

Medical Professional Liability Insurance Claims Online User Guide

Missouri Department of Commerce and Insurance

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Summary

To further assist our patrons, Medical Professional Liability Insurance Claim reports can now be created, updated, and closed online through DCI Medical Professional Liability Insurance Claim Portal. This tutorial guides users through the online system for account creation, account management, and claim management. This guide does not provide information about claim requirements or regulations.

Site Address

<https://apps.dci.mo.gov/ProfLiab/MedMal/Login.aspx>

Account Management

Users require an approved account to create, update or close claims. New users must create an account and received approval prior to creating, updating, or closing claims. Existing users will need to sign in to manage their account information.

Account Registration

Required Information: Users will need to create and/or provide the following information when registering for an account with DCI:

- Create a User Name
- Provide a valid Email Address
- Create a Password
- Provide valid NAIC number(s)
- Provide Contact Name
- Provide Contact Phone Number
- Provide Contact Address Information

Registration Process

New users must register with DCI to gain access to the application. See instructions for new user sign up

<https://apps.dci.mo.gov/ProfLiab/MedMal/Login.aspx>

Contact Information Updates

It is important to keep your contact information up-to-date, login into the account to manage account settings. You can change your password, email account, and contact information online through the account settings option. The system automatically approves updates immediately but account changes process nightly.

To login, provide your username and password.

- If you forget your account login information, you may request your information sent to your on-file email address by selecting the “Can’t access your account?” link.

The screenshot shows the 'SIGN IN' page of the 'STATISTICS CLAIMS REPORTING REGISTRATION' portal. The page features the Missouri Department of Commerce and Insurance logo in the top left corner. The main content area is titled 'Account Information' and contains the following elements: a prompt 'Please enter your username and password.', a 'Username:' label with an input field, a 'Password:' label with an input field, a 'Sign in' button, a 'User Guide' link, a 'Can't access your account?' link, a 'Not Registered? Sign up' link, and a 'Contact Us' link.

Once you log in, the page redirects to the portal homepage. From the portal homepage select your NAIC Code and form type.

Claims Management

Claims management assists clients with a more convenient and easier method to report, update, and close Medical Professional Liability Insurance claims.

From the portal homepage, you can select one of the following options to manage claims:

The screenshot shows the portal homepage for 'STATISTICS CLAIMS REPORTING REGISTRATION'. The top navigation bar includes the Missouri Department of Commerce and Insurance logo, the portal title, and a 'Welcome Logan [Sign out]' message. Below the navigation bar is a menu with links for 'Home', 'File Claim', 'Claim Status', 'Contact Us', and 'User Guides'. The main content area is titled 'Information' and contains the following elements: a prompt 'ENTER', a 'Web Filing Number:' label with an input field and a 'Help' link, a prompt 'OR', a 'Claim File Identification:' label with an input field, and a 'NAIC Number/Company Name: 0514-12345 NEW HORIZONS INSURANCE COMPANY OF MISSOURI' label. Below these elements are four buttons: 'Open New Claim', 'Update Claim', 'Close Claim', and 'Home'.

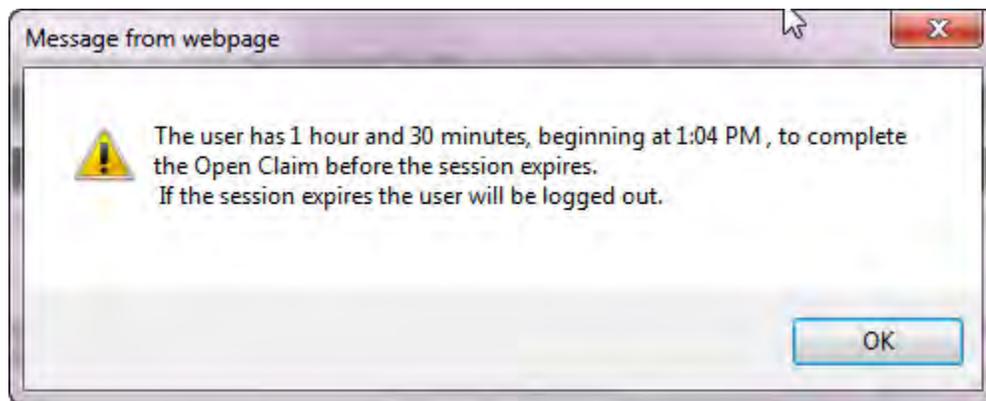
- Open Claim

- Opens online form for new claim creation
- Update Claim
 - Used to modify an existing claim
- Close Claim
 - Used to close an existing claim

Create a Claim

To create a claim, select the **Open Claim** from the menu bar. When you select the **Open Claim** option, the page redirects to the claim creation form.

When you open the form, a prompt will immediately notify you that you have three hours to complete the form before your session expires.



Screen shot appears in full on next page.



STATISTICS CLAIMS REPORTING REGISTRATION

Welcome Logan | Sign out |

Home | File Claim | Claim Status | Contact Us | User Guides

MISSOURI DEPARTMENT OF COMMERCE AND INSURANCE
MEDICAL PROFESSIONAL LIABILITY INSURANCE CLAIM REPORT

STATISTICS SECTION
P.O. BOX 696
JEFFERSON CITY, MO 65102-0696

Open Claim

⚠ When this symbol appears, an error has occurred in the associated field. place cursor over symbol for error message

1a. NAIC Group & Company Code & Name Of Insurer 0014-12345 NEW HORIZONS INSURANCE COMPANY OF MISSOURI		1b. Claim File Identification 1656877SR	
2a. Date Of Injury	2b. Date Reported to Insurer	2c. Date Received	2d. Original Claim ID Number
3a. License Number	3b. Insured Last Name/Hospital/Other	3c. First Name	3d. Middle Initial 3e. Suffix (MD, DO, ETC)
3f. Age	3g. City	3h. State	3i. Zip
4a. Profession Code of Insured	4b. Specialty Code	4c. Type of Practice Code	
5a. Place Where Injury Occurred Code	5b. City	5c. State	5d. Zip
6a. Name of Institution (if injury Occurred in Institution)		6b. Location of Institution Code	
7a. Injured Person's Name (Last Name)	7b. First Name	7c. Middle Name	7d. Age 7e. Sex 7f. Date of Birth
7g. Street	7h. City	7i. State 7j. Zip	7k. Telephone Number
8a. Person Instituting Claim if Injured Party is Deceased or a Minor (Last Name)		8b. First Name	8c. Middle Name
8d. Street	8e. City	8f. State 8g. Zip	8h. Telephone Number
8i. Plaintiff Attorney's Name		8j. City	8k. State 8l. Zip
Nature and Substance of Claim			
10a. The Nature and Substance of Claim (Provide All Available Information)			
10b. The condition for which treatment was sought			
10c. The procedure(s) and event(s) that led to the adverse outcome			
10d. The specific alleged medical error or improper or incorrect performance			
10e. The nature of the injuries sustained by the patient as a result of the alleged errors			
11a. Allegation Category	11b. Specific Allegation Code	12. Severity of Injury Code Help	
13. Date of This Payment or Closure		14. Claim Disposition Code	15. Settlement Code
16a. Court Code	16b. Name of Court	16c. Docket Number	
16d. Date Suit Was Filed	16e. County FIPS Code		
17a. Indemnity paid by you on behalf of this defendant	20. Injured person's incurred medical expense		
0	0		
17b. Economic damages	21. Injured person's anticipated future medical expense		
0	0		
17c. Non-economic damages	22. Injured person's incurred wage loss		
0	0		
17d. Punitive Damages	23. Injured person's anticipated future wage loss		
0	0		
18. Loss adjustment expense paid to defense counsel	24. Injured person's other expenses		
0	0		
19. All other allocated loss adjustment expense paid by you	25. Total amount allocated for future periodic pay (for all defendants)		
0	0		
26a. Contact Person	26b. Telephone Number	26c. Address	26d. Person Responsible For Report

Open Claim | Print | Clear

Complete all required fields before selecting the **Open Claim** button on the form. Any missing fields that are mandatory will be denoted by a  and a summary of the missing data will be displayed at the top of the screen.



At any time during form completion, you may print the form from the button located at the bottom of the page titled **Print**.

To remove data entered into the form, select the **Clear** button located at the bottom of the page.

After you submit your claim, the page will redirect to the *claim submission* page that will provide you with your claim filing number.

Be sure to keep this number, it will be useful in the future when you modify or close your claim. Please note that it may take between 48 to 72 hours to complete claim processing.

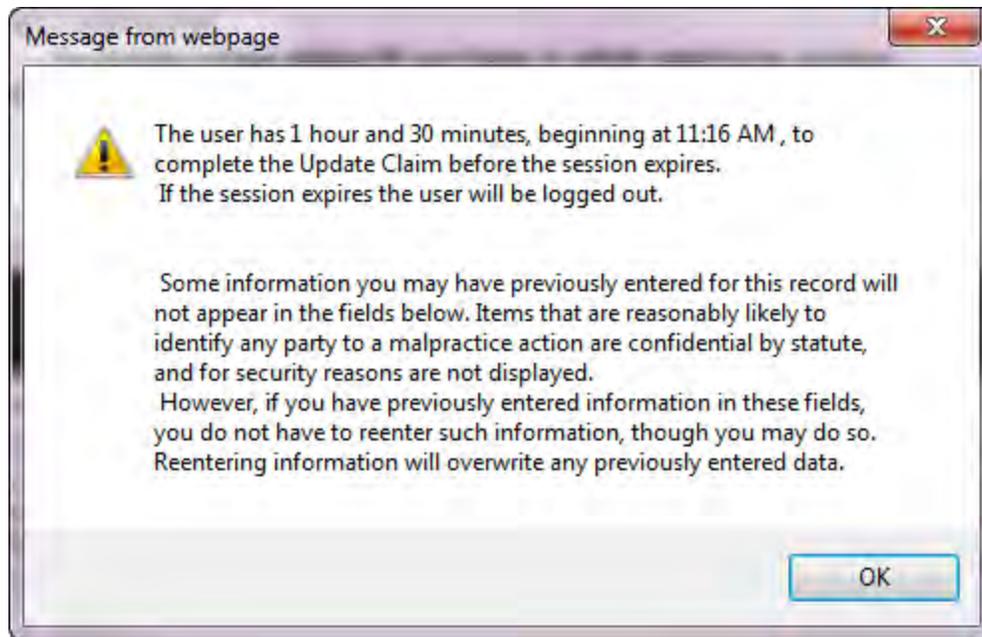
The screenshot shows the top navigation bar with the Missouri Department of Commerce and Insurance logo on the left and the text "STATISTICS CLAIMS REPORTING REGISTRATION" in the center. On the right, it says "Welcome Logan [Sign out]". Below the navigation bar, there are links for "Home", "File Claim", "Claim Status", "Contact Us", and "User Guides--". The main content area has a heading "Information" and a message box that reads: "Your claim has been saved. Your Web Filing Number: 071BE5870. Please save this number to Update or Close your claim. Allow 48-72 hours for the system to process this Open claim request." A "Print" button is located to the right of the message box.

Update a Claim

To update a claim, you will need to provide your *web filing number*, or *claim file identification*. Then click the **Update Claim** button.

The screenshot shows the same top navigation bar as the previous image. The main content area has a heading "Information" and a form with two input fields: "Web Filing Number:" and "Claim File Identification:". Below the "Claim File Identification:" field, there is a text label "NAIC Number/Company Name: 0514-12345 NEW HORIZONS INSURANCE COMPANY OF MISSOURI". At the bottom of the form, there are four buttons: "Open New Claim", "Update Claim", "Close Claim", and "Home". A "Help" link is located to the right of the "Web Filing Number:" input field.

After the user selects the **Update** button, the system will generate a message informing users of time limit constraints and data entry details.



The system will retrieve your record and display some previously entered data in blue lettering above the corresponding field (pictured below). Some information you may have previously entered for this record will not appear in the fields below. Items that are reasonably likely to identify any party to a malpractice action are confidential by statute, and for security reasons are not displayed. **However, if you have previously entered information in these fields, you do not have to reenter such information, though you may do so.** Reentering information will overwrite any previously entered data.

Screen shot appears in full on next page.



STATISTICS CLAIMS REPORTING REGISTRATION

Welcome Logan [Sign out]

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Contact Us
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MISSOURI DEPARTMENT OF INSURANCE
 FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION
MEDICAL PROFESSIONAL LIABILITY INSURANCE CLAIM REPORT

STATISTICS SECTION
 P.O. BOX 690
 JEFFERSON CITY, MO 65102-0690

**To Update a Claim please fill out items in which need to be updated.
 Data perviously entered for the Claim will not be displayed for security reasons.**

Update Claim

When this symbol appears, an error has occurred in the associated field. please cursor over symbol for error message

[See Instructions Here](#)

1a. NAIC Group & Company Code & Name Of Insurer <small>1334-12193 FARM BUREAU NEW HOPEWORKS INSURANCE COMPANY (A MISSOURI) <small>1334-12193 FARM BUREAU NEW HOPEWORKS INSURANCE COMPANY (A MISSOURI)</small></small>		1b. Claim File Identification 123TESTCLAIM		
2a. Date Of Injury 1/1/2013	2b. Date Reported to Insurer 1/5/2013	2c. Date Reopened	2d. Original Claim ID Number 123TESTCLAIM	
3a. License Number	3b. Insured Last Name/Hospital/Other	3c. First Name	3d. Middle Initial	3e. Suffix (MD, DO, ETC)
3f. Age	3g. City	3h. State	3i. Zip	
4a. Profession Code of Insured 1 Physicians and Surgeons		4b. Specialty Code ALLERGY / IMMUNOLOGISTS		4c. Type of Practice Code 1 Institutional (including academic)
5a. Place Where Injury Occurred Code	5b. City	5c. State	5d. Zip	

16a. Date Suit Was Filed	16e. County FIPS Code		
17a. Indemnity paid by you on behalf of this defendant \$300.00	20. Injured person's incurred medical expense \$100.00		
17b. Economic damages \$100.00	21. Injured person's anticipated future medical expense \$100.00		
17c. Non-economic damages \$100.00	22. Injured person's incurred wage loss \$100.00		
17d. Punitive Damages \$100.00	23. Injured person's anticipated future wage loss \$100.00		
18. Loss adjustment expense paid to defense counsel \$100.00	24. Injured person's other expenses \$100.00		
19. All other allocated loss adjustment expense paid by you \$100.00	25. Total amount allocated for future periodic pay (for all defendants) \$100.00		
26a. Contact Person TESTCONTACT	26b. Telephone Number (123)123-1234	26c. Address 123 TEST ROAD	26d. Person Responsible For Report SAMPLE NAME

After you have made changes to the claim, click the **Update Claim** button. The system will display a confirmation page and notice that the process to update may require 48 - 72 hours to complete.

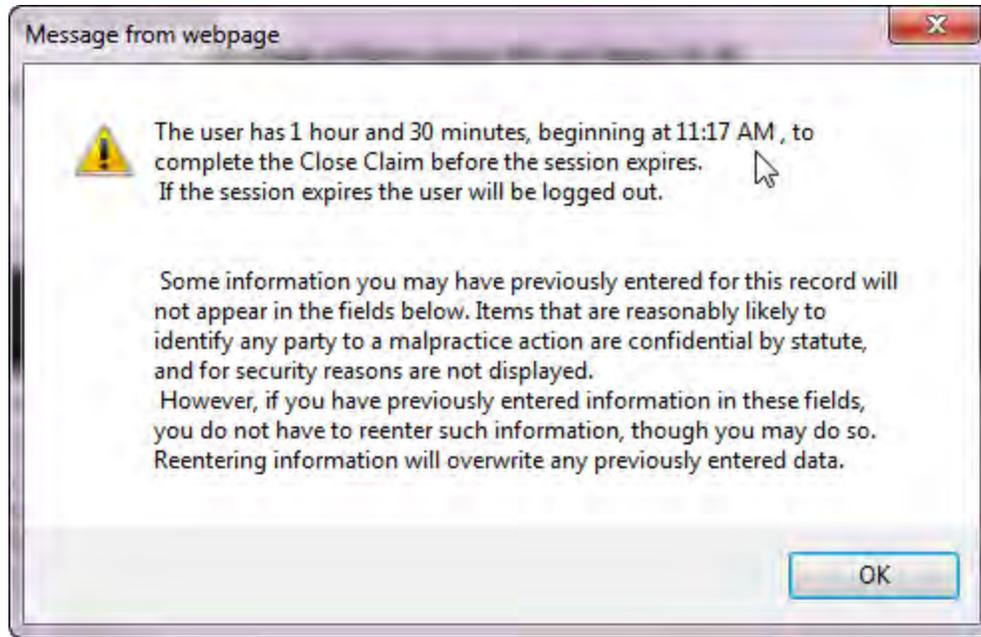


Close a Claim

To close a claim, you will need to provide your *web filing number*, or *claim file identification*. Then click the **Close Claim** button.



After the user selects the **Close** button, the system will generate a message informing users of time limit constraints and data entry details.



The system will retrieve your record and display some previously entered data in blue lettering above the corresponding field (pictured below). Some information you may have previously entered for this record will not appear in the fields below. Items that are reasonably likely to identify any party to a malpractice action are confidential by statute, and for security reasons are not displayed. **However, if you have previously entered information in these fields, you do not have to reenter such information, though you may do so.** Reentering information will overwrite any previously entered data.

Welcome Logan [Sign out]



STATISTICS CLAIMS REPORTING REGISTRATION

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File Claim
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MISSOURI DEPARTMENT OF INSURANCE
FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION
MEDICAL PROFESSIONAL LIABILITY INSURANCE CLAIM REPORT

STATISTICS SECTION
P.O. BOX 690
JEFFERSON CITY, MO 65102-0690

To Close a Claim please fill out items 13-25.
Data perviously entered for the Claim will not be displayed for security reasons.

Close Claim

⊗ When this symbol appears, an error has occurred in the associated field, place cursor over symbol for error message.

[See Instructions Here](#)

1a. NAIC Group & Company Code & Name Of Insurer 1118 12345 FARM BUREAU NEW YORK/NEW YORK/NEW YORK/NEW YORK		1b. Claim File Identification 123TESTCLAIM	
2a. Date Of Injury 1/1/2013		2b. Date Reported to Insurer 1/5/2013	2c. Date Reopened
2d. Original Claim ID Number		123TESTCLAIM	
3a. License Number	3b. Insured Last Name/Hospital/Other	3c. First Name	3d. Middle Initial
3e. Suffix (MD, DO, ETC)			
3f. Age	3g. City	3h. State	3i. Zip

13. Date of This Payment or Closure 1/10/2013	14. Claim Disposition Code 1 Settled or disposed by parties before or during trial	15. Settlement Code 1 Before filing suit or demanding arbitration hearing	
16a. Court Code	16b. Name of Court	16c. Docket Number	
16d. Date Suit Was Filed	16e. County FIPS Code		
17a. Indemnity paid by you on behalf of this defendant \$300.00	20. Injured person's incurred medical expense \$100.00		
17b. Economic damages \$100.00	21. Injured person's anticipated future medical expense \$100.00		
17c. Non-economic damages \$100.00	22. Injured person's incurred wage loss \$100.00		
17d. Punitive Damages \$100.00	23. Injured person's anticipated future wage loss \$100.00		
18. Loss adjustment expense paid to defense counsel \$100.00	24. Injured person's other expenses \$100.00		
19. All other allocated loss adjustment expense paid by you \$100.00	25. Total amount allocated for future periodic pay (for all defendants) \$100.00		
26a. Contact Person TESTCONTACT	26b. Telephone Number (123)123-1234	26c. Address 123 TEST ROAD	26d. Person Responsible For Report SAMPLE NAME

Close Claim
Print
Clear

You should notice from the above picture, that several fields are required before you can fully close the claim. The system will flag fields requiring additional attention with a red 'x' (⊗).

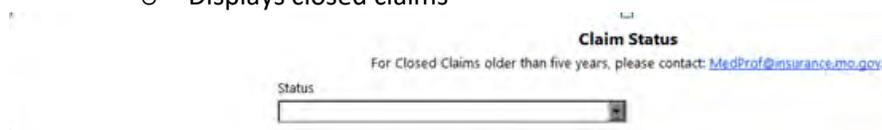
After you have made changes to the claim, click the **Close Claim** button. The system will display a confirmation page and notice that the process to update may require 48 - 72 hours to complete.



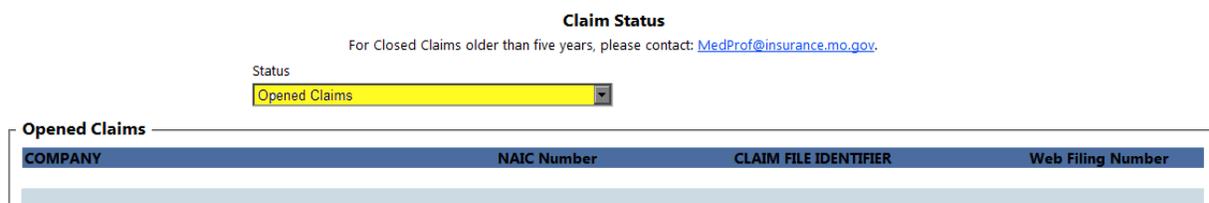
Claim Status

Check claim status using the Claim Status menu. The system **only** lists the status of claims from this menu. Users cannot create, update or close claims from this menu. To perform other tasks, please select the appropriate tab choice, Open Claim, Update Claim or Close Claim. To check the status of a claim, select **Claim Status** from the menu bar.

- Opened Claims
 - Displays open claims
- Closed Claims
 - Displays closed claims



From the Status drop-down selection field, choose Opened Claims. Select the **Show** button and the system will display one of the following screens based upon your selection(s) and the data returned based on those selections.



From the Status drop-down selection field, choose Closed Claims. Then select the Payment/Closure Year, for example, 2010. Select the **Show** button and the system will display one of the following screens based upon your selection(s) and the data returned based on those selections.

Claim Status

For Closed Claims older than five years, please contact: MedProf@insurance.mo.gov.

Status: Closed Claims Payment/Closure Year: Show

Claim Status

For Closed Claims older than five years, please contact: MedProf@insurance.mo.gov.

Status: Closed Claims Payment/Closure Year: Show

COMPANY	NAIC Number	CLAIM FILE IDENTIFIER	Web Filing Number

If there is no data based upon the selections made, the following will be displayed.

Claim Status

For Closed Claims older than five years, please contact: MedProf@insurance.mo.gov.

Status: Closed Claims Payment/Closure Year: Show

Closed Claims

There are currently no closed claims.

Closed Claims older than five years

Note that if the closed claim is older than five years it will not be included in the information displayed for Closed Claims. As indicated, for Closed Claims older than five years, please contact the Department of Insurance, Financial Institutions, and Professional Registration, Statistics Section, by email at medprof@insurance.mo.gov.

Contact Us

Contact the Department of Commerce and Insurance, Statistics Section, for help with claims by mail at 301 West High Street at Jefferson City, MO 65101 or by email at medprof@insurance.mo.gov.

User Guide

This User Guide can be obtained from the **User Guide** menu as well as from the DCI web site at http://insurance.mo.gov/industry/filings/stats/MedicalProfLiability_User_Guide_v2.pdf

Logout

Before closing the application, be sure to logout. To logout, select the Sign Out hyperlink at the top right corner of the page. Upon successful logout, the system redirects you to a confirmation page.