048	3.0
Skeletal problem complicated by error	34	6	\$120,817	2.6
Amputation of fingers/toes	3	2	\$18,078	5.0
Amputation of hands/feet	1	1	\$185,000	6.0
Amputation of one limb	7	3	\$908,333	6.1
Amputation of two or more limbs	1	1	\$608,384	7.0
Removal of other body part	2			7.0
Other morphology problem	3	1	\$5,000	3.3
Other damage to nerve	4	1	\$10,000	2.5
Brachial plexus disorders	1			4.0
other cognitive or neurological deficit	9	5	\$654,000	6.0
Internal bleeding	16	8	\$42,500	3.7
Embolism/thrombosis	1			3.0
Stroke	1	1	\$210,000	4.0
Myocardial infarction	2			5.0
Contraction - staph infection	2			3.5
Progression- staph infection	1			2.0
Progression - meningitis	1			3.0
Contraction - hepatitis	1			1.0

Type of Injury by Source of Injury				
Outcome	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Progression - hepatitis	9			1.8
Progression - cancer	4			5.8
Contraction - sepsis	1			5.0
Contraction - other infection	3	1	\$10,000	2.7
Progression - other infection	15	1	\$125,000	2.3
Progression - non-infectious condition	16			2.3
Cut, perforation, tear to internal organ	2			3.0
Temporary partial loss of organ	2	1	\$30,000	3.0
Permanent partial loss of organ	11			5.0
Partial loss of vision	3	2	\$176,250	4.0
Full loss of vision	1			6.0
Partial loss of hearing	2			5.0
Respiratory distress	2	1	\$330,000	5.0
Coma	2	1	\$2,520,000	7.0
Injury primarily psychological	9	4	\$78,438	1.4
Legal or ethical issue	5	2	\$3,250	2.2
Additional surgery necessary	6	3	\$50,000	3.8
Unknown	206	70	\$66,577	2.9
Death	271	182	\$197,029	9.0
Subtotal	1,384	633	\$115,390	4.1
Unknown origin of injury				
Skin - burns, lacerations, etc.	2	1	\$15,000	5.5
Fracture from error	1			3.0
Amputation of one limb	1	1	\$125,000	6.0
Removal of other body part	1	1	\$453,238	5.0
Other damage to nerve	3	3	\$300,000	5.0
other cognitive or neurological deficit	3	1	\$300,000	5.3
Permanent partial loss of organ	1			6.0
Partial loss of hearing	2			6.0
Respiratory distress	1			3.0
Death	99	30	\$199,793	9.0
Unknown injury	465	110	\$178,117	3.5
Subtotal	579	417	\$186,258	4.5

Section IX

Premium and Loss Data by Company

This section contains the written premium, earned premium, paid losses, incurred losses, market share and loss ratio of all licensed medical malpractice writers in Missouri (i.e. excluding excess and surplus lines carriers). The data were derived from the Missouri Supplement to the Annual Statement. Data are presented for five market segments:

Physicians & Surgeons

Hospitals

Dentists

Nurses

All Other

The reports are presented in descending order of market share by company. The data presented in this exhibit is independent from the claim data used in the preceding tables.

All Medical Malpractice

NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
0861	27642	Missouri Hospital Plan	20.9%	\$25,185,824	\$24,821,599	\$3,603,985	\$6,657,127	\$9,514,627	38.3%
0031	11843	Medical Protective Company	11.3%	\$13,670,881	\$17,044,727	\$900,028	\$2,553,857	\$2,911,696	17.1%
0861	10686	Medical Liability Alliance	8.8%	\$10,652,618	\$11,242,964	\$1,043,640	\$2,675,000	\$3,848,400	34.2%
0000	11582	Missouri Professionals Mutual	8.4%	\$10,174,172	\$10,992,790	\$2,009,135	\$13,257,852	\$8,949,646	81.4%
2698	33391	Proassurance Indemnity Company Inc	8.2%	\$9,952,513	\$10,295,974	-\$4,469,834	\$927,383	-\$6,397,488	-62.1%
1282	12754	Medicus Insurance Company	7.6%	\$9,172,058	\$9,043,892	\$2,595,384	\$500,000	\$1,624,679	18.0%
0831	34495	Doctors Company An Interins Exchange	7.4%	\$8,986,121	\$8,594,322	\$2,392,526	\$1,429,572	\$555,521	6.5%
0000	11964	Missouri Doctors Mutual Insurance Co	3.6%	\$4,322,589	\$4,520,460	\$1,592,587	\$1,860,500	\$637,877	14.1%
0000	11704	Physicians Professional Indemnity Assn.	3.4%	\$4,050,504	\$4,830,939	\$1,648,729	\$2,158,653	\$1,879,372	38.9%
0218	20427	American Casualty Co Of Reading PA	2.2%	\$2,630,887	\$2,624,399	\$554,609	\$1,682,873	-\$894,260	-34.1%
0000	16942	Mmic Insurance Inc	2.0%	\$2,466,035	\$2,165,811	\$442,406	\$0	\$410,558	19.0%
0000	44083	Preferred Physicians Medical Rrg Inc	1.5%	\$1,833,391	\$1,825,791	\$264,176	\$0	\$1,021,735	56.0%
0000	19348	Capson Physicians Insurance Company	1.5%	\$1,793,715	\$1,858,074	\$583,749	\$0	\$1,776,001	95.6%
0000	12361	Galen Insurance Company	1.5%	\$1,753,342	\$1,710,964	-\$202,077	\$619,747	\$32,894	1.9%
0000	35904	Health Care Indemnity Inc	1.3%	\$1,588,414	\$1,588,414	-\$302,319	\$581,811	\$1,441,584	90.8%
2638	15865	Nemic Insurance Company	1.3%	\$1,537,450	\$1,470,751	\$773,072	\$260,896	\$209,650	14.3%
0000	13073	Keystone Mutual Insurance Company	1.2%	\$1,493,242	\$1,513,120	\$237,534	\$140,000	\$227,578	15.0%
0626	22667	Ace American Insurance Company	0.8%	\$1,011,954	\$1,051,671	\$83,159	\$290,000	\$330,310	31.4%
0000	34703	Kansas Medical Mutual Insurance Company	0.8%	\$928,358	\$928,358	\$127,895	\$95,000	\$72,170	7.8%
0000	13194	Physicians Insurance Mutual	0.7%	\$865,177	\$894,993	\$9,640	\$535,000	\$80,001	8.9%
2638	11127	Professional Solutions Insurance Company	0.7%	\$860,163	\$969,088	\$197,113	\$500,000	\$383,360	39.6%
0111	19917	Liberty Insurance Underwriters Inc	0.7%	\$848,898	\$807,587	\$60,440	\$50,000	\$341,589	42.3%
0501	35157	Fair American Insurance & Reinsurance Co	0.7%	\$832,357	\$424,794	\$20,501	\$0	\$276,123	65.0%
2698	14460	Podiatry Insurance Company Of America	0.6%	\$777,212	\$871,105	-\$241,353	\$96,000	-\$675,059	-77.5%
0775	13714	Pharmacists Mutual Insurance Company	0.5%	\$588,564	\$551,940	\$4,277	\$53,000	\$30,810	5.6%
0000	13816	MPM Insurance Company Of Kansas	0.4%	\$427,710	\$432,502	\$37,013	\$22,500	-\$11,250	-2.6%
3239	16624	Darwin National Assurance Company	0.3%	\$327,207	\$322,889	\$119,262	\$37,500	-\$37,574	-11.6%
0012	19445	National Union Fire Ins Co Of Pitt. PA	0.3%	\$319,061	\$733,321	\$297,138	\$196,674	-\$338,959	-46.2%
0244	10677	Cincinnati Insurance Company The	0.2%	\$259,226	\$234,421	-\$4,640	\$187,569	-\$285,531	-121.8%

All Medical Malpractice

NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
0361	19720	American Alternative Insurance Corp.	0.2%	\$219,403	\$212,412	-\$1,409	\$0	-\$5,962	-2.8%
0218	20443	Continental Casualty Company	0.2%	\$202,067	\$205,109	\$51,853	\$129,515	-\$99,295	-48.4%
0000	18767	Church Mutual Insurance Company	0.1%	\$166,165	\$182,037	-\$6,112	\$200,000	\$117,981	64.8%
0508	10801	Fortress Insurance Company	0.1%	\$125,530	\$137,136	\$47,354	\$130,000	\$99,130	72.3%
1129	27154	Atlantic Specialty Insurance Company	0.1%	\$111,635	\$116,395	\$4,476	\$0	\$53,101	45.6%
0012	19380	American Home Assurance Company	0.1%	\$73,616	\$71,781	\$40,050	\$0	\$79,383	110.6%
2698	10222	Paco Assurance Company Inc	0.1%	\$70,620	\$72,087	\$47,488	\$0	\$247,520	343.4%
0176	25143	State Farm Fire And Casualty Company	0.1%	\$66,386	\$69,097	-\$73,145	\$0	\$54,018	78.2%
0012	23809	Granite State Insurance Company	0.1%	\$60,995	\$58,673	\$28,776	\$974,996	\$835,678	1424.3%
0098	25224	Great Divide Insurance Company	0.0%	\$52,217	\$34,534	\$2,799	\$0	\$7,606	22.0%
1120	10120	Everest National Insurance Company	0.0%	\$46,838	\$45,053	\$4,271	\$0	\$12,156	27.0%
0831	33367	Intermed Insurance Company	0.0%	\$27,924	\$373,585	-\$2,102,439	\$1,401,852	\$738,468	197.7%
4743	36234	Preferred Professional Insurance Company	0.0%	\$26,193	\$26,344	-\$393,179	\$1,165,000	\$119,449	453.4%
0140	22209	Freedom Specialty Insurance Company	0.0%	\$26,042	\$27,472	\$2,373	\$0	\$4,551	16.6%
2358	32921	Ismie Mutual Insurance Company	0.0%	\$19,929	\$19,705	-\$2,268	\$0	-\$21,536	-109.3%
0140	42587	Depositors Insurance Company	0.0%	\$18,090	\$18,471	\$6,326	\$0	\$7,018	38.0%
0140	19100	Amco Insurance Company	0.0%	\$14,653	\$5,495	\$979	\$0	\$5,259	95.7%
0244	23280	Cincinnati Indemnity Company Inc	0.0%	\$13,123	\$10,630	\$1,017	\$0	-\$7,368	-69.3%
0111	24732	General Insurance Company Of America	0.0%	\$5,448	\$4,214	\$192	\$0	\$2,018	47.9%
0761	22810	Chicago Insurance Company	0.0%	\$1,741	\$2,333	-\$154,460	\$0	-\$69,058	-2960.1%
0761	21857	American Insurance Company The	0.0%	\$806	\$753	\$53,117	\$0	\$12,672	1682.9%

Physicians & Surgeons

NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
0031	11843	Medical Protective Company	12.8%	\$10,479,522	\$13,571,349	\$1,477,911	\$2,212,500	\$1,379,339	10.2%
0861	10686	Medical Liability Alliance	12.4%	\$10,189,019	\$10,743,120	\$1,043,640	\$2,405,000	\$2,571,100	23.9%
0000	11582	Missouri Professionals Mutual	12.4%	\$10,174,172	\$10,992,790	\$2,009,135	\$13,257,852	\$8,949,646	81.4%
2698	33391	Proassurance Indemnity Company Inc	11.3%	\$9,247,769	\$9,531,311	-\$4,337,868	\$392,314	-\$6,830,643	-71.7%
1282	12754	Medicus Insurance Company	11.2%	\$9,172,058	\$9,043,892	\$2,595,384	\$500,000	\$1,624,679	18.0%
0831	34495	Doctors Company An Interins Exchange	10.9%	\$8,986,121	\$8,594,322	\$2,392,526	\$1,429,572	\$555,521	6.5%
0000	11964	Missouri Doctors Mutual Insurance Co	5.3%	\$4,322,589	\$4,520,460	\$1,592,587	\$1,860,500	\$637,877	14.1%
0000	11704	Physicians Professional Indemnity Assn.	4.9%	\$4,050,504	\$4,830,939	\$1,648,729	\$2,158,653	\$1,879,372	38.9%
0000	16942	MMIC Insurance Inc	3.0%	\$2,446,035	\$2,147,464	\$440,296	\$0	\$404,674	18.8%
0000	44083	Preferred Physicians Medical RRG Inc	2.2%	\$1,833,391	\$1,825,791	\$264,176	\$0	\$1,021,735	56.0%
0000	19348	Capson Physicians Insurance Company	2.2%	\$1,793,715	\$1,858,074	\$583,749	\$0	\$1,776,001	95.6%
0000	12361	Galen Insurance Company	2.1%	\$1,753,342	\$1,710,964	-\$202,077	\$619,747	\$32,894	1.9%
0000	13073	Keystone Mutual Insurance Company	1.8%	\$1,493,242	\$1,513,120	\$237,534	\$140,000	\$227,578	15.0%
0218	20427	American Casualty Co Of Reading PA	1.3%	\$1,034,279	\$1,181,044	\$53,584	\$52,873	-\$12,471	-1.1%
0000	34703	Kansas Medical Mutual Insurance Company	1.1%	\$928,358	\$928,358	\$127,895	\$95,000	\$72,170	7.8%
0000	13194	Physicians Insurance Mutual	1.1%	\$865,177	\$894,993	\$9,640	\$535,000	\$80,001	8.9%
0111	19917	Liberty Insurance Underwriters Inc	1.0%	\$848,898	\$807,587	\$60,440	\$50,000	\$341,589	42.3%
0501	35157	Fair American Insurance & Reinsurance Co	1.0%	\$832,357	\$424,794	\$20,501	\$0	\$276,123	65.0%
2638	11127	Professional Solutions Insurance Company	0.9%	\$721,213	\$836,484	\$201,866	\$500,000	\$372,695	44.6%
0000	13816	MPM Insurance Company Of Kansas	0.5%	\$427,710	\$432,502	\$37,013	\$22,500	-\$11,250	-2.6%
3239	16624	Darwin National Assurance Company	0.4%	\$327,207	\$322,889	\$119,262	\$37,500	-\$37,574	-11.6%
1129	27154	Atlantic Specialty Insurance Company	0.1%	\$111,635	\$116,395	\$4,476	\$0	\$53,101	45.6%
0831	33367	Intermed Insurance Company	0.0%	\$27,924	\$373,585	-\$2,102,439	\$1,401,852	\$738,468	197.7%
4743	36234	Preferred Professional Insurance Company	0.0%	\$26,193	\$26,344	-\$393,179	\$1,165,000	\$119,449	453.4%
2358	32921	Ismie Mutual Insurance Company	0.0%	\$19,929	\$19,705	-\$2,268	\$0	-\$21,536	-109.3%
0218	20443	Continental Casualty Company	0.0%	\$11,947	\$7,073	-\$19,502	\$69,360	-\$118,369	-1673.5%
0111	24732	General Insurance Company Of America	0.0%	\$4,438	\$3,204	\$146	\$0	\$1,534	47.9%
0626	22667	Ace American Insurance Company	0.0%	\$4,334	\$4,516	\$278	\$0	\$1,106	24.5%
1120	10120	Everest National Insurance Company	0.0%	\$627	\$1,469	\$128	\$0	\$365	24.8%
0012	19445	National Union Fire In Co Of Pitt. PA	0.0%	\$403	\$411,346	\$166,397	\$5,500	-\$532,370	-129.4%
Total			100.0%	\$82,134,108	\$87,675,884	\$8,029,960	\$28,910,723	\$15,552,804	17.7%

Hospitals									
NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment Expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
0861	27642	Missouri Hospital Plan	92.4%	\$25,185,824	\$24,821,599	\$3,603,985	\$6,657,127	\$9,514,627	38.3%
0000	35904	Health Care Indemnity Inc.	5.8%	\$1,588,414	\$1,588,414	-\$302,319	\$581,811	\$1,441,584	90.8%
0361	19720	American Alternative Insurance Corporation	0.8%	\$219,403	\$212,412	-\$1,409	\$0	-\$5,962	-2.8%
2698	33391	Proassurance Indemnity Company Inc.	0.6%	\$173,195	\$238,673	-\$3,616	\$535,007	\$421,110	176.4%
0012	19445	National Union Fire Ins Co Of Pitt. PA	0.1%	\$34,616	\$33,316	\$11,886	-\$637	\$16,721	50.2%
0626	22667	Ace American Insurance Company	0.1%	\$29,019	\$29,019	\$3,745	\$0	\$14,874	51.3%
0000	16942	MMIC Insurance Inc	0.1%	\$20,000	\$18,347	\$2,110	\$0	\$5,884	32.1%
0012	19380	American Home Assurance Company	0.0%	\$10,457	\$6,405	\$0	\$0	\$7,214	112.6%
0861	10686	Medical Liability Alliance	0.0%	-\$386	\$22,230	\$0	\$0	\$0	0.0%
Total			100.0%	\$27,260,542	\$26,970,415	\$3,314,382	\$7,773,308	\$11,416,052	42.3%

Dentists									
NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment Expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
2698	33391	Proassurance Indemnity Company Inc.	7.8%	\$307,093	\$303,851	-\$117,960	\$62	\$25,558	8.4%
0012	19445	National Union Fire Insurance Co Of Pitt. PA	5.6%	\$217,992	\$240,857	\$98,056	\$191,811	\$85,812	35.6%
0218	20443	Continental Casualty Company	4.8%	\$190,120	\$198,036	\$71,355	\$60,155	\$19,074	9.6%
2638	11127	Professional Solutions Insurance Company	3.5%	\$138,950	\$132,604	-\$4,753	\$0	\$10,665	8.0%
0508	10801	Fortress Insurance Company	3.2%	\$125,530	\$137,136	\$47,354	\$130,000	\$99,130	72.3%
0244	10677	Cincinnati Insurance Company The	2.4%	\$94,424	\$93,539	\$26,762	\$187,750	-\$157,078	-167.9%
0012	19380	American Home Assurance Company	1.6%	\$63,159	\$65,376	\$40,050	\$0	\$72,169	110.4%
0012	23809	Granite State Insurance Company	1.6%	\$60,995	\$58,673	\$28,776	\$974,996	\$835,678	1424.3%
0775	13714	Pharmacists Mutual Insurance Company	0.1%	\$5,665	\$4,541	\$0	\$0	\$0	0.0%
0176	25143	State Farm Fire And Casualty Company	0.1%	\$4,352	\$5,099	\$651	\$0	\$660	12.9%

All Other Providers									
NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment Expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
2698	33391	Proassurance Indemnity Company Inc	10.8%	\$224,456	\$222,139	-\$10,390	\$0	-\$13,513	-6.08%
0031	11843	Medical Protective Company	7.2%	\$149,131	\$160,842	\$22,000	\$0	\$79,000	49.12%
0176	25143	State Farm Fire And Casualty Company	3.0%	\$62,034	\$63,998	-\$73,796	\$0	\$53,358	83.37%
0244	10677	Cincinnati Insurance Company The	1.1%	\$21,964	\$17,466	\$843	\$0	-\$8,572	-49.08%
1120	10120	Everest National Insurance Company	0.6%	\$11,478	\$10,888	\$1,025	\$0	\$2,917	26.79%
0244	23280	Cincinnati Indemnity Company Inc	0.2%	\$4,085	\$2,596	\$552	\$0	\$65	2.50%
Total			22.9%	\$473,148	\$477,929	-\$59,766	\$0	\$113,255	23.7%

All Other Providers									
NAIC Group Code	NAIC Co Code	Company Name	Market Share	Direct Premium Written	Direct Premium Earned	Loss Adjustment Expense	Direct Paid Losses	Direct Incurred Losses	Loss Ratio
0626	22667	Ace American Insurance Company	18.6%	\$978,601	\$1,018,136	\$79,136	\$290,000	\$314,330	30.9%
2698	14460	Podiatry Insurance Company Of America	14.7%	\$777,212	\$871,105	-\$241,353	\$96,000	-\$675,059	-77.5%
0775	13714	Pharmacists Mutual Insurance Company	11.1%	\$582,899	\$547,399	\$4,277	\$53,000	\$30,810	5.6%
0861	10686	Medical Liability Alliance	8.8%	\$463,985	\$477,614	\$0	\$270,000	\$1,277,300	267.4%
0031	11843	Medical Protective Company	6.2%	\$326,173	\$493,694	-\$249,000	\$0	\$53,000	10.7%
0000	18767	Church Mutual Insurance Company	3.2%	\$166,165	\$182,037	-\$6,112	\$200,000	\$117,981	64.8%
0244	10677	Cincinnati Insurance Company The	2.7%	\$142,838	\$123,416	-\$32,245	-\$181	-\$119,881	-97.1%
2698	10222	Paco Assurance Company Inc	1.3%	\$70,620	\$72,087	\$47,488	\$0	\$247,520	343.4%
0012	19445	National Union Fire Ins Co Of Pitt.. PA	1.3%	\$66,050	\$47,802	\$20,799	\$0	\$90,878	190.1%
0098	25224	Great Divide Insurance Company	1.0%	\$52,217	\$34,534	\$2,799	\$0	\$7,606	22.0%
1120	10120	Everest National Insurance Company	0.7%	\$34,733	\$32,696	\$3,118	\$0	\$8,874	27.1%
0140	22209	Freedom Specialty Insurance Company	0.5%	\$26,042	\$27,472	\$2,373	\$0	\$4,551	16.6%
0140	42587	Depositors Insurance Company	0.3%	\$18,090	\$18,471	\$6,326	\$0	\$7,018	38.0%
0140	19100	Amco Insurance Company	0.3%	\$14,653	\$5,495	\$979	\$0	\$5,259	95.7%
0244	23280	Cincinnati Indemnity Company Inc	0.2%	\$9,038	\$8,034	\$465	\$0	-\$7,433	-92.5%
0761	22810	Chicago Insurance Company	0.0%	\$1,741	\$2,333	-\$154,460	\$0	-\$69,058	-2960.1%
0111	24732	General Insurance Company Of America	0.0%	\$1,010	\$1,010	\$46	\$0	\$484	47.9%
0761	21857	American Insurance Company The	0.0%	\$806	\$753	\$53,117	\$0	\$12,672	1682.9%
Total			70.8%	\$3,732,873	\$3,964,088	-\$462,247	\$908,819	\$1,306,852	33.0%

Insurance Consumer Hotline

Contact DIFP's Insurance Consumer Hotline
if you have questions about your insurance policy
or to file a complaint against an
insurance company or agent:

difp.mo.gov

800-726-7390



DIFP

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