

2017
MISSOURI
**MEDICAL PROFESSIONAL
LIABILITY INSURANCE REPORT**

MISSOURI DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS
& PROFESSIONAL REGISTRATION

STATISTICS SECTION
AUGUST 2018

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.

Format of Report

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. For purposes of this report, all individual claims are aggregated for each plaintiff / injured party, as well as for each health care provider implicated in a liability action.

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 Claimant, Defendant and Claim					
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

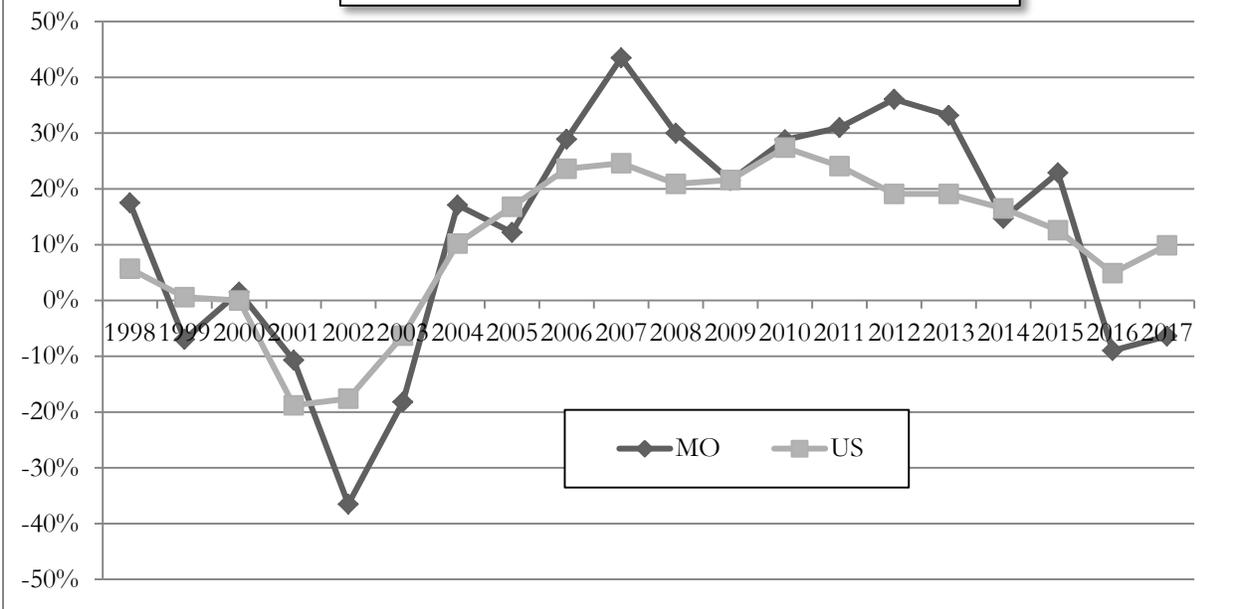
Data for physicians and surgeons, hospitals and other medical care providers are summarized in this report. The category of “other medical care providers” includes, but is not limited to, dentists, nurses, nursing homes, chiropractors, pharmacies, optometrists, podiatrists/chiropractors, clinics, and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

Among the findings of the report are:

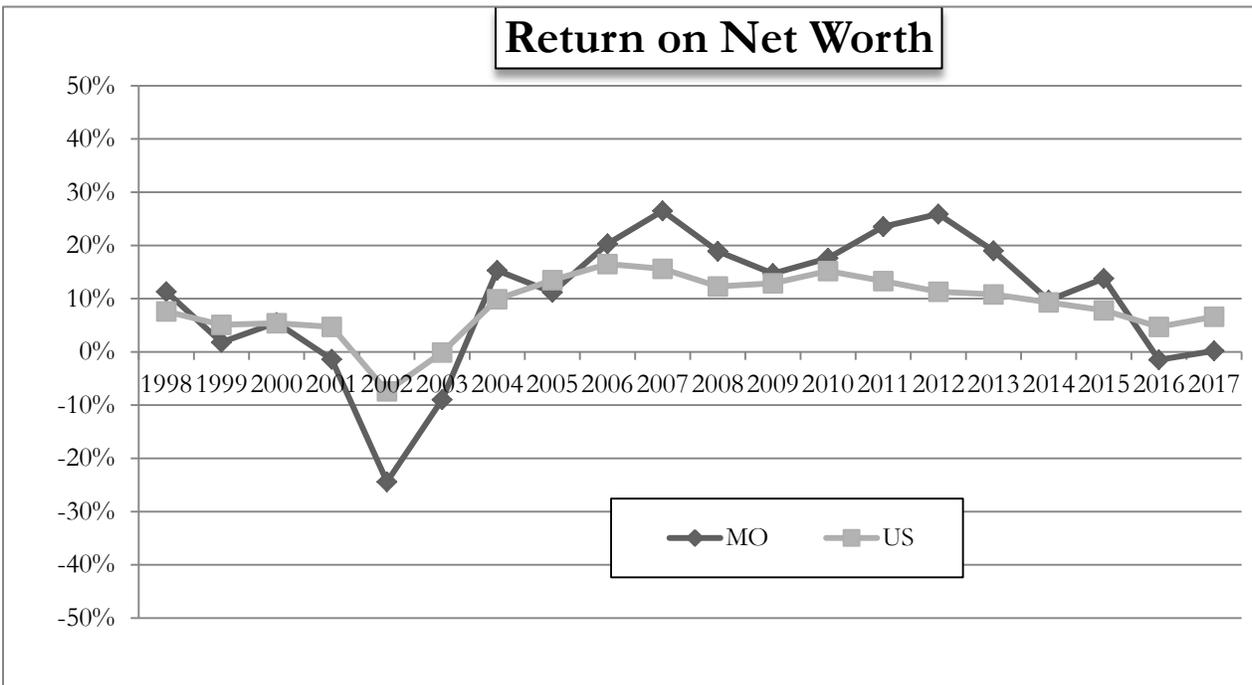
■ **Profitability** In 2016, medical professional liability insurers returned a loss in Missouri for the first time since 2003. In 2017, underwriting results were still negative, though when factoring in additional revenue such as investment income, insurers broke even, earning a 0.2 percent return. Claims incurred plus loss adjustment and administrative costs amounted to 122 percent of earned premium in 2017. Nationally, profitability has also been trending downward in recent years.

Incurred claims increased from \$26.5 million to \$93.0 million between 2015 and 2016, but declined to \$79.8 million in 2017. Defense and adjustment expenses related to settling claims, the largest expense component for medical professional liability insurance aside from claim payments, represent an additional 30 percent of premium (page 6).

Profit on Insurance Transactions

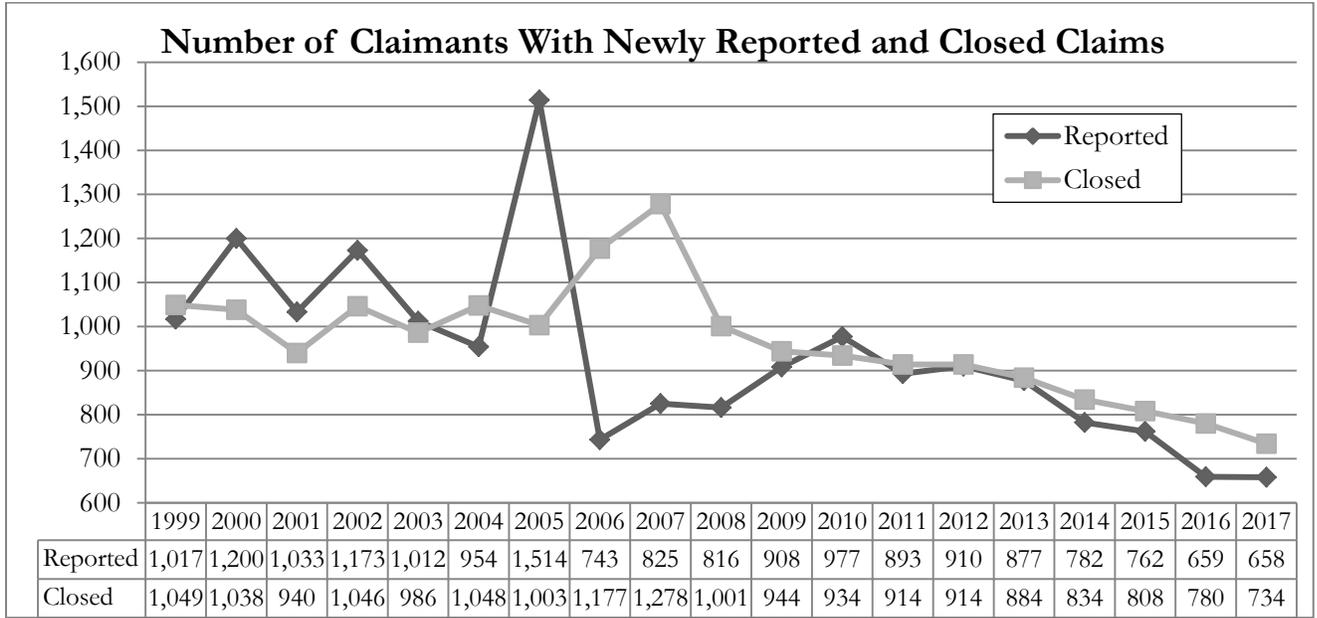


Return on Net Worth



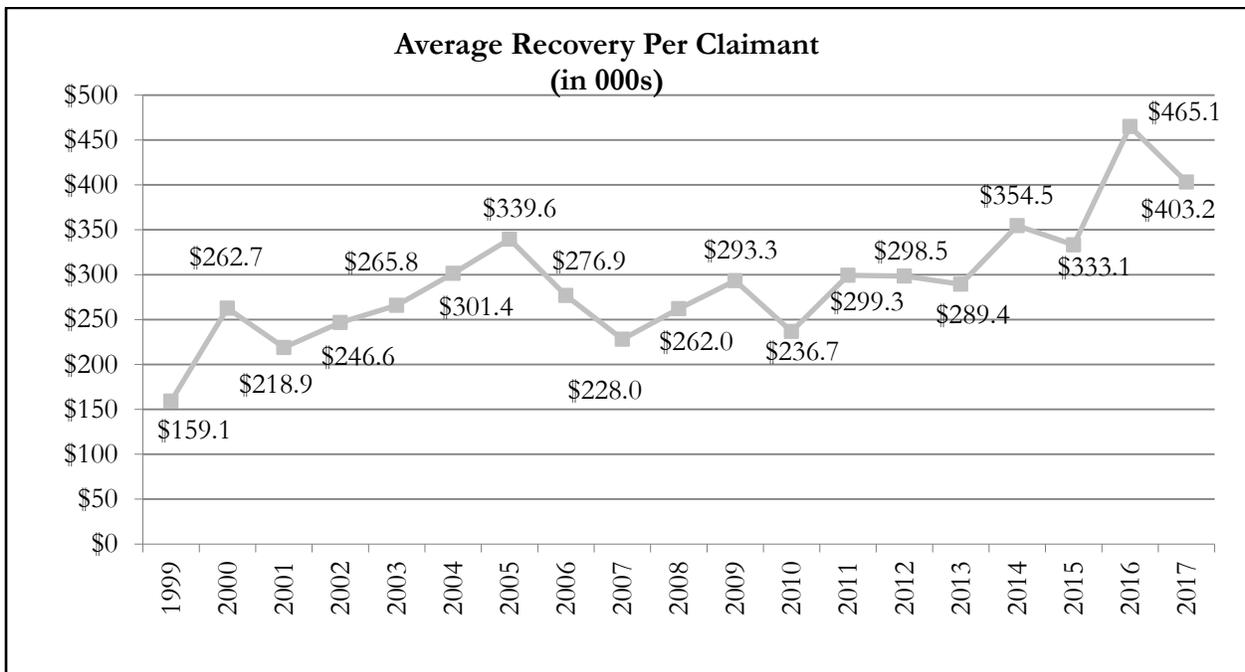
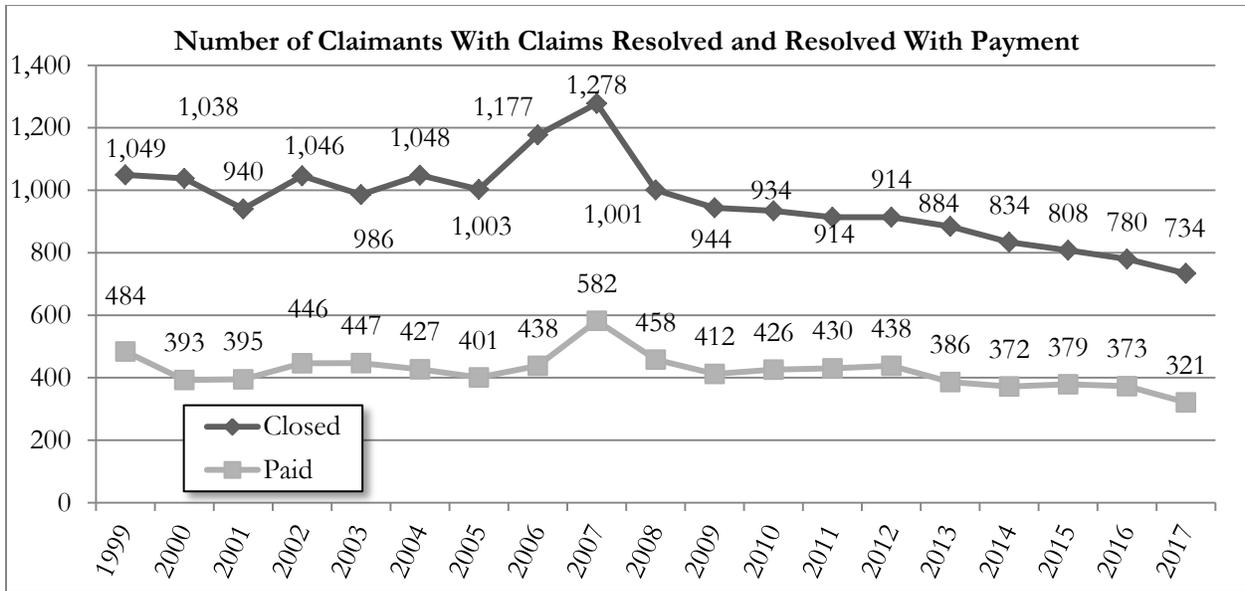
New Incidents Reported and Claims Closed

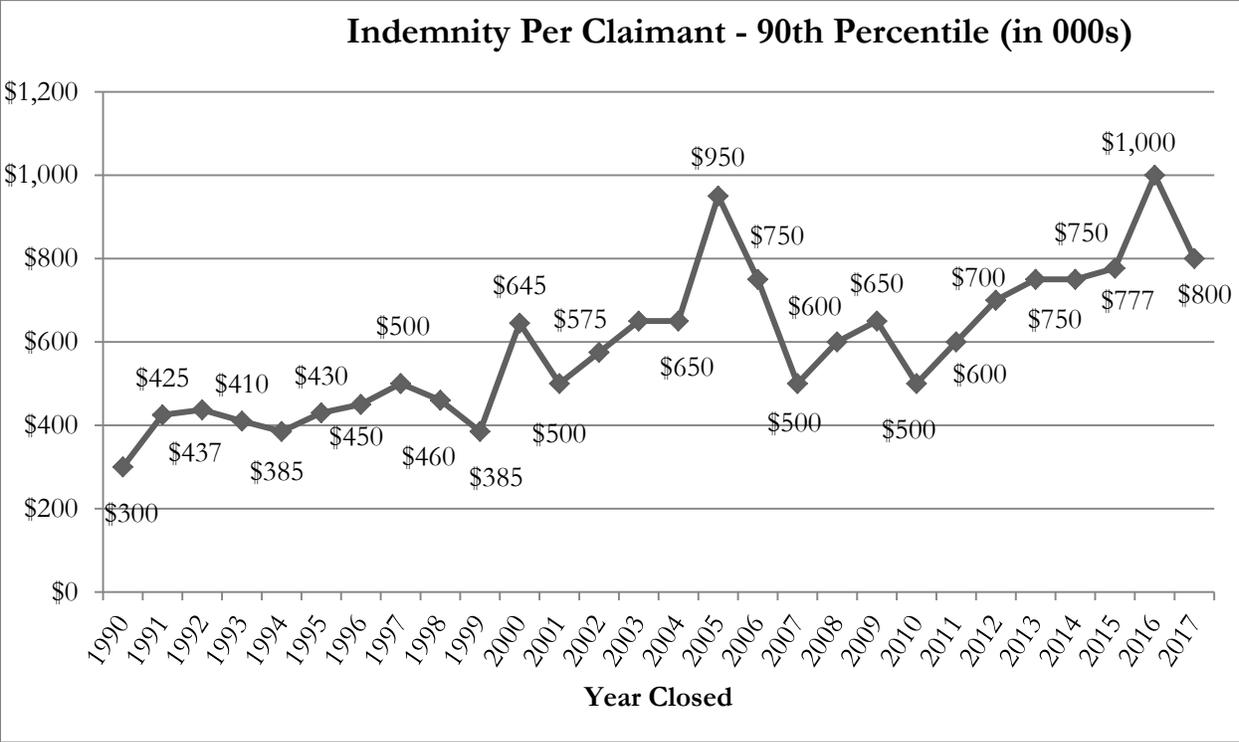
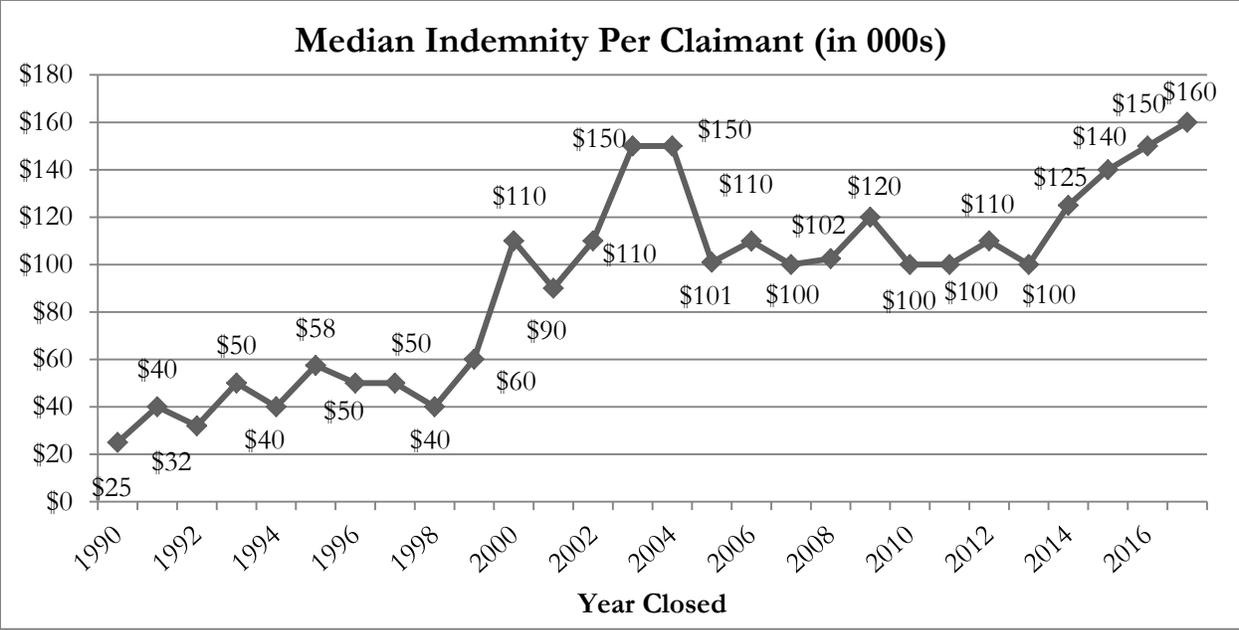
■ After new claims spiked sharply in 2005, newly-opened claims declined substantially in subsequent years. Aside from the anomalous 2005 spike in new claims (a direct result of legal changes implemented in that year), the number of claims reported has declined substantially in recent years, and by 2017 stood at 658.

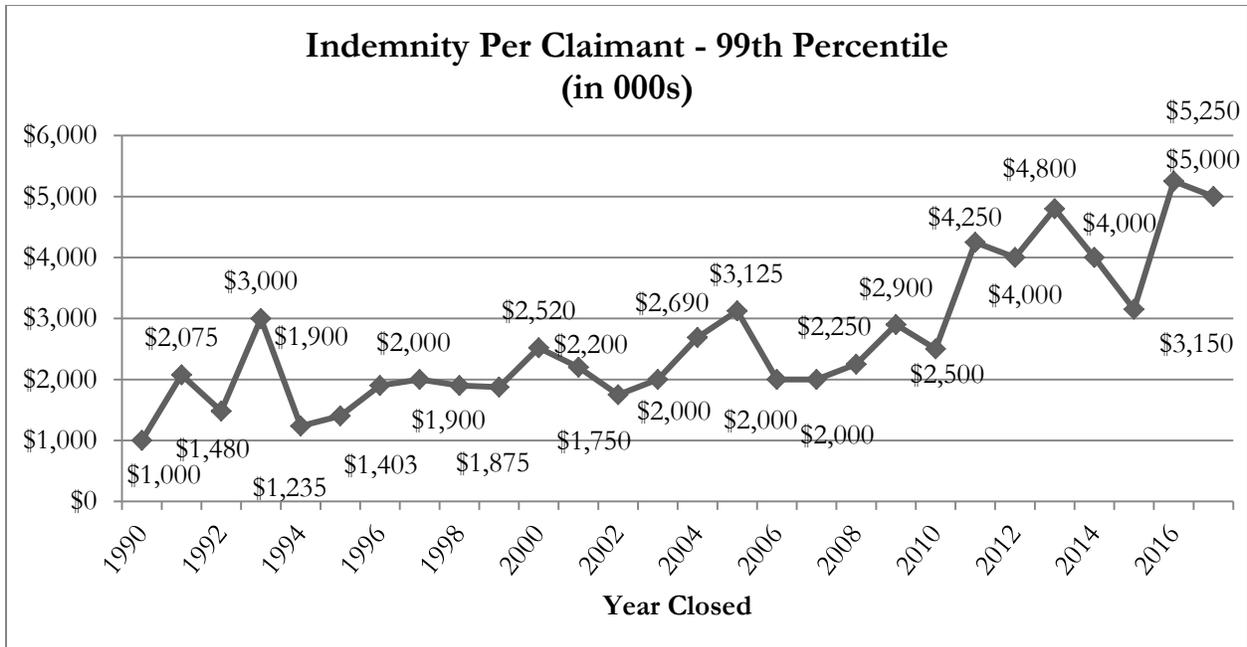


■ After a significant increase in 2007, the number of claimants receiving a recovery subsequently declined. However, the average award per claimant increased significantly between 2015 and 2016, rising from \$333,109 to \$465,055, but declined to \$403,222 in 2017.

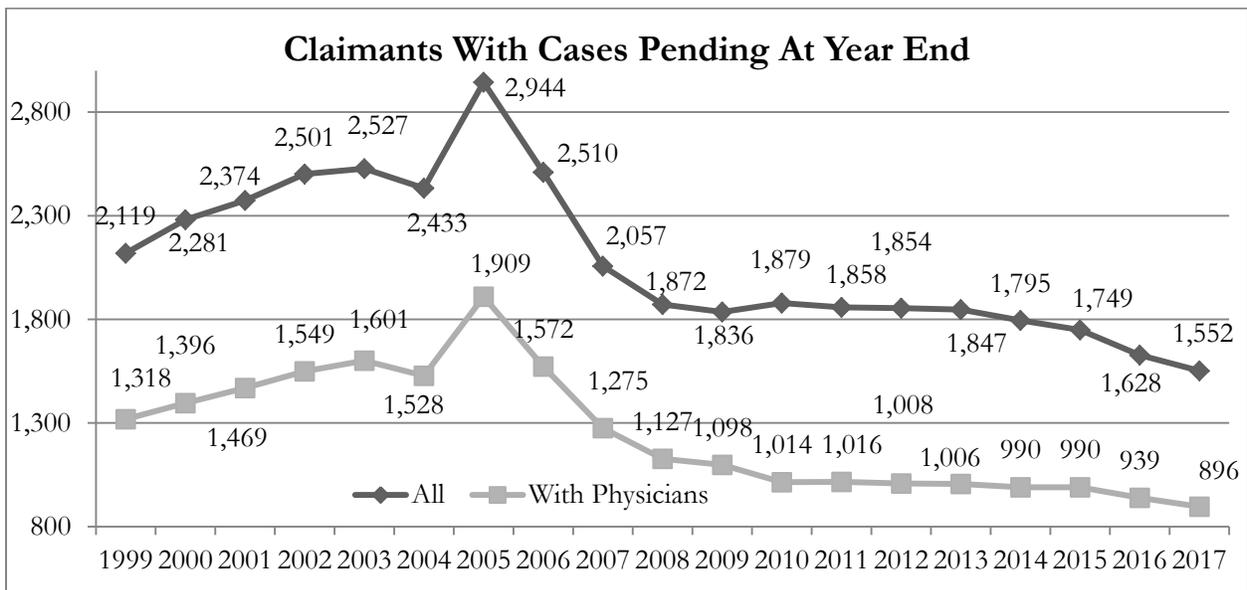
The median amount received by each claimant in 2017 stood at \$160,000, up slightly from prior years. In 2017, recoveries at the 90th and 99th percentiles also reached their highest point in the history of DIFP claims data (extending back to 1979), though declined in 2017.







■ 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 or applied separately to each discrete act of malpractice from a single individual (**Scott vs. SSM Healthcare**). In 2005, the legislature lowered the cap to a non-inflation-adjusted amount of \$350,000, and applied it to total recovery from 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**). In 2015, the MO legislature enacted new caps. For more minor injuries, caps were set at \$400,000. Injuries defined as catastrophic were subject to a higher cap of \$700,000. Both caps are annually adjusted by a constant rate of 1.7 percent. For 2018, the caps stood at \$420,749 and \$736,310.

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 15,000 medical professional liability actions extending back to 2005.

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

Adverse Outcomes by Medical Category Closed Occurrences, 2005-2017 Percent			
Category of Alleged Medical Error	Occurrences	Paid Occurrences	% Total Payments
Surgery	31.2%	29.8%	29.4%
Diagnosis	17.9%	18.2%	26.2%
Non-surgical Treatment	17.9%	18.2%	13.7%
Patient Safety / Ethics	14.8%	15.0%	6.4%
Medication errors/complications	8.7%	8.6%	4.9%
Pregnancy & childbirth	6.0%	6.7%	16.7%
Anesthesia	1.9%	1.6%	1.8%
IV & Blood Products	1.6%	1.9%	1.0%
Total	100.0%	100.0%	100.0%

Across all categories, just a few general types of allegations accounted for more than 90 percent of cases. Interestingly, injuries unrelated to medical treatment were among the largest sources of claims, with over 1,600 claimants seeking compensation for falls on hospital grounds, assaults from medical staff or other patients, and injuries during transport, among other causes. Over the period 2005-2017, insurers paid out nearly \$138 million as a result of such claims. Pregnancy and birth-related claims accounted for 6 percent of all claims, but nearly 16 percent of total claim payments. Injuries sustained during surgery or non-surgical treatment also account for a high volume of cases. Among this class of injuries, the most common was *unintentional cut or tear* during the procedure (1,479 cases). Additional types of injuries of this class include cardiovascular side-effects of treatment, such as heart attack, stroke, or embolism; or respiratory side-effect (661

cases), and an assortment of other types of less-defined injuries (600, classed as “Other injury during or as a result of procedure”).

This category excludes other specific types of injuries, such as retained surgical materials (338 cases), and surgeries or other procedures performed on the wrong patient or the wrong body part (144 cases). Claims involving misdiagnoses and other diagnostic issues (excluding physical injuries incurred during a diagnostic test) accounted for 2,594 cases and \$575 million in payments since 2005.

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

Top 20 Most Common Allegation Categories Medical Professional Liability Closed Claims, 2005-2017				
Allegation Type	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Diagnostic Errors	2,594	1,217	\$472,509	6.5
Patient Safety (falls, facility elopement, etc.)	1,670	963	\$143,252	5.3
Cut, puncture or tear during procedure	1,479	750	\$278,597	5.3
Post-treatment infection	1,148	484	\$278,997	6.0
Pregnancy & Childbirth	877	444	\$821,825	7.0
Inefficacious treatment	767	267	\$223,262	4.8
Adverse reaction to correct medication and dose	722	198	\$249,200	5.1
Medication Error (wrong med, wrong dose)	677	476	\$198,155	4.5
Cardiovascular / respiratory complication	661	326	\$526,654	7.2
Improper use of equipment / equipment failure	633	276	\$250,079	4.8
Other injury during or as a result of procedure	600	226	\$290,001	4.4
Denial of care / patient abandonment*	437	53	\$335,655	3.6
Foreign body retained	338	191	\$118,788	3.9
Ethical / legal misconduct	298	117	\$89,249	1.2
Non-administration of necessary care	216	99	\$334,101	6.3
Informed consent / unnecessary procedure	207	69	\$237,523	4.2
Other problem with surgical site	153	63	\$470,799	4.8
Wrong patient / body part	144	105	\$300,631	4.4
Delay in treatment	63	28	\$423,036	6.4
Communication failure	60	15	\$239,167	6.0
Subtotal	13,744	6,367	\$331,151	5.5
All Errors	14,932	6,789	\$325,945	5.4
% Top 20	92.0%	93.8%		

*Many patient abandonment cases arise from the incarcerated population, and involve allegations of civil rights violations and deliberate denial of necessary medical care.

Among all diagnostic-related cases (most common misdiagnoses or failure to diagnose), most involved cancers of various forms (629 cases), of which the most common was breast cancer (133 cases). This category was followed by heart conditions (235 cases), fractures (192 cases), digestive disorder (184 cases) and strokes (169 cases) comprising the top 5. Diagnosing a healthy patient with a condition was the 7th most common diagnostic error, with 80 cases during the period.

Diagnostic-Related Claims, 2005-2017

By Medical Condition

Infectious / Non-infectious Condition Indicator	Medical Condition	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
NI	All Cancer	629	292	\$416,726	7.2
NI	Heart Condition	235	130	\$422,968	7.9
NI	Fracture	192	57	\$124,895	3.8
NI	Digestive disorders	184	90	\$400,450	5.8
NI	Stroke	169	82	\$574,195	7.1
NI	Embolism/ thrombosis	102	57	\$385,360	7.3
NA	Healthy patient misdiagnosed with	80	33	\$402,251	3.6
NI	Hematoma / aneurysm	61	37	\$525,247	8.0
NI	Traumatic injury to internal organs	66	31	\$378,935	7.1
I	Respiratory infections	51	25	\$281,674	6.8
NI	Spine / spinal cord disorder (not	57	24	\$1,311,306	5.9
I	Meningitis, encephalitis, and central	49	32	\$1,219,940	7.7
NI	Spinal injury	47	20	\$1,020,092	5.7
NI	Injury to tendons or muscle	38	9	\$89,258	6.4
NI	Diseases of the genitourinary system	35	18	\$485,139	5.9
NI	Diseases of the reproductive system	31	14	\$240,446	5.0
I	Digestive disorders	29	11	\$57,727	4.8
NI	Nutritional, and metabolic disorders	26	16	\$956,208	7.6
NI	Visual condition	25	14	\$502,221	5.6
NI	Musculoskeletal disorder order-	21	6	\$1,415,000	4.2
I	Sepsis	15	10	\$575,950	7.4
NI	Blood and immune disorders	15	9	\$599,352	6.9
NI	Diabetes	14	8	\$393,586	6.4
NI	Compartment syndrome	12	9	\$256,666	5.3
I	Heart Condition	13	6	\$472,500	8.3
Top 25			1,040	\$473,324	6.5
All Diagnostic			902	\$592,761	6.5

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(s) or organ function, or loss of vision or hearing.

Medical Outcomes, 2005-2017 With Average Payment > \$500,000				
Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Quadriplegia	46	32	\$1,964,122	8.0
Cerebral palsy	62	47	\$1,910,805	7.6
Progression - meningitis	13	8	\$1,866,000	6.2
Paraplegia	120	76	\$1,506,517	7.0
Cognitive or neurological deficit	574	304	\$1,175,156	6.3
Hemiplegia	21	11	\$1,127,273	6.8
Full loss of hearing	2	2	\$1,037,500	6.0
Progression of encephalitis	2	1	\$1,025,000	6.5
Coma	10	5	\$930,000	5.7
Contraction - meningitis	13	2	\$840,000	4.9
Full loss of vision	45	25	\$761,026	6.6
Perm full loss of organ / organ function	29	18	\$702,326	9.4
Stroke	134	69	\$681,362	6.8
Permanent partial loss of organ function	289	91	\$668,625	5.3
Cauda equine syndrome	17	10	\$588,252	5.9
Develop of sepsis while under care	62	33	\$566,415	7.2
Amputation of two or more limbs	14	7	\$559,769	7.1
Amputation of other body part	195	90	\$541,814	7.2
Amputation of one limb	164	90	\$517,974	6.1
Amputation of hands/feet	35	14	\$511,372	5.7

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.

New to This Report

The term “never event” was introduced in 2001 by the National Quality Forum (NQF). Categories of “never events” were later developed in conjunction with the Centers for Medicare and Medicaid Services (CMS). In general, such events are defined as unambiguous, readily quantifiable, and preventable. The occurrence of a never event is indicative of a lapse in expected standards of care or a failure of procedures. The list of never events was expanded in 2011, and includes serious events such as wrong site surgery, surgery on the wrong patient, medication errors, falls, and acts of self-harm among others.

In 2016, the DIFP began coding medial liability claims data according to never event criteria, based on the narratives submitted by insurers with each claim. Due to limitations of the data (as well as the medical expertise of DIFP analysts), such events are divided into “never events” when strict definitional criteria can be reasonably be assessed by the information provided, and “never event-type occurrences” when data are indeterminate with respect to such criteria, or when health outcomes do not meet the injury-severity thresholds required for a strict “never event.” See Section VII for additional explanation.

Never Event Type Occurrences, Claims Closed 2005-2017									
Event description	Definition includes injury severity	Never events that include assessment of injury severity where applicable				Never event type occurrence without reference to injury severity			
		Claims Closed	Claims Closed with Payment	Total Paid	Average Payment	Claims Closed	Claims Closed with Payment	Total Paid	Average Payment
Surgical Events									
Wrong body part	N	128	94	\$22,708,926	\$241,584	128	94	\$22,708,926	\$241,584
Wrong patient	N	9	7	\$1,087,000	\$155,286	9	7	\$1,087,000	\$155,286
Wrong procedure	N	5	5	\$342,500	\$68,500	5	5	\$342,500	\$68,500
Foreign object retained	N	353	204	\$25,128,532	\$123,179	353	204	\$25,128,532	\$123,179
Injuries from Improper Use of Devices / Device Malfunction									
Contaminated drugs or biologics	Y	4	3	\$2,625,000	\$875,000	14	6	\$2,755,000	\$459,167
Device misuse/malfunction	Y	78	64	\$27,760,085	\$433,751	122	93	\$30,792,194	\$331,099
Air embolism	Y	20	17	\$8,401,844	\$494,226	20	17	\$8,401,844	\$494,226
Patient Protection Events									
Discharge of incompetent person	N	16	6	\$1,255,000	\$209,167	16	6	\$1,255,000	\$209,167
Patient Elopement	Y	12	12	\$4,398,155	\$366,513	13	12	\$4,398,155	\$366,513
Suicide / self-harm	Y	52	29	\$8,489,167	\$292,730	52	29	\$8,489,167	\$292,730
Care Management Events									
Medication error	Y	248	180	\$59,049,519	\$328,053	555	380	\$61,287,715	\$161,283
Administration of blood products	Y	12	10	\$7,112,000	\$711,200	12	10	\$7,112,000	\$711,200
Maternal death of healthy patient	Y	3	2	\$1,058,000	\$529,000	3	2	\$1,058,000	\$529,000
Death of neonate in low risk pregnancy	Y					523	300	\$290,102,708	\$967,009
Falls	Y	597	388	\$62,087,316	\$160,019	887	538	\$69,736,640	\$129,622
Pressure ulcers	Y	272	172	\$40,728,939	\$236,796	336	198	\$42,317,439	\$213,724
Loss of biological specimen	Y					11	8	\$297,748	\$37,219
Follow-up on test results	Y	50	33	\$15,556,449	\$471,408	57	35	\$12,312,449	\$351,784

Never Event Type Occurrences, Claims Closed 2005-2017									
Event description	Definition includes injury severity	Never events that include assessment of injury severity where applicable				Never event type occurrence without reference to injury severity			
		Claims Closed	Claims Closed with Payment	Total Paid	Average Payment	Claims Closed	Claims Closed with Payment	Total Paid	Average Payment
Environmental Events									
Electric shock	Y	1	1	\$650,000	\$650,000	2	2	\$660,000	\$330,000
Problem with delivery of oxygen /gas	Y	7	7	\$2,080,000	\$297,143	7	7	\$2,080,000	\$297,143
Burns	Y	24	16	\$1,710,295	\$106,893	70	53	\$2,941,176	\$55,494
Injury restrains / bedrail	Y	4	4	\$1,541,365	\$385,341	4	4	\$1,541,365	\$385,341
Radiological Events									
Metallic object in MRI	Y	5	4	\$468,077	\$117,019	7	5	\$476,827	\$95,365
Criminal Events									
Sexual abuse/assault	N	59	26	\$3,199,494	\$123,057	59	26	\$3,199,494	\$123,057
Assault	Y	3	3	\$587,499	\$195,833	16	12	\$2,096,999	\$174,750

Other never events excluded:

1. Intraoperative /postoperative death in an American Society of Anesthesiologists Class 1 patient – records are generally lacking in detail to determine class of patient. This event is therefore excluded entirely.
2. Care ordered by someone impersonating a health care provider – there are no instances of this type of event in the medical liability records
3. Death or serious injury of a neonate in a low-risk pregnancy – Since details of claims are almost always insufficient to identify a “low-risk pregnancy,” all deaths or serious injuries are classed as “never event-type occurrences” rather than “never events.”

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 pending claims. Incurred losses 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

Licensed and Non-Admitted Market					
Year	Market Segment	Premium Written	Market Share	Premium Earned	Market Share
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	\$46,890,108	23.1%	\$43,878,085	21.6%
	Total	\$202,757,493	100.0%	\$203,062,525	100.0%
2010	Licensed	\$145,448,052	76.2%	\$145,359,818	75.8%
	Non-Admitted	\$45,522,402	23.8%	\$46,431,961	24.2%
	Total	\$190,970,454	100.0%	\$191,791,779	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	80.1%	\$131,620,895	79.9%
	Non-Admitted	\$32,177,497	19.9%	\$33,151,848	20.1%
	Total	\$161,399,270	100.0%	\$164,772,743	100.0%
2013	Licensed	\$120,659,064	76.0%	\$126,106,473	74.3%
	Non-Admitted	\$38,175,180	24.0%	\$43,605,934	25.7%
	Total	\$158,834,244	100.0%	\$169,712,407	100.0%
2014	Licensed	\$118,842,690	82.3%	\$117,910,519	81.3%
	Non-Admitted	\$25,598,079	17.7%	\$27,033,167	18.7%
	Total	\$144,440,769	100.0%	\$144,943,686	100.0%
2015	Licensed	\$114,306,152	80.6%	\$116,671,496	81.3%
	Non-Admitted	\$27,473,479	19.4%	\$26,804,992	18.7%
	Total	\$141,779,631	100.0%	\$143,476,488	100.0%
2016	Licensed	\$113,635,101	79.4%	\$113,264,712	79.6%
	Non-Admitted	\$29,570,516	20.6%	\$29,074,675	20.4%
	Total	\$143,205,617	100.0%	\$142,339,387	100.0%
2017	Licensed	\$110,581,910	78.3%	\$109,178,708	79.5%
	Non-Admitted	\$30,612,399	21.7%	\$28,171,922	20.5%
	Total	\$141,194,309	100.0%	\$137,350,630	100.0%

2017 Market Share, All Companies With > 0.1% Market Share

Admitted or Licensed Companies			Surplus Lines and Risk Retention Groups		
Company	Premium Written	Market Share	Company	Premium Written	Market Share
Missouri Hospital Plan	\$26,314,239	18.6%	Columbia Casualty Company	\$4,891,194	3.5%
Medical Protective Company	\$13,754,429	9.7%	National Fire & Marine Insurance	\$2,165,910	1.5%
Medical Liability Alliance	\$10,535,256	7.5%	Illinois Union Insurance Company	\$2,127,689	1.5%
Norcal Mutual Insurance Company	\$9,587,391	6.8%	Caring Communities, A Reciprocal Risk	\$2,103,413	1.5%
Proassurance Indemnity Company Inc	\$8,485,533	6.0%	Saint Lukes Health System Risk Retention	\$1,726,942	1.2%
Doctors Company An Interins Exchange	\$7,992,515	5.7%	Steadfast Insurance Company	\$1,713,662	1.2%
Missouri Professional Mutual Physician	\$7,383,269	5.2%	Health Care Industry Liability Reciprocal	\$1,388,802	1.0%
Missouri Doctors Mutual Insurance	\$3,456,568	2.4%	Endurance American Specialty Insurance	\$1,161,809	0.8%
MMIC Insurance Inc	\$2,803,899	2.0%	Ophthalmic Mutual Insurance Company	\$1,032,388	0.7%
American Casualty Company Of Reading	\$2,436,026	1.7%	Evanston Insurance Company	\$963,313	0.7%
Keystone Mutual Insurance Company	\$2,422,026	1.7%	Homeland Insurance Company Of New	\$955,852	0.7%
Health Care Indemnity Inc	\$2,139,667	1.5%	Oms National Insurance Company, Risk	\$909,115	0.6%
Preferred Physicians Medical Risk	\$1,745,888	1.2%	Ironshore Specialty Insurance Company	\$827,578	0.6%
NCMIC Insurance Company	\$1,717,189	1.2%	Lexington Insurance Company	\$766,243	0.5%
Pharmacists Mutual Insurance Company	\$1,315,950	0.9%	Orthoforum Insurance Company A Risk	\$698,783	0.5%
Physicians Insurance Mutual	\$1,010,145	0.7%	The Mutual Risk Retention Group, Inc.	\$644,878	0.5%
Liberty Insurance Underwriters Inc	\$880,826	0.6%	Hudson Specialty Insurance Company	\$541,893	0.4%
Capson Physicians Insurance Company	\$870,217	0.6%	Admiral Insurance Company	\$520,586	0.4%
Professional Solutions Insurance	\$645,569	0.5%	Proassurance Specialty Insurance	\$456,054	0.3%
Fair American Insurance And	\$593,811	0.4%	Landmark American Insurance Company	\$452,239	0.3%
Continental Casualty Company	\$556,777	0.4%	Hallmark Specialty Insurance Company	\$445,154	0.3%
Ace American Insurance Company	\$508,114	0.4%	General Star Indemnity Company	\$405,399	0.3%
Preferred Professional Insurance	\$438,725	0.3%	Allied World Surplus Lines Insurance	\$389,288	0.3%
Kansas Medical Mutual Insurance	\$426,369	0.3%	James River Insurance Company	\$320,607	0.2%
Cincinnati Insurance Company The	\$417,361	0.3%	Starstone Specialty Insurance Company	\$268,011	0.2%
Podiatry Insurance Company Of America	\$364,518	0.3%	Aix Specialty Insurance Company	\$190,800	0.1%
Allied World Insurance Company	\$284,382	0.2%	Emergency Physicians Insurance	\$189,751	0.1%
National Union Fire Insurance Company	\$255,966	0.2%	Capitol Specialty Insurance Corporation	\$189,399	0.1%
Church Mutual Insurance Company	\$183,935	0.1%	Aspen Specialty Insurance Company	\$186,544	0.1%
Physicians Standard Insurance Company	\$150,636	0.1%	Princeton Excess And Surplus Lines	\$170,171	0.1%
			Arch Specialty Insurance Company	\$169,292	0.1%
			TDC Specialty Insurance Company	\$167,340	0.1%

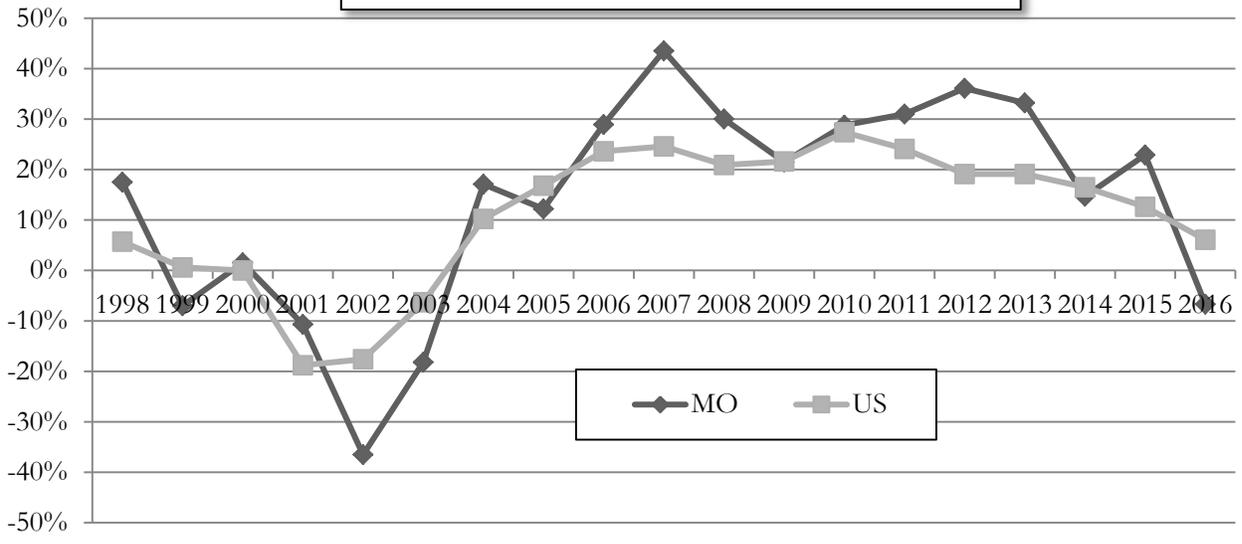
**2017 Market Share – Physicians & Surgeons Coverage
(Companies with greater than 0.1% market share)**

Company	Premium Written, 2016	Market Share
Medical Protective Company	\$10,192,642	15.0%
Medical Liability Alliance	\$9,923,360	14.6%
Norcal Mutual Insurance Company	\$9,587,391	14.1%
Doctors Company An Interins Exchange	\$7,992,515	11.8%
Proassurance Indemnity Company Inc	\$7,793,278	11.5%
Missouri Professionals Mutual	\$7,383,269	10.9%
Missouri Doctors Mutual Insurance Company	\$3,456,568	5.1%
MMIC Insurance Inc	\$2,686,562	4.0%
Keystone Mutual Insurance Company	\$2,422,026	3.6%
Preferred Physicians Medical Risk Retention G	\$1,745,888	2.6%
Physicians Insurance Mutual	\$1,010,145	1.5%
Liberty Insurance Underwriters Inc	\$880,826	1.3%
Capson Physicians Insurance Company	\$870,217	1.3%
Fair American Insurance And Reinsurance Co	\$593,811	0.9%
Kansas Medical Mutual Insurance Company	\$386,192	0.6%
Allied World Insurance Company	\$284,382	0.4%
Preferred Professional Insurance Company	\$204,371	0.3%
Physicians Standard Insurance Company	\$150,636	0.2%
Medmal Direct Insurance Company	\$116,547	0.2%
Continental Insurance Company The	\$83,526	0.1%
Continental Casualty Company	\$76,902	0.1%

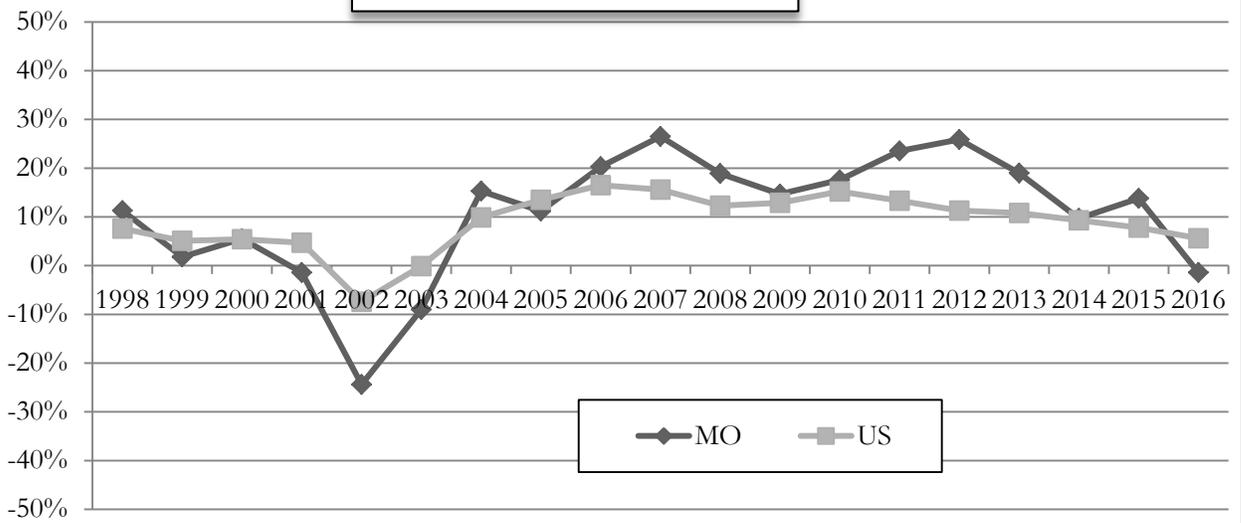
Medical Professional Liability Profitability in Missouri							
All Writers, Including Excess and Surplus Lines Companies							
Year	Premium Earned	Direct Losses Incurred	Defense and Cost Containment Expenses	Other Expenses	Claims + Expenses	Profit on Insurance Transactions	Return on Net Worth
1993	\$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	22.5%	11.7%	28.6%	62.8%	33.2%	19.0%
2014	\$145,215,577	31.9%	27.0%	30.8%	89.6%	15.1%	12.4%
2015	\$143,482,089	18.5%	25.0%	32.4%	75.9%	23.4%	18.3%
2016	\$142,371,449	65.3%	22.8%	34.9%	123.0%	-9.0%	-1.5%
2017	\$137,405,743	58.0%	30.6%	33.6%	122.2%	-6.4%	0.2%

*Source: NAIC, *Profitability by Line by State*.

Profit on Insurance Transactions



Return on Net Worth



**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
2014	\$118,842,690	\$51,180,712	\$117,930,969	\$33,554,372	\$25,692,833	\$12,526,211	\$8,651,706	\$1,820,539
2015	\$114,306,152	\$47,836,377	\$116,671,496	\$23,056,528	\$27,145,084	\$12,798,511	\$8,844,017	\$1,880,467
2016	\$113,635,101	\$46,853,477	\$113,293,453	\$64,361,816	\$15,369,598	\$13,532,563	\$8,867,237	\$2,945,972
2017	\$110,581,910	\$48,898,384	\$109,206,859	\$70,100,720	\$25,509,729	\$13,850,168	\$8,515,977	\$1,618,763

Licensed Market Medical Professional Liability Data form the Financial Annual Statement					
% or Written Premium		% of Earned Premium			
Year	Direct Losses Paid	Direct Losses Incurred	Defense & Cost Containment Expenses	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%
2005	40.8%	46.0%	34.9%	7.8%	88.7%
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%
2014	43.1%	28.5%	21.8%	19.5%	69.7%
2015	41.8%	19.8%	23.3%	20.2%	63.2%
2016	41.2%	56.8%	13.6%	22.4%	92.7%
2017	44.2%	64.2%	23.4%	22.0%	109.5%

Surplus Lines Market								
Medical Professional Liability								
Data form 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	\$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	\$11,301,841	\$48,424,897	\$8,415,924	\$5,701,835	\$200,498	\$3,599,954	\$309,966
2008	\$42,535,711	\$12,632,056	\$43,250,769	\$11,858,488	\$3,894,411	\$243,800	\$4,655,756	\$363,755
2009	\$46,890,108	\$26,507,125	\$43,878,085	\$47,985,264	\$51,261,811	\$510,763	\$4,052,908	\$323,852
2010	\$45,522,402	-\$4,315,363	\$46,471,296	-\$19,142,542	-\$43,332,592	\$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	\$272,281
2013	\$38,175,180	\$9,765,893	\$43,757,605	\$10,532,328	\$4,817,558	\$615,634	\$3,299,246	\$325,939
2014	\$25,598,079	\$16,945,127	\$27,284,608	\$12,767,670	\$7,126,991	\$778,917	\$2,477,782	\$222,097
2015	\$27,473,479	\$14,200,191	\$26,810,593	\$3,461,894	\$5,187,063	\$524,416	\$2,999,177	\$241,037
2016	\$29,570,516	\$17,696,029	\$29,077,996	\$28,608,485	\$5,877,708	\$753,287	\$3,603,085	\$264,828
2017	\$30,612,399	\$15,421,747	\$28,198,884	\$9,660,617	\$8,680,400	\$779,163	\$3,892,186	\$222,163

Surplus Lines Market					
Medical Professional Liability					
Data form the Financial Annual Statement					
% 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	24.0%	17.4%	11.8%	8.5%	37.6%
2008	29.7%	27.4%	9.0%	12.2%	48.6%
2009	56.5%	109.4%	116.8%	11.1%	237.3%
2010	-9.5%	-41.2%	-93.2%	10.7%	-123.8%
2011	25.6%	24.1%	11.0%	9.7%	44.8%
2012	50.3%	24.7%	12.9%	11.5%	49.1%
2013	25.6%	24.1%	11.0%	9.7%	44.8%
2014	66.2%	46.8%	26.1%	12.8%	85.7%
2015	51.7%	12.9%	19.3%	14.0%	46.3%
2016	59.8%	98.4%	20.2%	15.9%	134.5%
2017	50.4%	34.3%	30.8%	17.4%	82.4%

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%	-11.2%
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	\$87,488,292	\$32,178,191	36.8%	\$99,226,970	\$13,132,287	13.2%	-2.8%
2014	\$79,013,127	\$36,940,432	46.8%	\$78,298,966	\$26,991,745	34.5%	-9.7%
2015	\$75,011,759	\$34,298,618	45.7%	\$76,626,408	\$14,585,676	19.0%	-5.1%
2016	\$71,283,262	\$26,484,714	37.2%	\$72,308,015	\$34,206,657	47.3%	-5.0%
2017	\$67,940,489	\$24,326,023	35.8%	\$66,673,811	\$40,774,941	61.2%	-4.7%

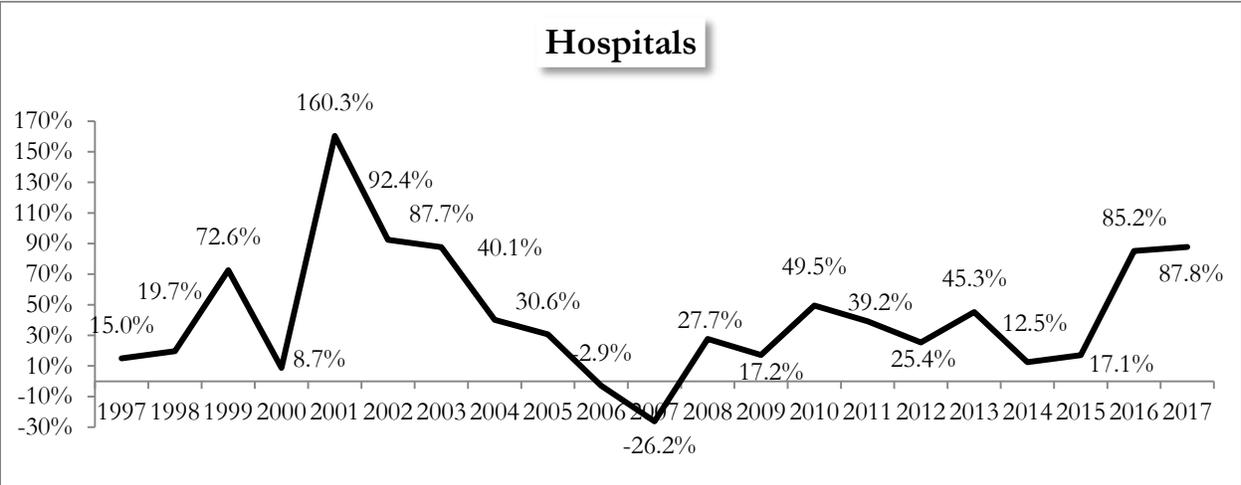
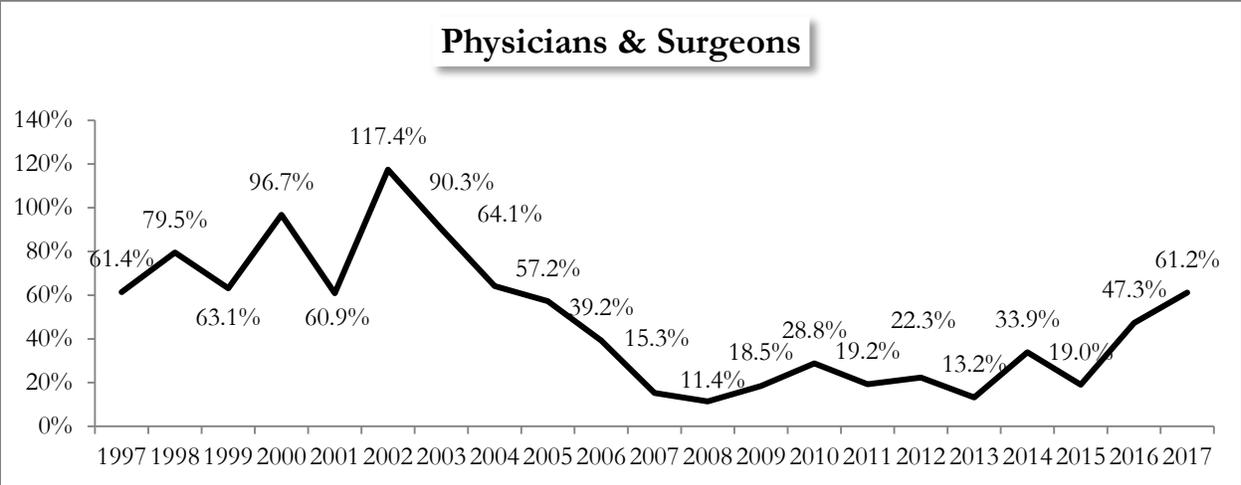
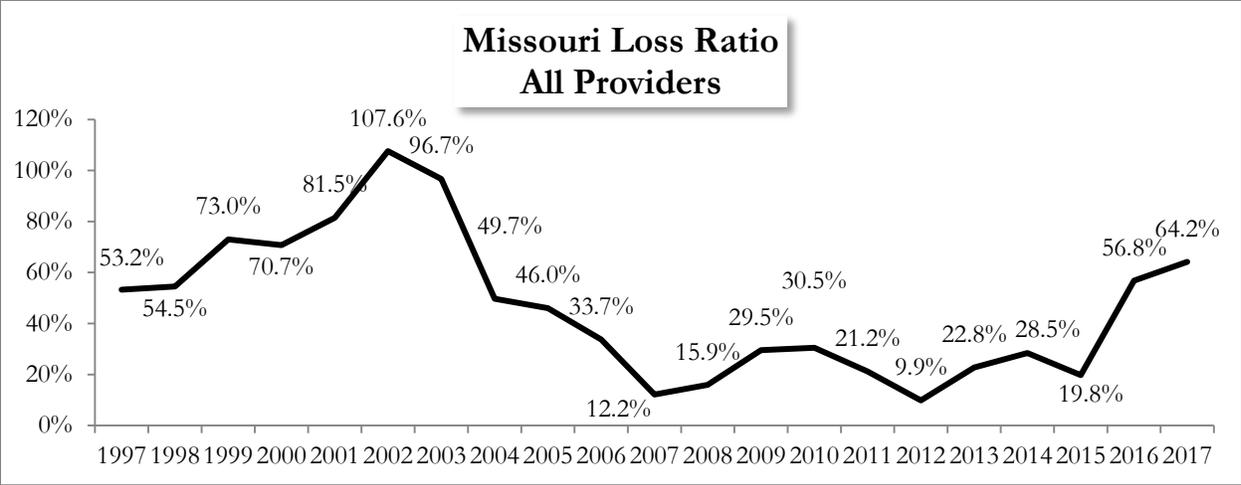
Licensed Medical Professional Liability Market - Dentists							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$3,620,053	\$1,506,555	41.6%	\$3,729,611	\$1,683,415	45.1%	
1998	\$3,387,756	\$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	21.6%	\$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%
2014	\$3,705,444	\$427,504	11.5%	\$3,226,524	-\$229,235	-7.1%	-5.6%
2015	\$4,094,802	\$1,432,031	35.0%	\$4,142,222	\$1,534,063	37.0%	10.5%
2016	\$4,089,461	\$352,294	8.6%	\$4,110,217	\$4,001,382	97.4%	-0.1%
2017	\$3,824,206	\$493,101	12.9%	\$3,591,286	-\$783,451	-21.8%	-6.5%

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	146.8%	\$515,088	\$159,655	31.0%	9.9%
2002	\$520,559	\$1,250	0.2%	\$644,834	-\$475,689	-73.8%	-3.8%
2003	\$535,407	\$0	0.0%	\$519,272	\$57,165	11.0%	2.9%
2004	\$581,243	\$345,000	59.4%	\$585,759	\$490,327	83.7%	8.6%
2005	\$413,075	\$0	0.0%	\$432,944	-\$8,469	-2.0%	-28.9%
2006	\$421,601	\$0	0.0%	\$458,201	-\$12,376	-2.7%	2.1%
2007	\$415,168	\$0	0.0%	\$422,461	\$65,415	15.5%	-1.5%
2008	\$1,989,794	\$418	0.0%	\$327,923	-\$31,573	-9.6%	379.3%
2009	\$309,742	\$0	0.0%	\$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%	-78.5%
2013	\$2,069,756	\$1,630,000	78.8%	\$1,921,284	-\$768,534	-40.0%	454.1%
2014	\$1,899,970	\$1,105,000	58.2%	\$1,813,223	\$1,520,063	83.8%	-8.2%
2015	\$1,790,147	\$500,000	27.9%	\$1,950,459	-\$578,037	29.6%	-5.8%
2016	\$2,058,911	\$170,000	8.3%	\$1,998,258	\$385,652	19.3%	15.0%
2017	\$2,086,414	\$319,730	15.3%	\$2,121,115	\$383,267	18.1%	1.3%

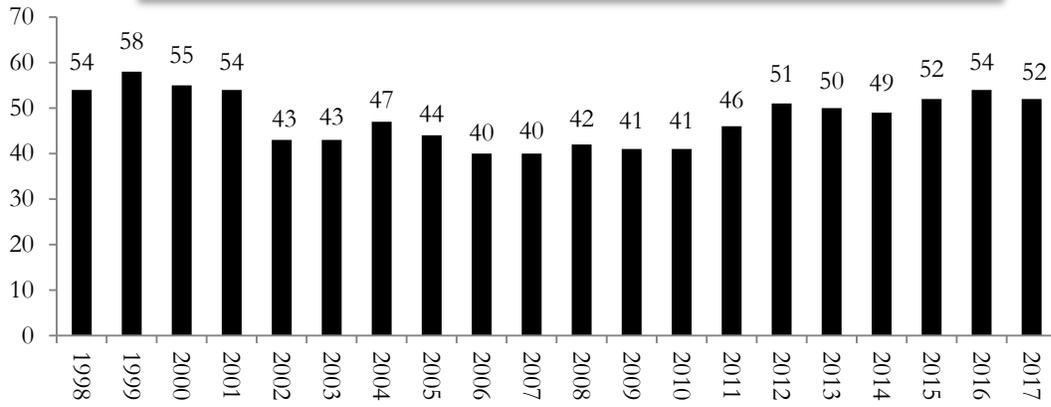
Licensed Medical Professional Liability Market - Hospitals							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$15,248,580	\$3,143,280	20.6%	\$13,199,320	\$1,974,721	15.0%	
1998	\$12,555,794	\$8,428,222	67.1%	\$14,604,144	\$2,875,637	19.7%	-17.7%
1999	\$16,948,592	\$12,870,063	75.9%	\$17,606,187	\$12,774,561	72.6%	35.0%
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	30.6%	-11.8%
2006	\$41,885,262	\$9,486,946	22.6%	\$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%
2014	\$28,011,464	\$8,456,987	30.2%	\$27,930,444	\$3,501,381	12.5%	2.8%
2015	\$26,720,496	\$8,514,950	31.9%	\$27,278,471	\$4,664,529	17.1%	-4.6%
2016	\$28,327,347	\$17,429,362	61.5%	\$27,266,161	\$23,232,734	85.2%	6.0%
2017	\$29,029,936	\$20,467,000	70.5%	\$29,041,237	\$25,501,445	87.8%	2.5%

Licensed Medical Professional Liability Market - Other

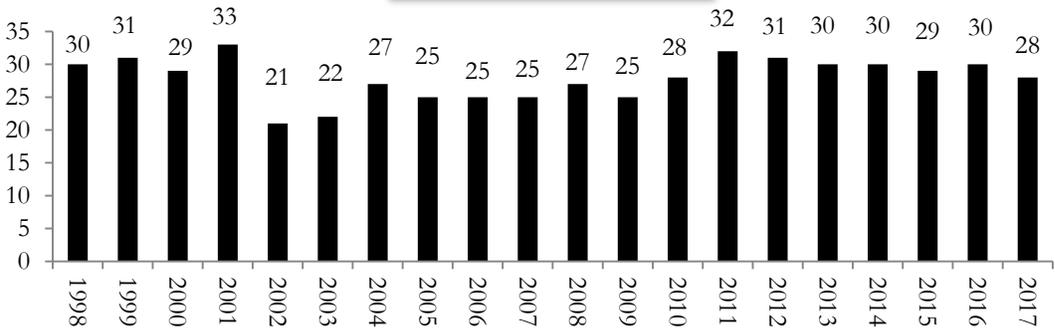
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$18,770,001	\$5,714,900	30.4%	\$20,016,056	\$11,955,336	59.7%	
1998	\$9,437,033	\$10,145,048	107.5%	\$12,744,574	-\$904,059	-7.1%	-49.7%
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%	-588.4%
2002	\$17,925,911	\$7,618,371	42.5%	\$17,112,098	\$15,340,524	89.6%	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%
2014	\$6,212,685	\$4,270,790	68.7%	\$6,661,814	\$2,214,418	33.2%	17.9%
2015	\$6,688,948	\$3,090,778	46.2%	\$6,673,937	\$2,850,289	42.7%	7.7%
2016	\$7,876,120	\$2,417,106	30.7%	\$7,610,797	\$2,535,391	33.3%	17.7%
2017	\$7,700,865	\$3,292,531	42.8%	\$7,779,410	\$4,224,513	54.3%	-2.2%



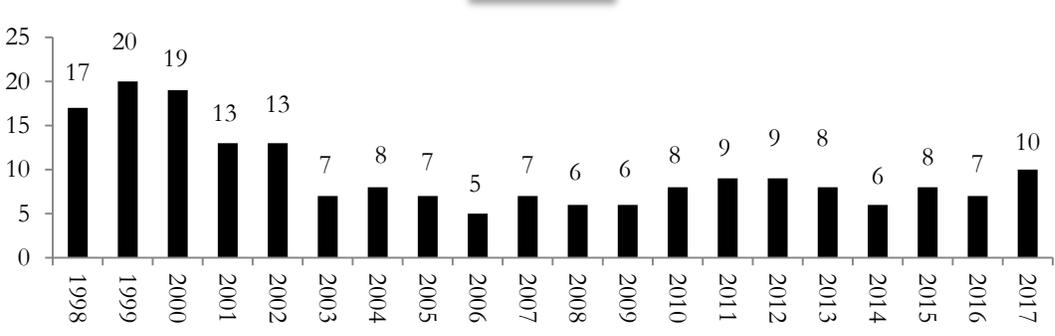
**Companies Writing Medical Professional Liability Coverage in Missouri
Total Licensed Market**



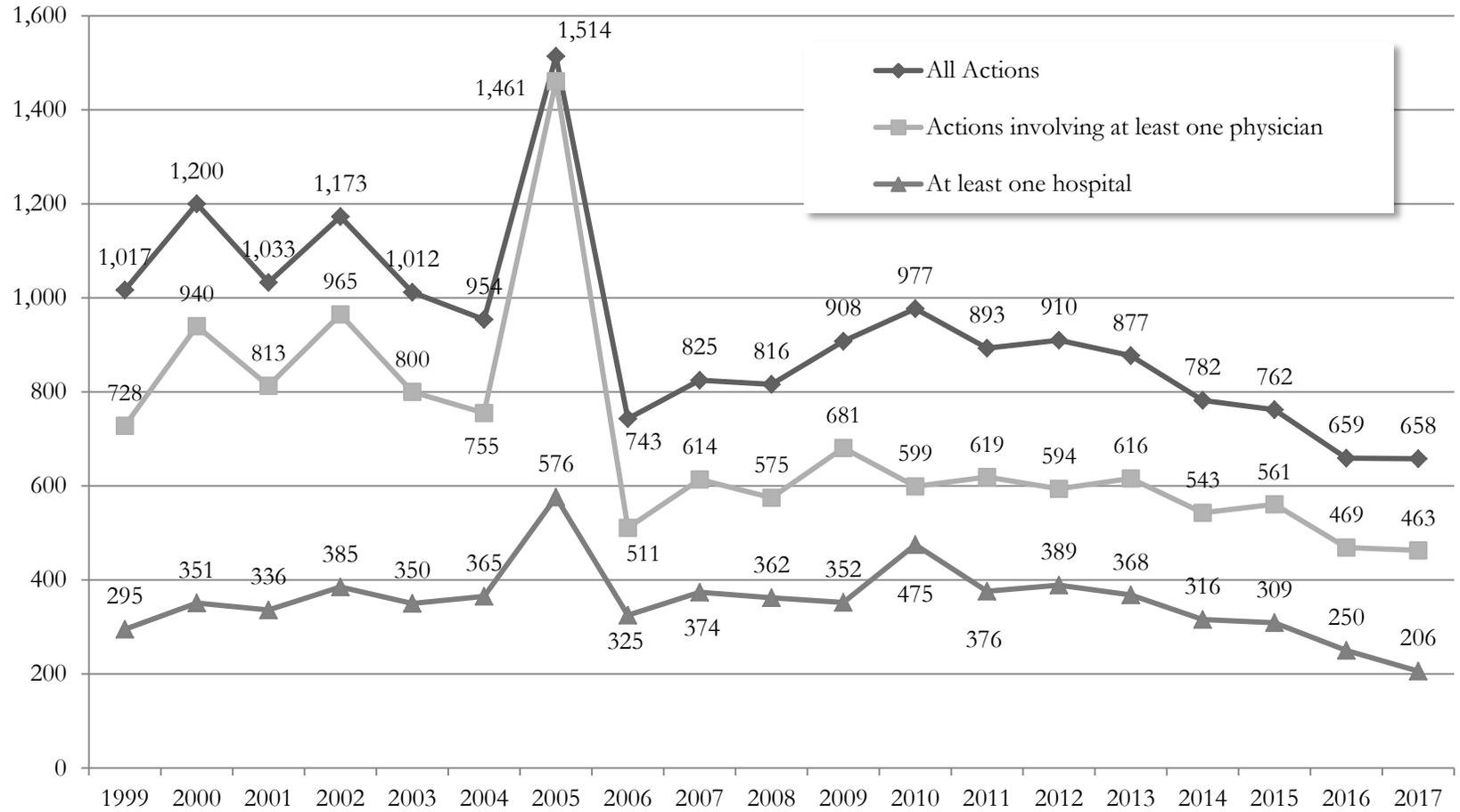
Physicians & Surgeons



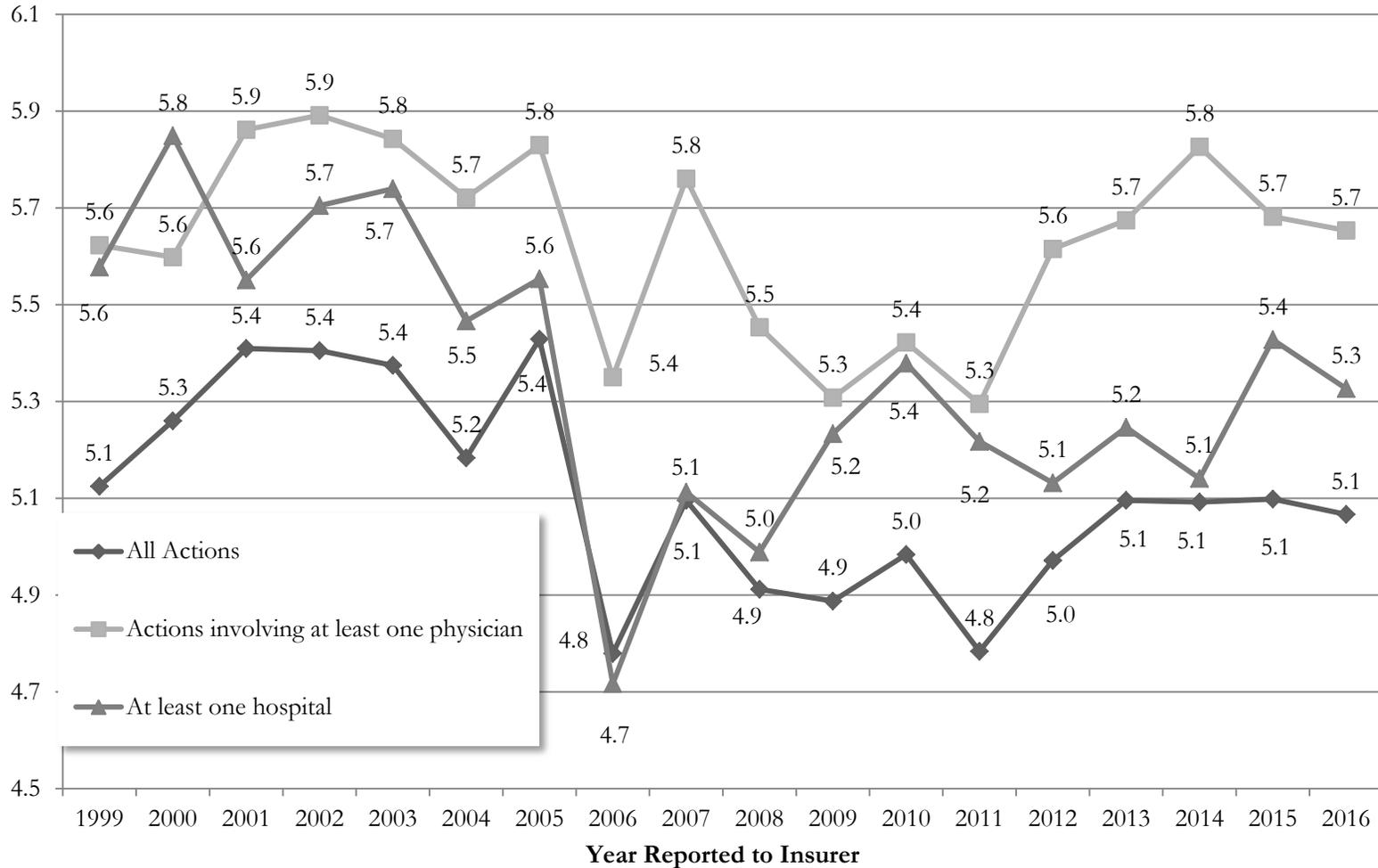
Hospitals



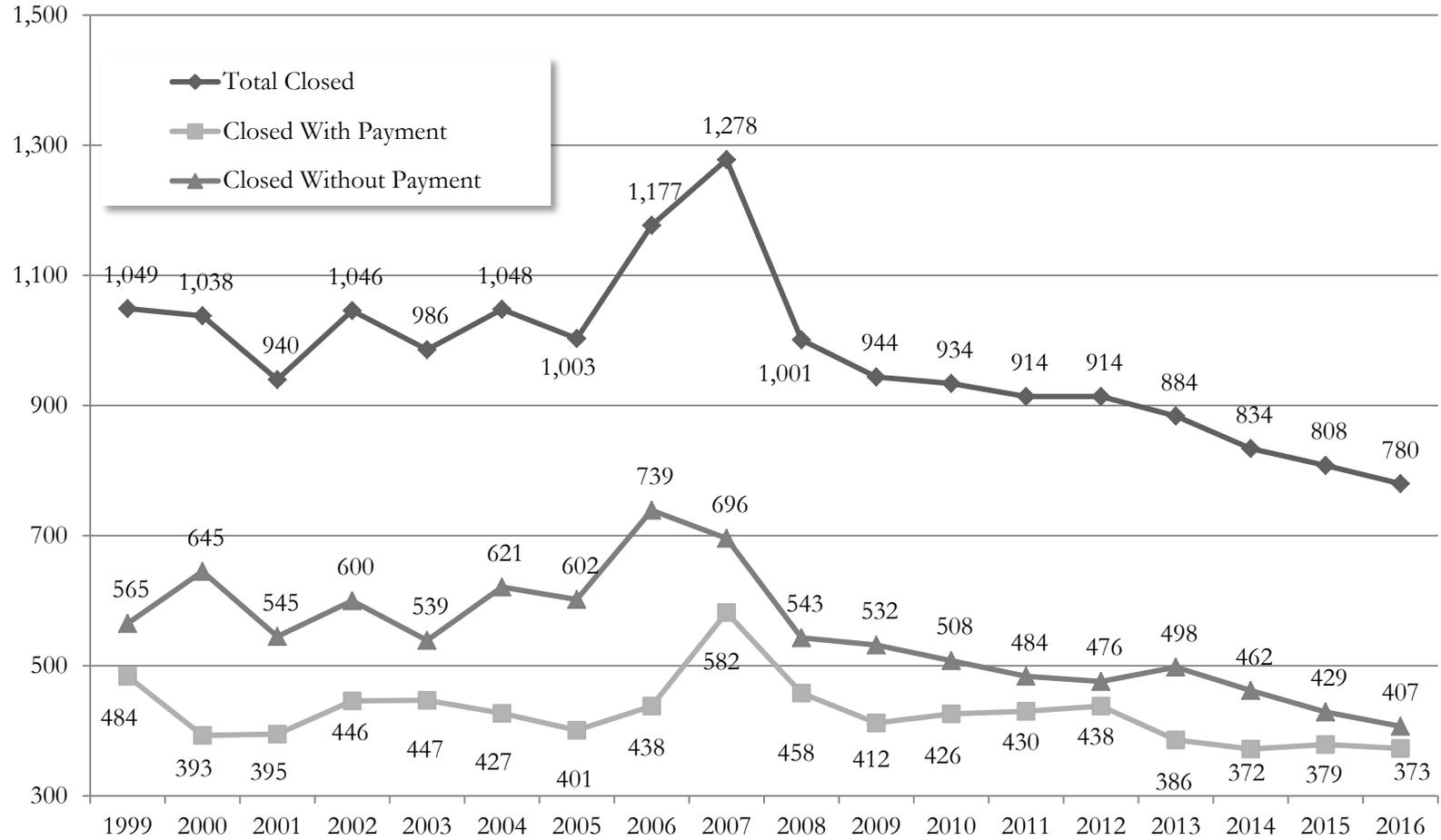
Number of Individuals Bringing Actions During Year



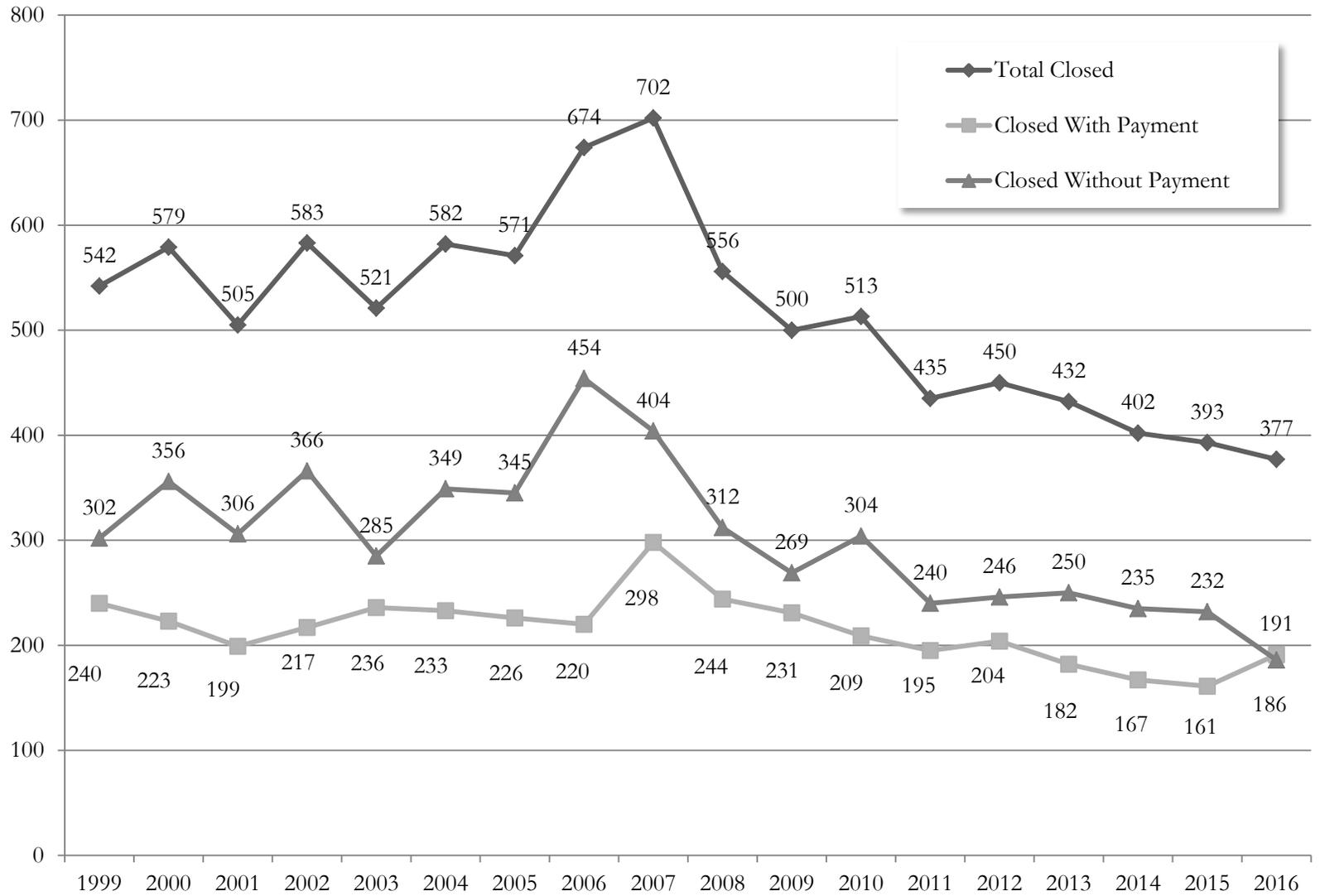
Average Injury Severity Scale 1 - 9



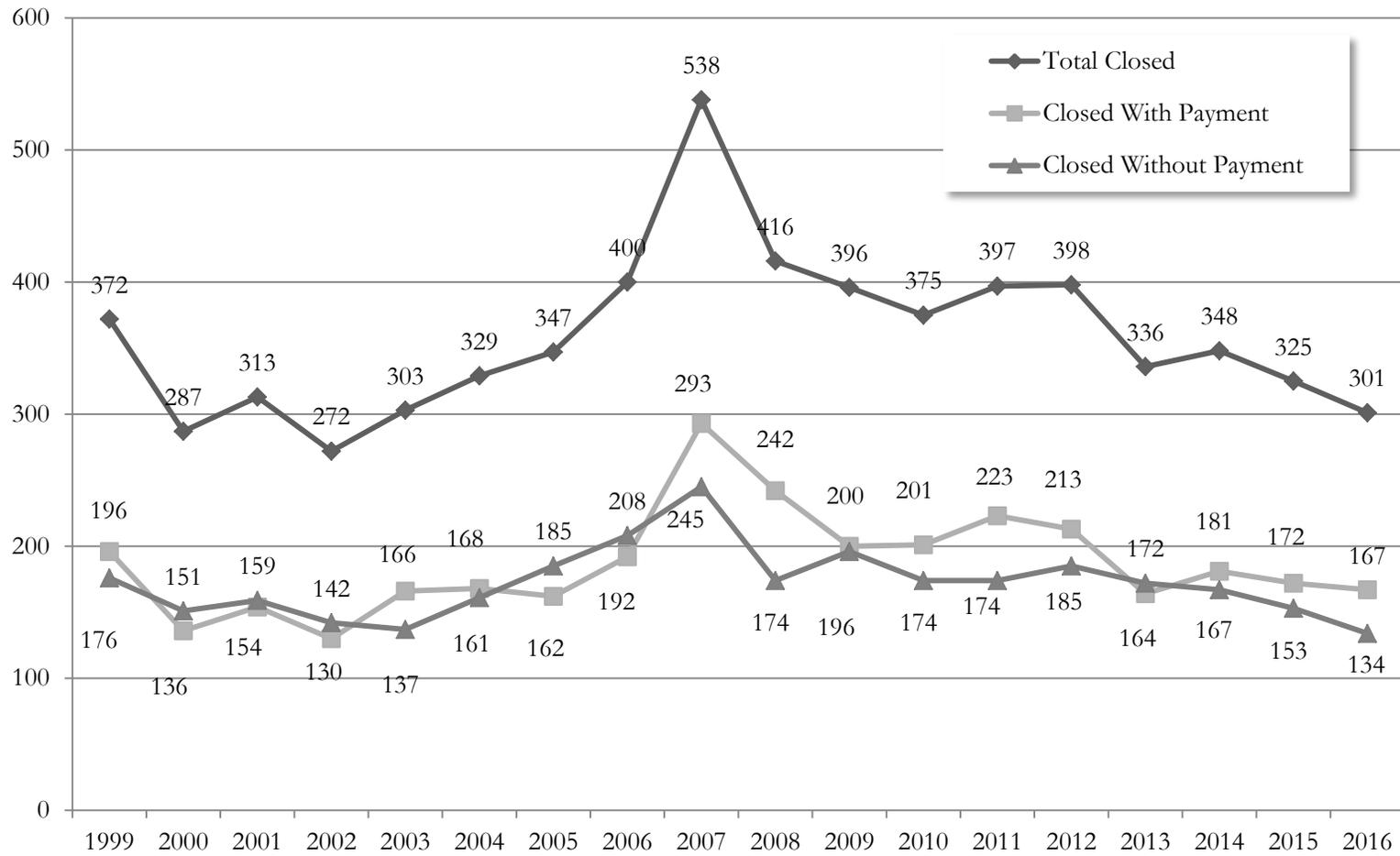
Closed Medical Liability Actions

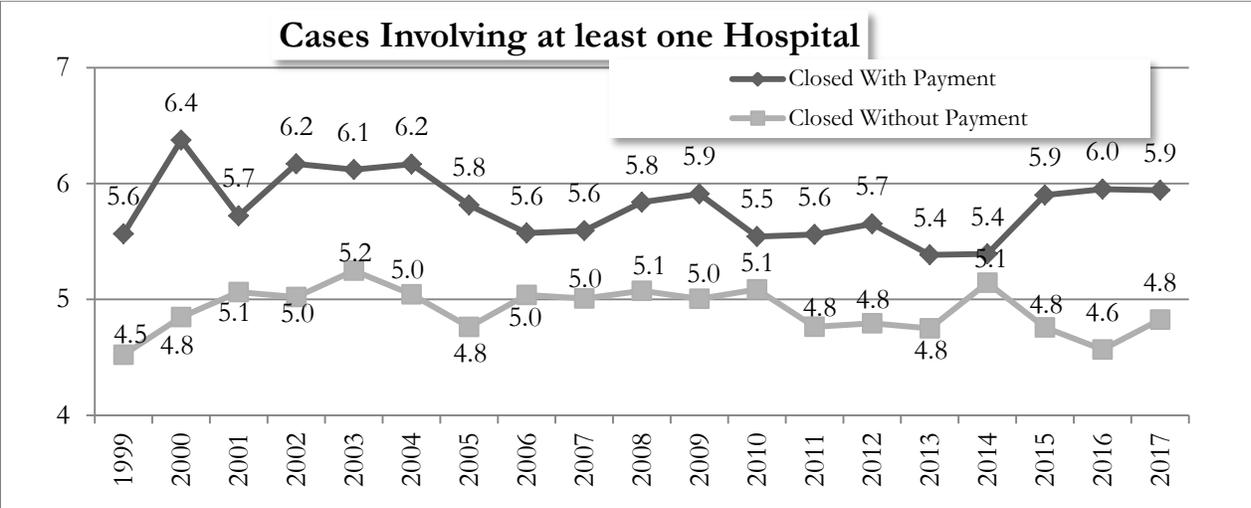
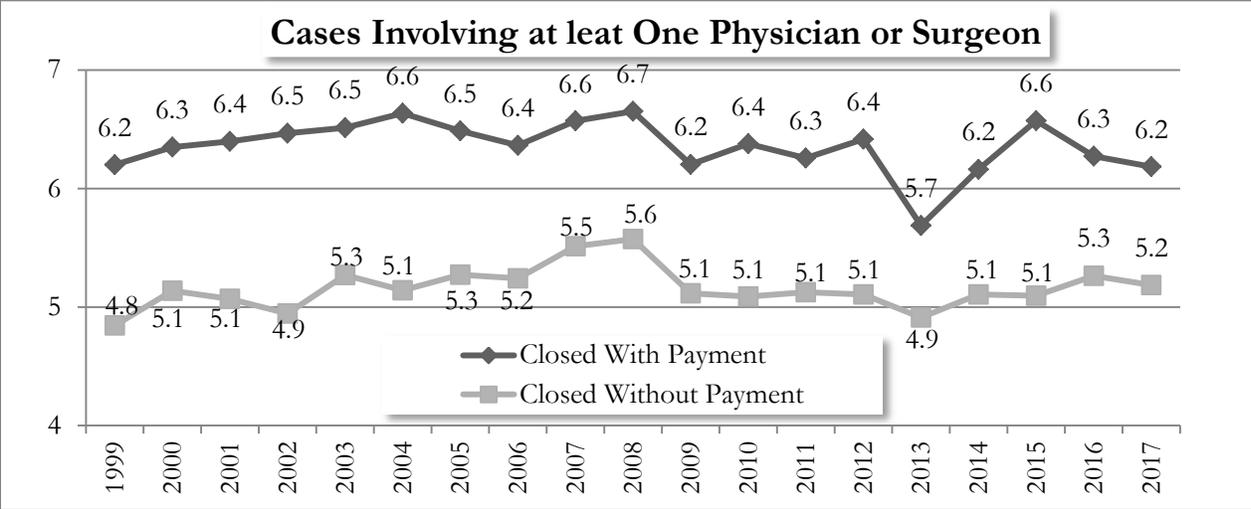
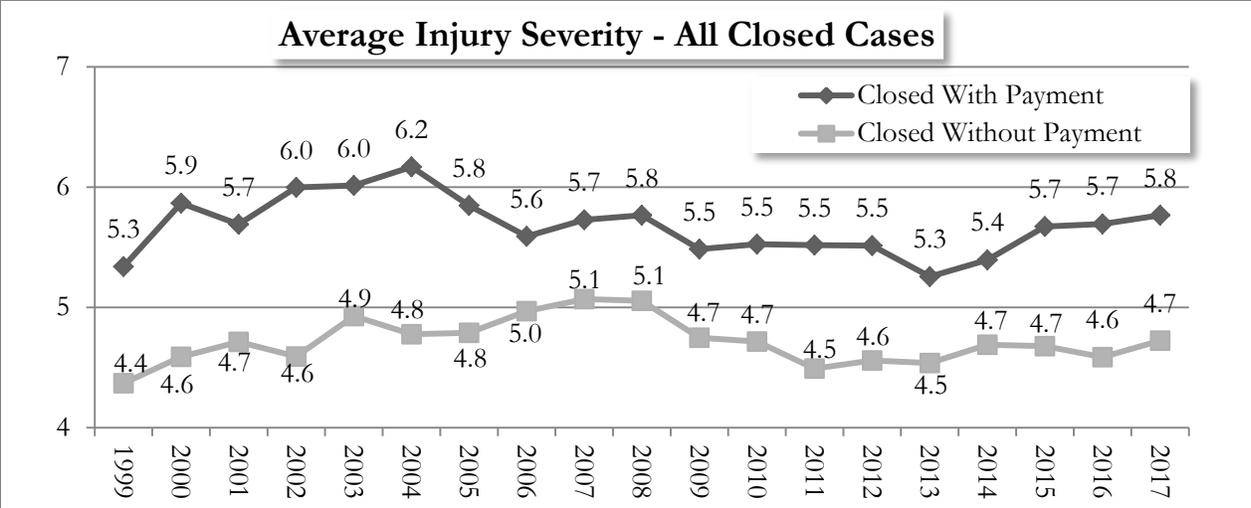


Closed Cases Involving at least one Physician

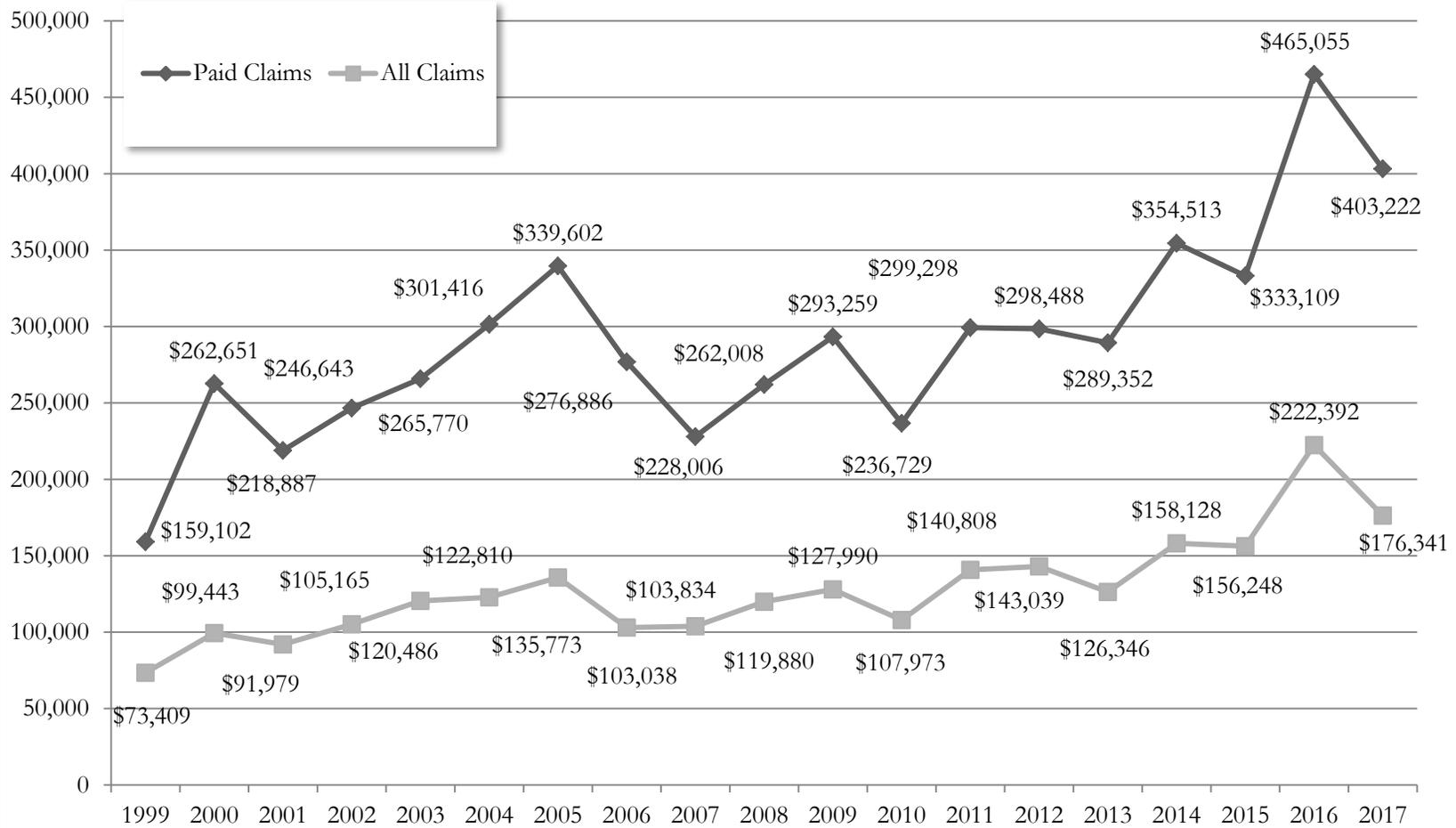


Closed Cases Involving at least One Hospital

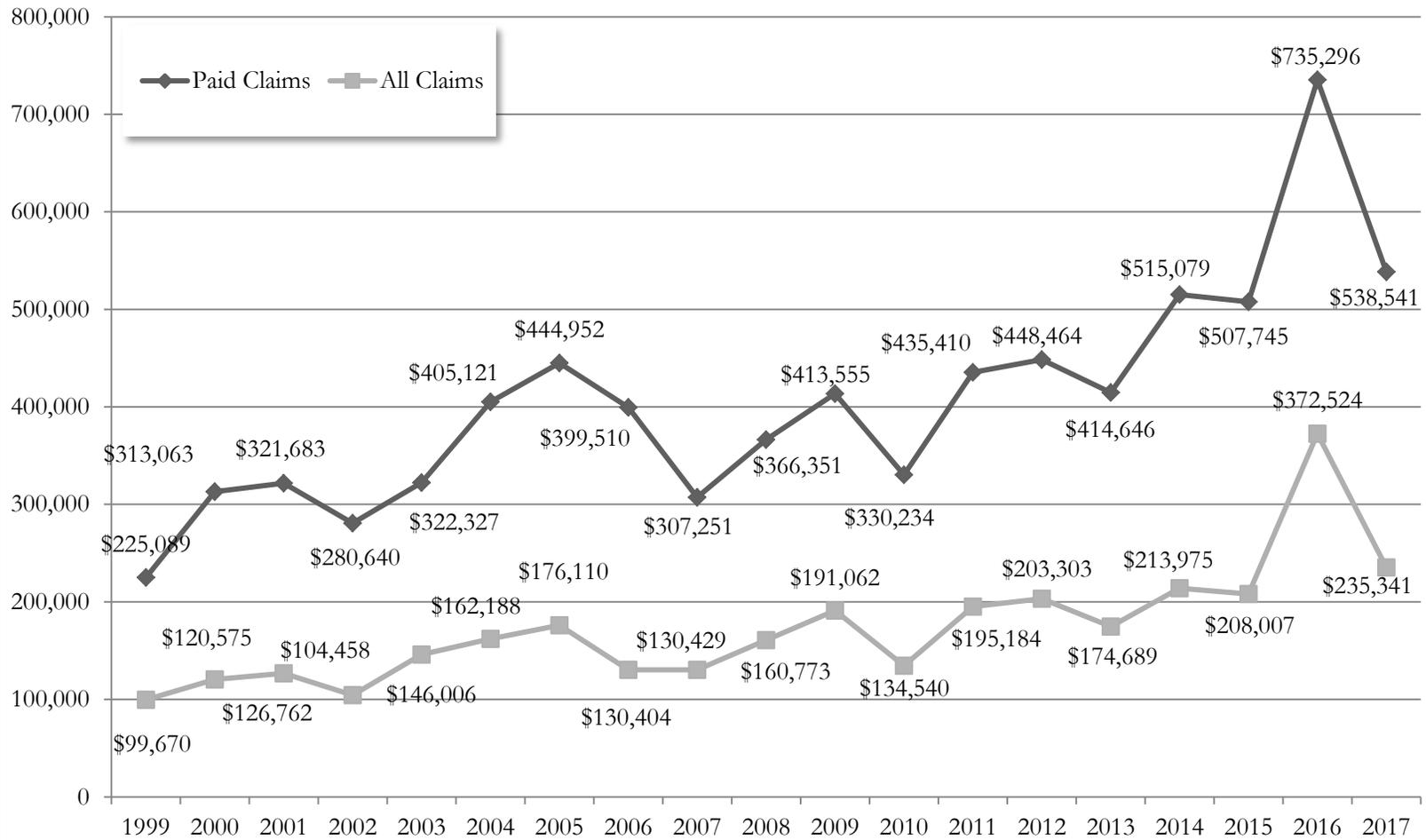




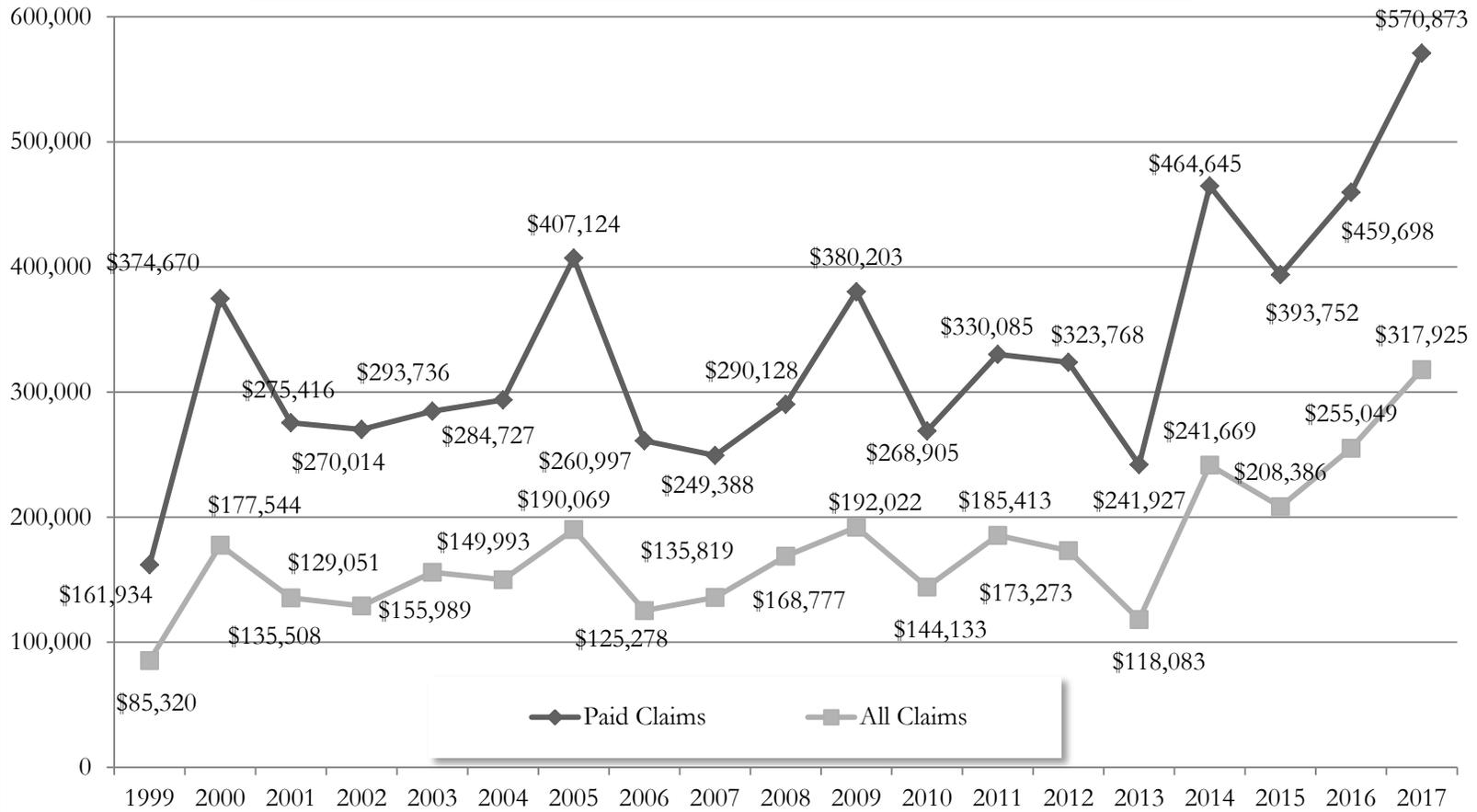
Average Indemnity Paid All Closed Cases



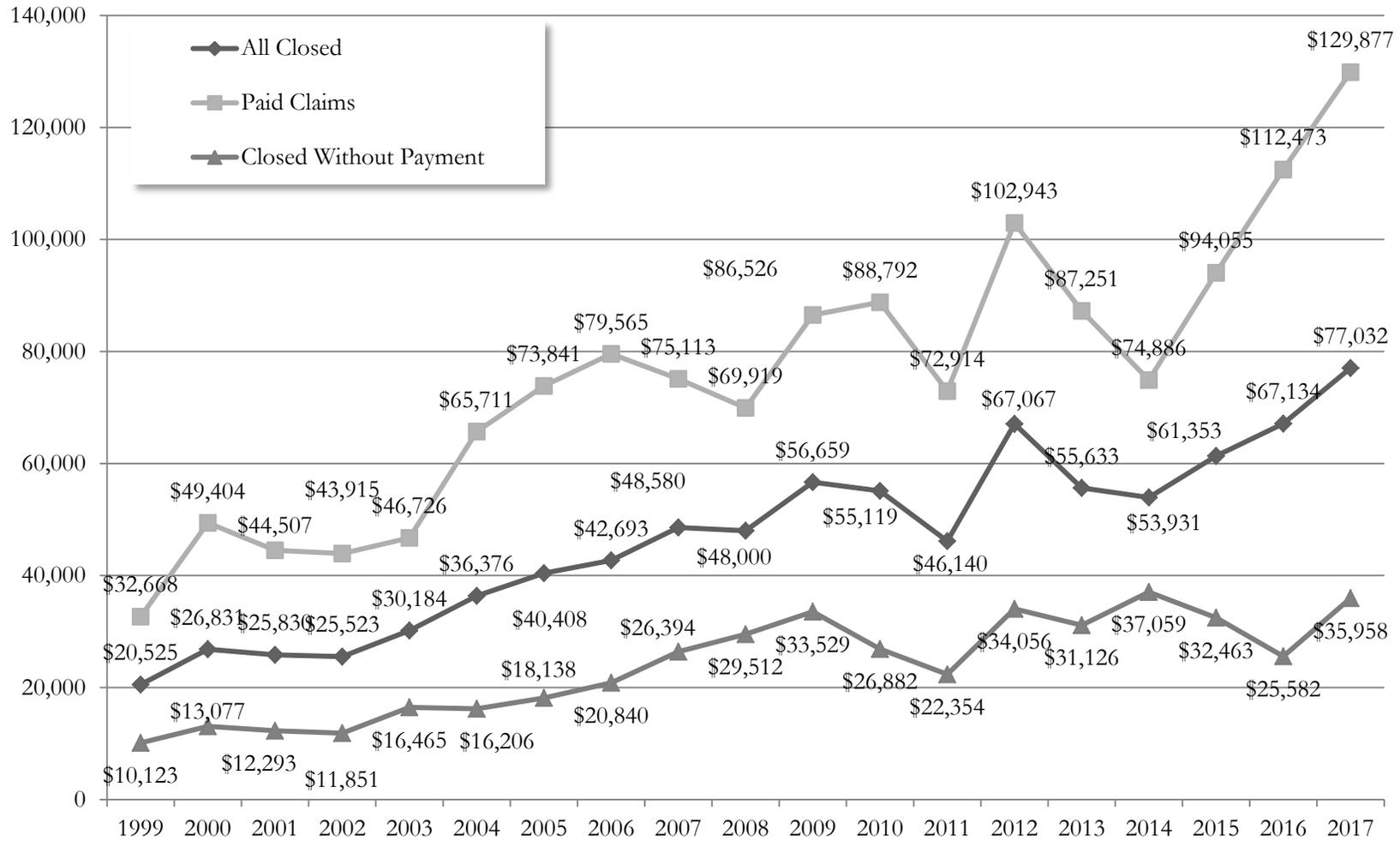
Average Indemnity Paid - Cases Involving at least One Physician or Surgeon



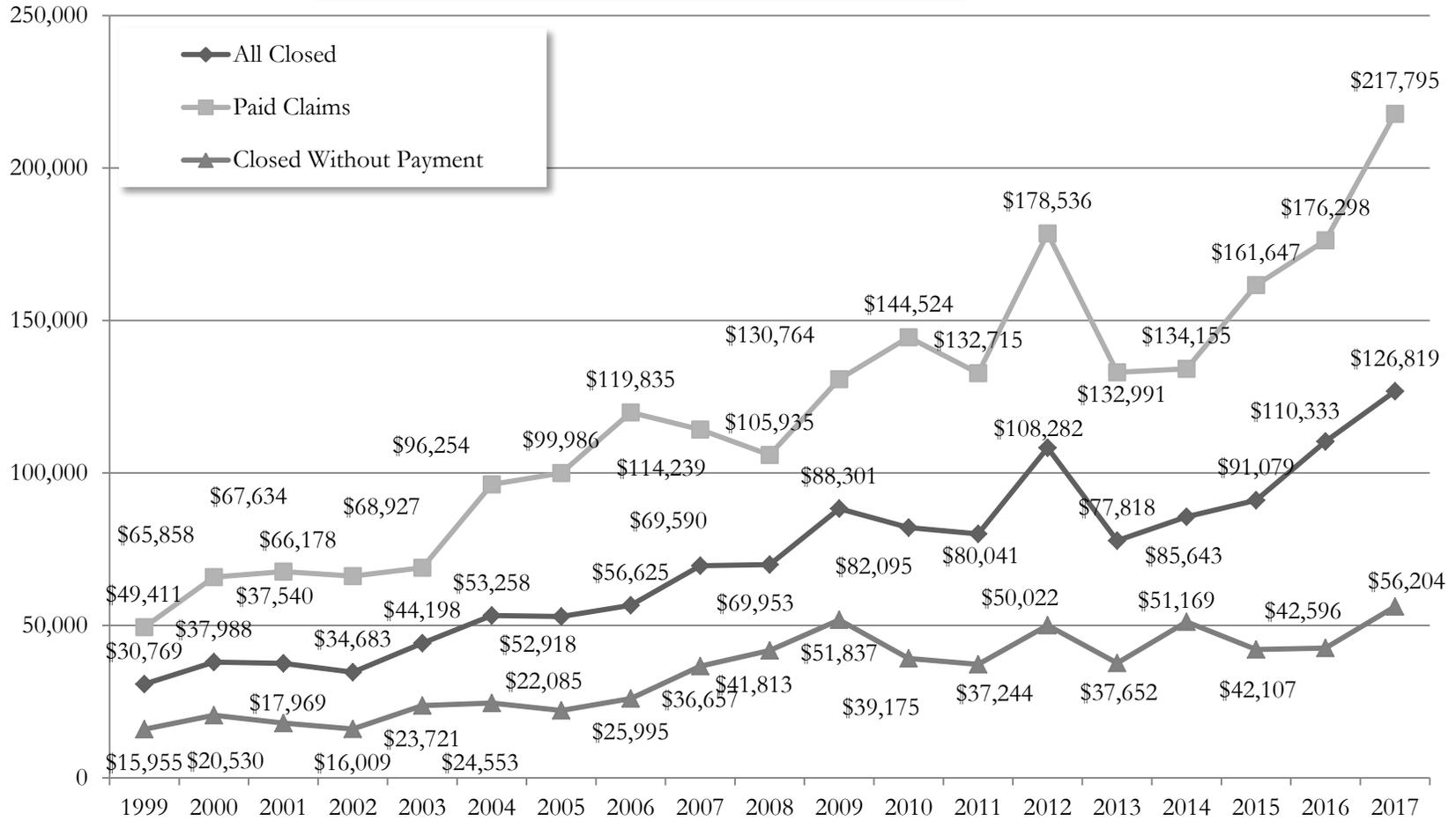
Average Indemnity Paid - Cases Involving at Least One Hospital



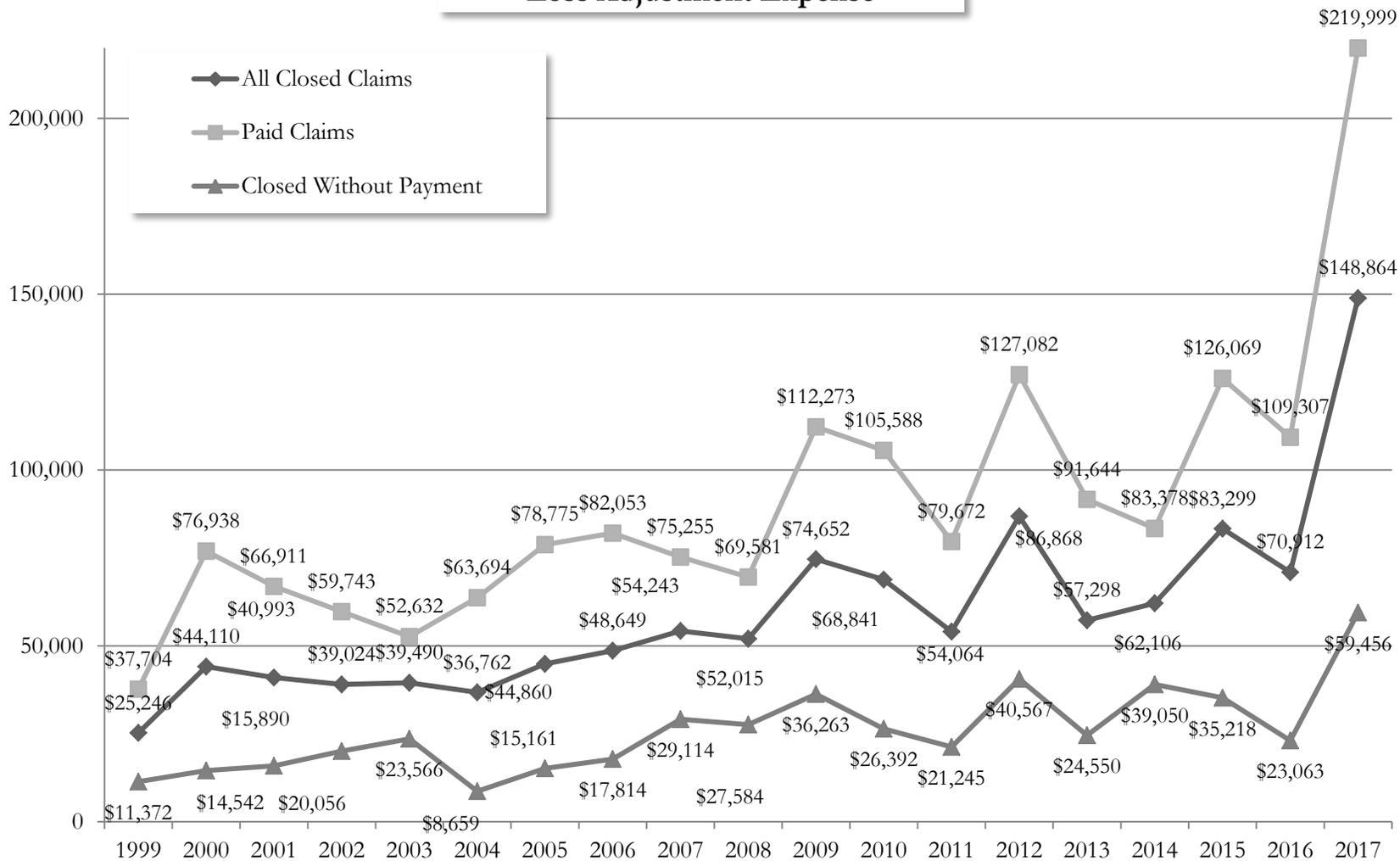
All Cases - Loss Adjustment Expense



Cases With A Least One Physician or Surgeon Loss Adjustment Expense



Cases Involving at Least One Hospital Loss Adjustment Expense



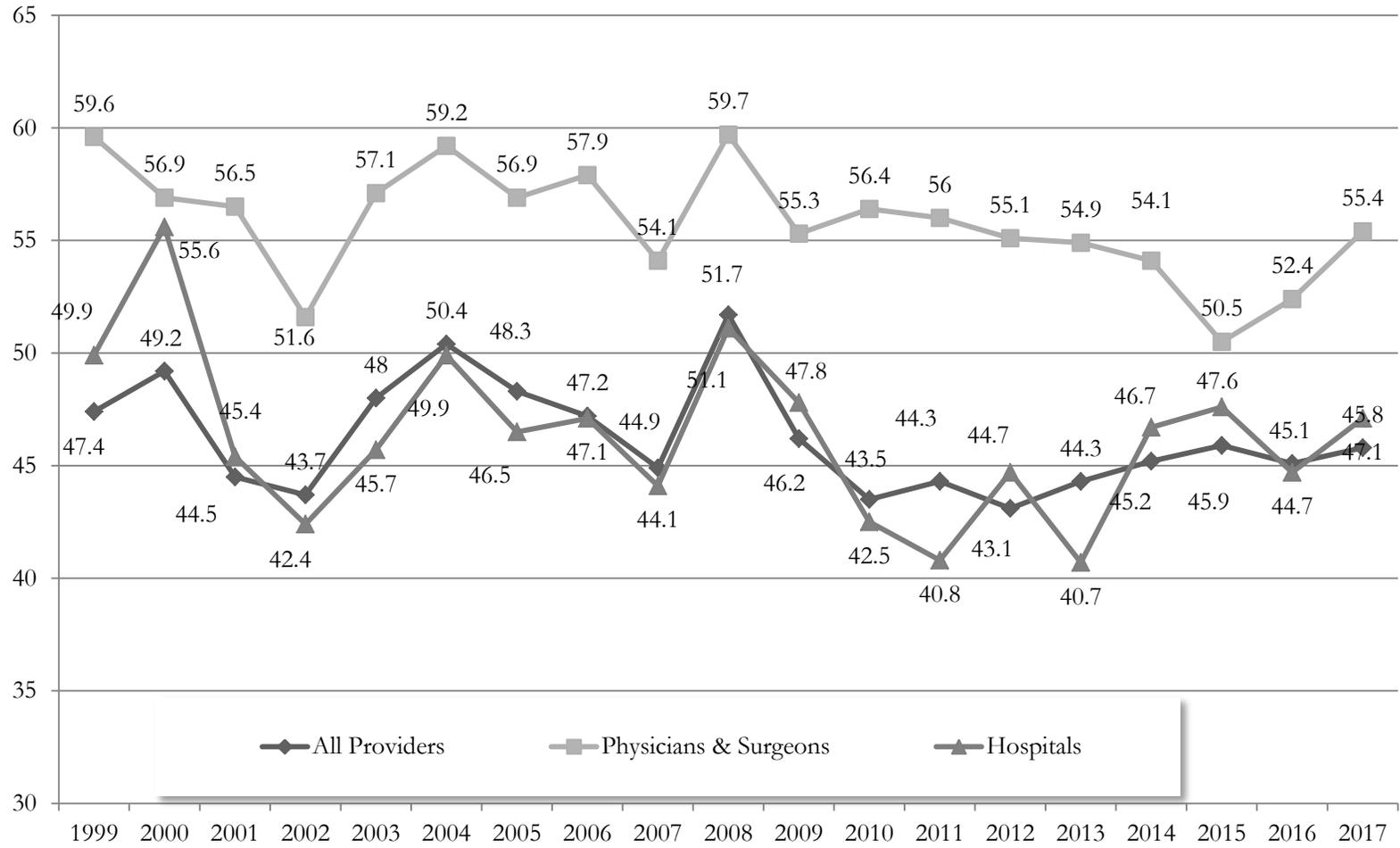
Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Adair	31	18	\$6,006,125	\$333,674
Andrew	1	1	\$250,000	\$250,000
Atchison	4	3	\$971,992	\$323,997
Audrain	25	14	\$2,959,728	\$211,409
Barry	11	7	\$2,779,870	\$397,124
Barton	3	2	\$225,000	\$112,500
Bates	4	3	\$677,000	\$225,667
Benton	3	1	\$25,000	\$25,000
Bollinger	1	0	\$0	\$0
Boone	192	103	\$84,272,360	\$818,178
Buchanan	124	68	\$27,125,113	\$398,899
Butler	60	31	\$8,776,008	\$283,097
Caldwell	0	0	\$0	\$0
Callaway	11	3	\$640,000	\$213,333
Camden	63	33	\$8,122,380	\$246,133
Cape Girardeau	82	34	\$12,401,000	\$364,735
Carroll	6	4	\$1,410,000	\$352,500
Carter	2	0	\$0	\$0
Cass	37	20	\$5,162,662	\$258,133
Cedar	5	1	\$250,000	\$250,000
Chariton	1	0	\$0	\$0
Christian	5	2	\$245,000	\$122,500
Clark	0	0	\$0	\$0
Clay	222	101	\$33,972,730	\$336,364
Clinton	17	7	\$2,137,500	\$305,357
Cole	134	45	\$14,002,850	\$311,174
Cooper	5	2	\$205,000	\$102,500
Crawford	11	1	\$150,000	\$150,000
Dade	1	0	\$0	\$0
Dallas	2	0	\$0	\$0
Daviess	1	0	\$0	\$0
DeKalb	1	1	\$50,000	\$50,000
Dent	5	2	\$250,000	\$125,000
Douglas	2	1	\$9,844	\$9,844
Dunklin	28	14	\$2,740,235	\$195,731
Franklin	22	9	\$5,066,011	\$562,890
Gasconade	2	0	\$0	\$0
Gentry	4	3	\$753,815	\$251,272
Greene	422	247	\$112,996,907	\$457,477

Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Grundy	7	5	\$5,727,500	\$1,145,500
Harrison	3	1	\$180,000	\$180,000
Henry	11	6	\$2,104,498	\$350,750
Hickory	2	1	\$125,000	\$125,000
Holt	2	2	\$222,500	\$111,250
Howard	2	1	\$15,000	\$15,000
Howell	29	16	\$5,366,860	\$335,429
Iron	1	0	\$0	\$0
Jackson	1,016	602	\$267,326,619	\$444,064
Jasper	216	142	\$62,596,075	\$440,817
Jefferson	91	34	\$5,046,000	\$148,412
Johnson	32	21	\$6,113,708	\$291,129
Knox	3	2	\$70,000	\$35,000
Laclede	15	8	\$2,626,495	\$328,312
Lafayette	14	10	\$1,814,000	\$181,400
Lawrence	12	7	\$1,642,500	\$234,643
Lewis	2	1	\$142,000	\$142,000
Lincoln	7	2	\$117,500	\$58,750
Linn	8	4	\$527,500	\$131,875
Livingston	6	2	\$130,000	\$65,000
McDonald	2	1	\$7,500	\$7,500
Macon	4	2	\$410,000	\$205,000
Madison	7	4	\$1,471,689	\$367,922
Maries	1	0	\$0	\$0
Marion	29	12	\$10,713,927	\$892,827
Mercer	1	0	\$0	\$0
Miller	3	0	\$0	\$0
Mississippi	5	2	\$110,000	\$55,000
Moniteau	4	0	\$0	\$0
Monroe	0	0	\$0	\$0
Montgomery	1	0	\$0	\$0
Morgan	3	2	\$200,000	\$100,000
New Madrid	4	3	\$176,071	\$58,690
Newton	24	12	\$5,492,000	\$457,667
Nodaway	13	7	\$4,100,600	\$585,800
Oregon	1	1	\$75,000	\$75,000
Osage	1	0	\$0	\$0
Ozark	0	0	\$0	\$0
Pemiscot	9	4	\$932,500	\$233,125

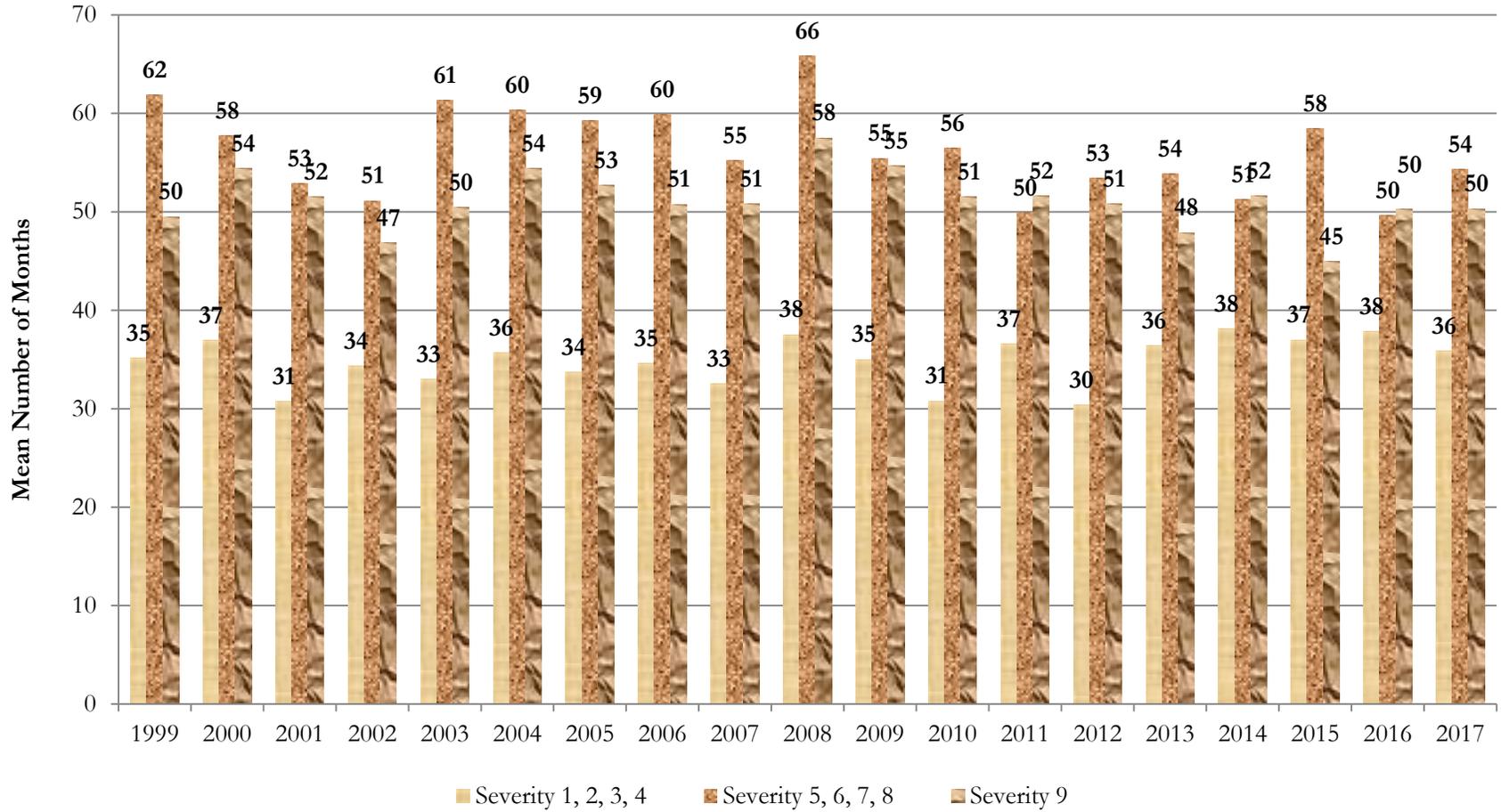
Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Perry	4	1	\$412,500	\$412,500
Pettis	27	16	\$4,998,700	\$312,419
Phelps	48	24	\$6,383,850	\$265,994
Pike	12	3	\$2,830,000	\$943,333
Platte	29	16	\$4,601,000	\$287,563
Polk	26	15	\$2,557,152	\$170,477
Pulaski	3	2	\$928,750	\$464,375
Putnam	1	0	\$0	\$0
Ralls	2	1	\$50,000	\$50,000
Randolph	12	7	\$2,825,000	\$403,571
Ray	5	3	\$770,000	\$256,667
Reynolds	2	2	\$302,375	\$151,188
Ripley	7	2	\$369,087	\$184,544
Saint Charles	125	48	\$10,260,495	\$213,760
Saint Clair	11	7	\$1,515,000	\$216,429
Sainte Genevieve	6	2	\$1,800,000	\$900,000
Saint Francois	43	20	\$5,747,060	\$287,353
Saint Louis	1,155	500	\$145,892,725	\$291,785
Saline	28	17	\$6,297,999	\$370,471
Schuyler	0	0	\$0	\$0
Scotland	4	2	\$505,000	\$252,500
Scott	47	28	\$9,699,089	\$346,396
Shannon	1	1	\$80,000	\$80,000
Shelby	1	0	\$0	\$0
Stoddard	4	2	\$355,000	\$177,500
Stone	5	2	\$275,000	\$137,500
Sullivan	1	0	\$0	\$0
Taney	40	18	\$4,291,500	\$238,417
Texas	9	2	\$322,500	\$161,250
Vernon	11	10	\$5,637,500	\$563,750
Warren	2	2	\$2,970,000	\$1,485,000
Washington	9	1	\$250,000	\$250,000
Wayne	4	2	\$370,002	\$185,001
Webster	5	2	\$615,000	\$307,500
Worth	1	0	\$0	\$0
Wright	0	0	\$0	\$0
Saint Louis City	625	280	\$145,231,234	\$518,683
Appellate Court	3	0	\$0	\$0
Federal Court	239	40	\$13,282,257	\$332,056

Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Guaranty Fund	2	1	\$47,500	\$47,500
Out Of State	129	48	\$17,288,144	\$360,170

Closed With Payment
Mean number of months from incident to disposition

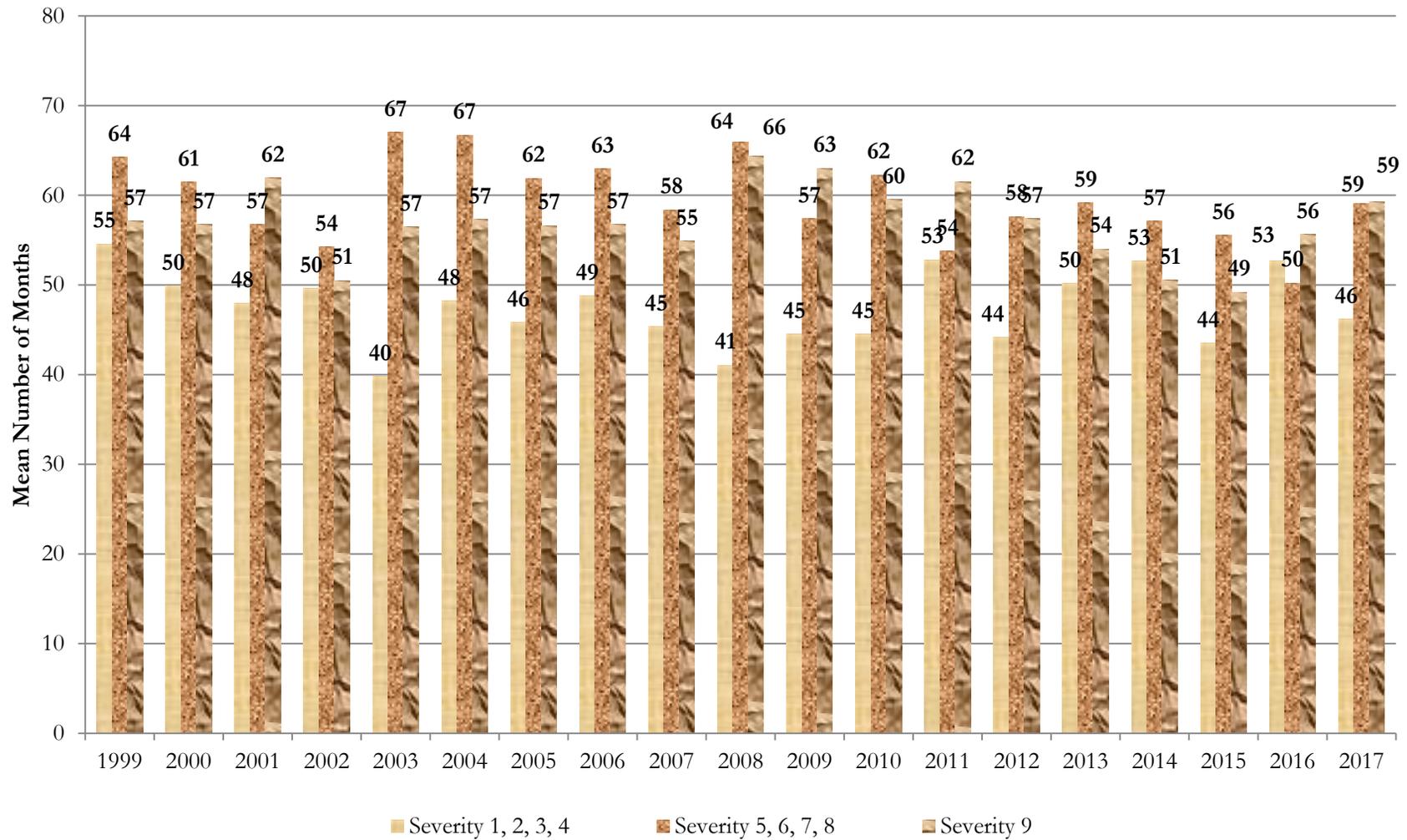


Bodily Injury Severity of Paid Claims - All Providers
Mean Number of Months from Incident to Disposition

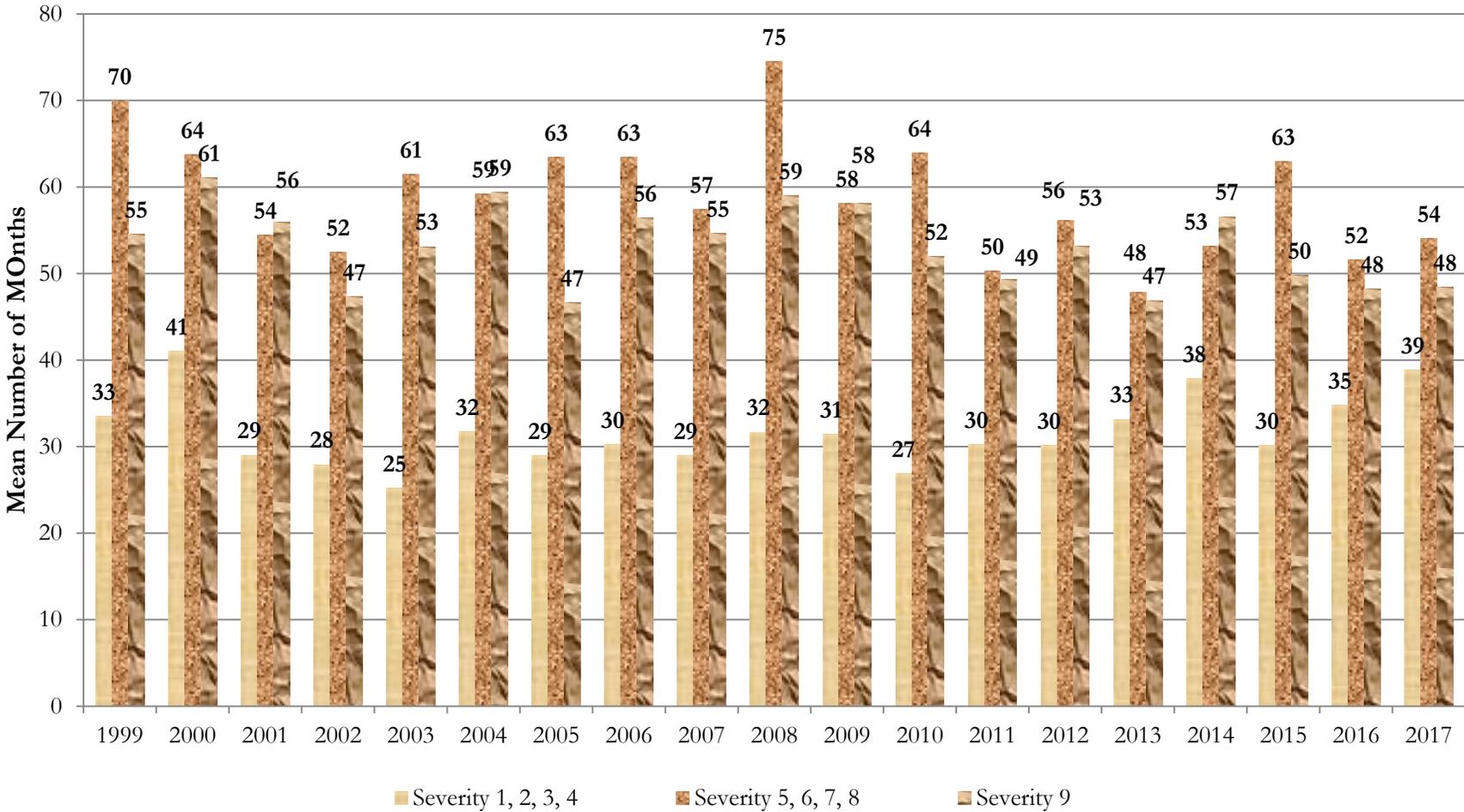


Bodily Injury Severity of Paid Claims - Physicians & Surgeons

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 preceding three years. 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, All Cases Closed in 2017

Indemnity Range	Average Months	Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	43	413	56.3%	\$0	0.00%	\$0	\$0	\$0	\$35,958
1,000 - 1,999	22	3	56.7%	\$2,131	0.00%	\$100	\$610	\$710	\$0
2,000 - 2,999	15	3	57.1%	\$7,875	0.01%	\$1,200	\$1,425	\$2,625	\$2,635
3,000 - ,3999	19	2	57.4%	\$7,150	0.01%	\$0	\$3,575	\$3,575	\$1,117
5,000 - 5,999	17	5	58.0%	\$26,540	0.03%	\$3,268	\$2,040	\$5,308	\$2,584
7,000 - 7,999	10	1	58.2%	\$7,000	0.04%	\$0	\$7,000	\$7,000	\$0
9,000 - 9,999	26	3	58.6%	\$27,870	0.06%	\$6,145	\$3,145	\$9,290	\$2,597
10,000 - 19,999	26	9	59.8%	\$119,733	0.15%	\$6,668	\$6,636	\$13,304	\$21,602
20,000 - 29,999	47	15	61.9%	\$337,500	0.41%	\$7,953	\$14,547	\$22,500	\$63,068
30,000 - 39,999	44	8	62.9%	\$262,500	0.62%	\$8,893	\$23,919	\$32,813	\$46,889
40,000 - 49,999	40	14	64.9%	\$588,500	1.07%	\$16,012	\$26,023	\$42,036	\$38,239
50,000 - 59,999	48	11	66.4%	\$560,002	1.50%	\$7,460	\$43,449	\$50,909	\$56,848
60,000 - 69,999	40	6	67.2%	\$372,831	1.79%	\$12,083	\$50,055	\$62,139	\$19,956
70,000 - 79,999	46	17	69.5%	\$1,269,500	2.77%	\$37,489	\$37,187	\$74,676	\$53,111
80,000 - 89,999	36	5	70.2%	\$420,000	3.10%	\$42,250	\$41,750	\$84,000	\$16,739
90,000 - 99,999	44	7	71.1%	\$650,500	3.60%	\$20,179	\$72,750	\$92,929	\$57,398
100,000 -199,999	43	82	82.3%	\$11,879,631	12.78%	\$40,314	\$100,108	\$144,874	\$57,161
200,000 - 299,999	52	42	88.0%	\$9,905,855	20.43%	\$71,680	\$164,174	\$235,854	\$96,155
300,000 - 399,999	46	23	91.1%	\$7,591,500	26.30%	\$90,180	\$239,885	\$330,065	\$80,500
400,000 - 499,999	39	13	92.9%	\$5,524,472	30.56%	\$126,984	\$297,975	\$424,959	\$64,394
500,000 - 999,999	67	26	96.5%	\$17,023,157	43.72%	\$333,258	\$302,145	\$654,737	\$182,545
1,000,000 - 1,999,999	50	13	98.2%	\$15,875,000	55.98%	\$431,899	\$789,255	\$1,221,154	\$254,386
2,000,000 - 2,999,999	54	4	98.8%	\$10,225,000	63.88%	\$1,182,500	\$1,373,750	\$2,556,250	\$182,556
3,000,000 - 3,999,999	59	2	99.1%	\$7,450,000	69.64%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	70	7	100.0%	\$39,300,020	100.00%	\$2,657,146	\$2,957,143	\$5,614,289	\$2,430,225
Total	44	734		\$129,434,267		\$72,559	\$102,600	\$176,341	\$77,032
Total (Paid Only)	46	321		\$129,434,267		\$165,914	\$234,605	\$403,222	\$129,877

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2017, 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	49	210	56.3%	\$0	0.0%	\$0	\$0	\$0	\$56,204
2,000 - 2,999	26	1	56.6%	\$2,500	0.0%	\$1,400	\$1,100	\$2,500	\$7,830
10,000 - 19,999	37	4	57.6%	\$57,000	0.1%	\$8,569	\$5,681	\$14,250	\$44,827
20,000 - 29,999	48	6	59.3%	\$135,000	0.2%	\$9,650	\$12,850	\$22,500	\$101,485
30,000 - 39,999	40	3	60.1%	\$100,000	0.3%	\$382	\$32,951	\$33,333	\$93,628
40,000 - 49,999	53	6	61.7%	\$250,000	0.6%	\$18,800	\$22,867	\$41,667	\$69,179
50,000 - 59,999	69	5	63.0%	\$255,000	0.9%	\$0	\$51,000	\$51,000	\$94,082
60,000 - 69,999	23	1	63.3%	\$67,500	1.0%	\$7,500	\$60,000	\$67,500	\$0
70,000 - 79,999	60	8	65.4%	\$594,500	1.7%	\$46,503	\$27,810	\$74,313	\$81,755
80,000 - 89,999	51	2	66.0%	\$165,000	1.9%	\$0	\$82,500	\$82,500	\$38,000
90,000 - 99,999	55	4	67.0%	\$365,000	2.3%	\$11,250	\$80,000	\$91,250	\$78,453
100,000 - 199,999	52	37	76.9%	\$5,326,856	8.3%	\$44,833	\$99,136	\$143,969	\$86,161
200,000 - 299,999	56	27	84.2%	\$6,309,188	15.5%	\$71,245	\$162,429	\$233,674	\$124,511
300,000 - 399,999	54	14	87.9%	\$4,650,000	20.8%	\$90,893	\$241,250	\$332,143	\$102,448
400,000 - 499,999	43	9	90.4%	\$3,874,472	25.2%	\$148,417	\$282,080	\$430,497	\$75,472
500,000 - 999,999	70	19	95.4%	\$12,365,157	39.3%	\$317,143	\$307,199	\$650,798	\$201,403
1,000,000 - 1,999,999	58	7	97.3%	\$8,290,000	48.8%	\$366,429	\$817,857	\$1,184,286	\$373,311
2,000,000 - 2,999,999	56	3	98.1%	\$7,725,000	57.6%	\$1,576,667	\$998,333	\$2,575,000	\$243,408
3,000,000 - 3,999,999	59	2	98.7%	\$7,450,000	66.1%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	67	5	100.0%	\$29,800,020	100.0%	\$2,320,004	\$3,640,000	\$5,960,004	\$3,279,00
Total	52	373		\$87,782,193		\$95,693	\$138,301	\$235,341	\$126,819
Total (Paid Only)	55	163		\$87,782,193		\$218,978	\$316,479	\$538,541	\$217,795

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2017, 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	46	109	44.31%	\$0	0.00%	\$0	\$0	\$0	\$59,456
1,000 - 1,999	22	3	45.53%	\$2,131	0.00%	\$100	\$610	\$710	\$0
2,000 - 2,999	26	1	45.93%	\$2,500	0.01%	\$1,400	\$1,100	\$2,500	\$7,830
5,000 - 5,999	18	2	46.75%	\$10,500	0.02%	\$4,040	\$1,210	\$5,250	\$4,994
7,000 - 7,999	10	1	47.15%	\$7,000	0.03%	\$0	\$7,000	\$7,000	\$0
10,000 - 19,999	19	4	48.78%	\$49,733	0.09%	\$4,808	\$7,625	\$12,433	\$3,778
20,000 - 29,999	51	10	52.85%	\$235,000	0.39%	\$8,430	\$15,070	\$23,500	\$71,664
30,000 - 39,999	53	5	54.88%	\$167,500	0.61%	\$14,000	\$19,500	\$33,500	\$60,381
40,000 - 49,999	61	2	55.69%	\$85,000	0.72%	\$11,400	\$31,100	\$42,500	\$133,308
50,000 - 59,999	44	3	56.91%	\$150,001	0.91%	\$25,000	\$25,000	\$50,000	\$46,612
60,000 - 69,999	47	3	58.13%	\$185,331	1.14%	\$11,667	\$50,110	\$61,777	\$17,466
70,000 - 79,999	42	5	60.16%	\$379,500	1.63%	\$47,304	\$28,596	\$75,900	\$49,682
80,000 - 89,999	44	4	61.79%	\$332,500	2.05%	\$41,875	\$41,250	\$83,125	\$20,924
90,000 - 99,999	51	4	63.41%	\$368,000	2.52%	\$0	\$92,000	\$92,000	\$75,393
100,000 - 199,999	43	26	73.98%	\$3,765,275	7.34%	\$35,249	\$109,569	\$144,818	\$83,742
200,000 - 299,999	45	14	79.67%	\$3,229,667	11.47%	\$61,358	\$169,332	\$230,691	\$66,656
300,000 - 399,999	42	12	84.55%	\$4,045,000	16.64%	\$113,500	\$223,583	\$337,083	\$80,651
400,000 - 499,999	40	8	87.80%	\$3,399,472	20.99%	\$135,506	\$289,428	\$424,934	\$75,653
500,000 - 999,999	69	12	92.68%	\$8,345,500	31.66%	\$345,810	\$349,649	\$695,458	\$273,289
1,000,000 - 1,999,999	49	7	95.53%	\$9,475,000	43.77%	\$677,143	\$676,429	\$1,353,571	\$357,957
2,000,000 - 2,999,999	54	4	97.15%	\$10,225,000	56.85%	\$1,182,500	\$1,373,750	\$2,556,250	\$182,556
3,000,000 - 3,999,999	59	2	97.97%	\$7,450,000	66.37%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	83	5	100.00%	\$26,300,020	100.00%	\$1,400,004	\$3,860,000	\$5,260,004	\$3,306,209
Total	47	246		\$78,209,630		\$119,965	\$197,960	\$317,925	\$148,864
Total (Paid Only)	47	137		\$78,209,630		\$215,412	\$355,461	\$570,873	\$219,999

Summary by Indemnity Range Awarded to Each Injured Party - Closed in 2016, 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	407	52.2%	\$0	0.0%	\$0	\$0	\$0	\$25,582
1,000 - 1,999	25	10	53.5%	\$9,898	0.0%	\$513	\$477	\$990	\$4,268
2,000 - 2,999	22	8	54.5%	\$18,592	0.0%	\$180	\$2,144	\$2,324	\$786
3,000 - ,3999	13	2	54.7%	\$6,899	0.0%	\$840	\$2,610	\$3,450	\$2,140
4,000 - 4,999	4	1	54.9%	\$4,874	0.0%	\$0	\$4,874	\$4,874	\$6,440
5,000 - 5,999	43	4	55.4%	\$20,000	0.0%	\$750	\$4,250	\$5,000	\$265
6,000 - 6,999	12	3	55.8%	\$19,400	0.1%	\$4,467	\$2,000	\$6,467	\$901
7,000 - 7,999	14	3	56.2%	\$21,638	0.1%	\$1,728	\$5,485	\$7,213	\$1,131
8,000 - 8,999	27	3	56.5%	\$24,500	0.1%	\$1,417	\$6,750	\$8,167	\$10,461
9,000 - 9,999	14	4	57.1%	\$37,584	0.1%	\$7,271	\$1,333	\$9,396	\$1,219
10,000 - 19,999	32	19	59.5%	\$235,160	0.2%	\$3,526	\$8,379	\$12,377	\$21,663
20,000 - 29,999	41	20	62.1%	\$462,121	0.5%	\$10,112	\$11,794	\$23,106	\$64,369
30,000 - 39,999	65	4	62.6%	\$124,000	0.6%	\$16,625	\$14,375	\$31,000	\$121,314
40,000 - 49,999	47	21	65.3%	\$879,533	1.1%	\$15,535	\$26,030	\$41,883	\$39,735
50,000 - 59,999	48	19	67.7%	\$988,248	1.6%	\$20,755	\$29,294	\$52,013	\$62,463
60,000 - 69,999	52	6	68.5%	\$378,500	1.9%	\$10,600	\$52,483	\$63,083	\$37,678
70,000 - 79,999	47	16	70.5%	\$1,181,000	2.5%	\$32,209	\$41,603	\$73,813	\$44,042
80,000 - 89,999	21	5	71.2%	\$413,333	2.8%	\$16,553	\$57,614	\$82,667	\$7,481
90,000 - 99,999	40	6	71.9%	\$561,909	3.1%	\$27,150	\$66,502	\$93,652	\$37,573
100,000 -199,999	47	59	79.5%	\$8,299,147	7.9%	\$51,934	\$83,546	\$140,664	\$86,034
200,000 - 299,999	48	41	84.7%	\$9,429,483	13.3%	\$93,104	\$133,997	\$229,987	\$97,267
300,000 - 399,999	54	21	87.4%	\$7,000,484	17.4%	\$132,587	\$200,770	\$333,356	\$150,949
400,000 - 499,999	53	21	90.1%	\$8,842,500	22.5%	\$147,548	\$273,524	\$421,071	\$160,651
500,000 - 999,999	47	39	95.1%	\$27,891,218	38.5%	\$303,534	\$411,626	\$715,159	\$162,170
1,000,000 - 1,999,999	56	19	97.6%	\$24,952,999	52.9%	\$938,342	\$374,973	\$1,313,316	\$297,770
2,000,000 - 2,999,999	38	7	98.5%	\$16,712,500	62.6%	\$1,003,825	\$1,383,675	\$2,387,500	\$217,898
3,000,000 - 3,999,999	90	2	98.7%	\$6,210,094	66.1%	\$1,250,000	\$1,855,047	\$3,105,047	\$428,192
Over 4,000,000	65	10	100.0%	\$58,740,000	100.0%	\$3,405,668	\$2,074,582	\$5,874,000	\$647,892
Total	43	780		\$173,465,614		\$112,767	\$103,876	\$222,392	\$67,134
Total (Paid Only)	45	373		\$173,465,614		\$235,812	\$217,221	\$465,055	\$112,473

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2016, Cases Involving at least 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	50	186	49.3%	\$0	0.0%	\$0	\$0	\$0	\$42,596
1,000 - 1,999	56	1	49.6%	\$1,000	0.0%	\$560	\$440	\$1,000	\$21,287
2,000 - 2,999	15	1	49.9%	\$2,592	0.0%	\$0	\$2,592	\$2,592	\$808
3,000 - ,3999	12	1	50.1%	\$3,000	0.0%	\$1,680	\$1,320	\$3,000	\$4,280
6,000 - 6,999	19	1	50.4%	\$6,600	0.0%	\$6,600	\$0	\$6,600	\$2,704
8,000 - 8,999	38	1	50.7%	\$8,000	0.0%	\$0	\$8,000	\$8,000	\$29,982
9,000 - 9,999	16	1	50.9%	\$9,500	0.0%	\$9,500	\$0	\$9,500	\$4,325
10,000 - 19,999	47	5	52.3%	\$62,250	0.1%	\$240	\$12,210	\$12,450	\$52,504
20,000 - 29,999	48	4	53.3%	\$97,000	0.1%	\$8,897	\$15,353	\$24,250	\$250,971
30,000 - 39,999	65	4	54.4%	\$124,000	0.2%	\$16,625	\$14,375	\$31,000	\$121,314
40,000 - 49,999	34	8	56.5%	\$347,908	0.5%	\$17,084	\$25,571	\$43,489	\$65,123
50,000 - 59,999	76	5	57.8%	\$255,000	0.7%	\$11,058	\$39,942	\$51,000	\$171,456
60,000 - 69,999	41	2	58.4%	\$125,000	0.7%	\$16,800	\$45,700	\$62,500	\$45,798
70,000 - 79,999	60	9	60.7%	\$665,000	1.2%	\$30,806	\$43,083	\$73,889	\$64,774
90,000 - 99,999	16	1	61.0%	\$90,000	1.3%	\$8,400	\$81,600	\$90,000	\$21,633
100,000 -199,999	52	33	69.8%	\$4,864,739	4.7%	\$57,849	\$81,613	\$147,416	\$117,566
200,000 - 299,999	53	22	75.6%	\$4,996,000	8.3%	\$90,105	\$136,986	\$227,091	\$114,836
300,000 - 399,999	76	10	78.3%	\$3,307,740	10.7%	\$127,915	\$202,859	\$330,774	\$229,609
400,000 - 499,999	51	17	82.8%	\$7,230,000	15.8%	\$166,824	\$258,471	\$425,294	\$176,970
500,000 - 999,999	46	33	91.5%	\$23,583,595	32.6%	\$332,689	\$381,965	\$714,654	\$147,678
1,000,000 - 1,999,999	53	14	95.2%	\$17,900,000	45.3%	\$853,000	\$425,571	\$1,278,571	\$311,959
2,000,000 - 2,999,999	38	7	97.1%	\$16,712,500	57.2%	\$1,003,825	\$1,383,675	\$2,387,500	\$217,898
3,000,000 - 3,999,999	90	2	97.6%	\$6,210,094	61.7%	\$1,250,000	\$1,855,047	\$3,105,047	\$428,192
Over 4,000,000	71	9	100.00%	\$53,840,000	100.00%	\$3,536,556	\$2,008,166	\$5,982,222	\$716,692
Total	51	377		\$140,441,518		\$193,411	\$167,955	\$372,524	\$110,333
Total (Paid Only)	52	191		\$140,441,518		\$381,758	\$331,513	\$735,296	\$176,298

Summary by Indemnity Range Awarded to Each Injured Party - Cases Involving at least Hospital Closed in 2016

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	134	44.5%	\$0	0.0%	\$0	\$0	\$0	\$23,063
1,000 - 1,999	32	4	45.9%	\$4,498	0.0%	\$557	\$568	\$1,125	\$7,291
2,000 - 2,999	40	3	46.8%	\$7,000	0.0%	\$373	\$1,960	\$2,333	\$621
3,000 - ,3999	14	1	47.2%	\$3,899	0.0%	\$0	\$3,899	\$3,899	\$0
4,000 - 4,999	4	1	47.5%	\$4,874	0.0%	\$0	\$4,874	\$4,874	\$6,440
5,000 - 5,999	43	4	48.8%	\$20,000	0.1%	\$750	\$4,250	\$5,000	\$265
6,000 - 6,999	13	1	49.2%	\$6,300	0.1%	\$6,300	\$0	\$6,300	\$0
7,000 - 7,999	14	2	49.8%	\$14,638	0.1%	\$2,292	\$5,028	\$7,319	\$1,697
9,000 - 9,999	14	1	50.2%	\$9,577	0.1%	\$9,577	\$0	\$9,577	\$552
10,000 - 19,999	30	8	52.8%	\$102,424	0.2%	\$4,864	\$7,940	\$12,803	\$30,212
20,000 - 29,999	51	7	55.2%	\$157,624	0.4%	\$9,459	\$13,059	\$22,518	\$80,603
30,000 - 39,999	63	2	55.8%	\$64,000	0.5%	\$32,000	\$0	\$32,000	\$203,362
40,000 - 49,999	60	10	59.1%	\$418,125	1.1%	\$14,743	\$27,070	\$41,813	\$38,727
50,000 - 59,999	43	6	61.1%	\$300,000	1.5%	\$29,055	\$20,945	\$50,000	\$33,136
60,000 - 69,999	74	2	61.8%	\$125,000	1.6%	\$16,800	\$45,700	\$62,500	\$36,721
70,000 - 79,999	46	8	64.5%	\$596,000	2.4%	\$40,700	\$33,800	\$74,500	\$52,525
80,000 - 89,999	16	3	65.5%	\$248,333	2.7%	\$13,333	\$69,444	\$82,778	\$1,003
90,000 - 99,999	46	3	66.5%	\$278,500	3.1%	\$35,633	\$57,200	\$92,833	\$44,786
100,000 -199,999	43	21	73.4%	\$2,837,775	6.8%	\$68,106	\$59,288	\$135,132	\$94,648
200,000 - 299,999	41	21	80.4%	\$4,770,984	13.0%	\$94,814	\$132,376	\$227,190	\$81,116
300,000 - 399,999	34	9	83.4%	\$3,083,244	17.0%	\$107,805	\$234,778	\$342,583	\$111,139
400,000 - 499,999	57	9	86.4%	\$3,905,000	22.1%	\$112,333	\$321,556	\$433,889	\$182,363
500,000 - 999,999	50	24	94.4%	\$17,036,218	44.3%	\$336,988	\$372,855	\$709,842	\$201,802
1,000,000 - 1,999,999	48	9	97.3%	\$12,515,499	60.6%	\$872,806	\$517,805	\$1,390,611	\$319,866
2,000,000 - 2,999,999	37	2	98.0%	\$4,900,000	67.0%	\$600,000	\$1,850,000	\$2,450,000	\$115,957
3,000,000 - 3,999,999	90	2	98.67%	\$6,210,094	75.06%	\$1,250,000	\$1,855,047	\$3,105,047	\$428,192
Over 4,000,000	56	4	100.00%	\$19,150,000	100.00%	\$1,806,042	\$1,997,083	\$4,787,500	\$159,773
Total	43	301		\$76,769,606		\$110,610	\$130,818	\$255,049	\$70,912
Total (Paid Only)	45	167		\$76,769,606		\$199,362	\$235,785	\$459,698	\$109,307

Summary by Indemnity Range Awarded to Each Injured Party									
Closed in 2015, 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	46	429	53.1%	\$0	0.0%	\$0	\$0	\$0	\$32,463
1,000 - 1,999	40	9	54.2%	\$8,535	0.0%	\$762	\$186	\$948	\$11,881
2,000 - 2,999	16	5	54.8%	\$11,500	0.0%	\$224	\$2,076	\$2,300	\$3,140
3,000 - ,3999	19	2	55.1%	\$6,000	0.0%	\$3,000	\$0	\$3,000	\$6,500
4,000 - 4,999	15	4	55.6%	\$16,566	0.0%	\$2,343	\$1,799	\$4,142	\$1,125
5,000 - 5,999	30	11	56.9%	\$56,331	0.1%	\$2,486	\$2,635	\$5,121	\$9,581
6,000 - 6,999	48	4	57.4%	\$25,819	0.1%	\$2,596	\$3,859	\$6,455	\$2,108
7,000 - 7,999	37	5	58.0%	\$36,835	0.1%	\$3,351	\$4,016	\$7,367	\$4,606
8,000 - 8,999	18	2	58.3%	\$16,966	0.1%	\$8,483	\$0	\$8,483	\$4,776
9,000 - 9,999	37	4	58.8%	\$37,633	0.2%	\$7,548	\$1,860	\$9,408	\$25,893
10,000 - 19,999	30	19	61.1%	\$246,387	0.4%	\$6,267	\$5,948	\$12,968	\$9,927
20,000 - 29,999	42	18	63.4%	\$429,326	0.7%	\$10,108	\$13,327	\$23,851	\$43,737
30,000 - 39,999	43	10	64.6%	\$334,212	1.0%	\$8,151	\$25,270	\$33,421	\$39,911
40,000 - 49,999	25	9	65.7%	\$374,651	1.3%	\$20,594	\$21,034	\$41,628	\$19,096
50,000 - 59,999	41	17	67.8%	\$872,500	2.0%	\$18,671	\$32,653	\$51,324	\$38,018
60,000 - 69,999	41	12	69.3%	\$741,807	2.6%	\$15,846	\$44,305	\$61,817	\$44,292
70,000 - 79,999	50	10	70.5%	\$738,428	3.1%	\$25,213	\$48,630	\$73,843	\$71,172
80,000 - 89,999	40	4	71.0%	\$320,000	3.4%	\$20,000	\$60,000	\$80,000	\$73,798
90,000 - 99,999	58	7	71.9%	\$658,033	3.9%	\$28,330	\$65,674	\$94,005	\$35,905
100,000 -199,999	51	77	81.4%	\$10,739,859	12.4%	\$41,827	\$97,652	\$139,479	\$77,549
200,000 - 299,999	49	42	86.6%	\$9,907,238	20.3%	\$89,854	\$140,319	\$235,887	\$83,399
300,000 - 399,999	51	25	89.7%	\$8,378,934	26.9%	\$135,972	\$199,185	\$335,157	\$206,178
400,000 - 499,999	53	14	91.5%	\$6,179,988	31.8%	\$204,837	\$236,591	\$441,428	\$162,769
500,000 - 999,999	50	44	96.9%	\$29,615,401	55.3%	\$288,038	\$385,039	\$673,077	\$146,712
1,000,000 - 1,999,999	63	14	98.6%	\$19,275,822	70.5%	\$687,127	\$689,717	\$1,376,844	\$185,020
2,000,000 - 2,999,999	49	6	99.4%	\$13,344,515	81.1%	\$1,524,333	\$699,753	\$2,224,086	\$222,020
3,000,000 - 3,999,999	76	2	99.63%	\$6,225,000	86.0%	\$1,931,250	\$1,181,250	\$3,112,500	\$573,568
Over 4,000,000	76	3	100.00%	\$17,650,000	100.0%	\$3,672,605	\$2,127,395	\$5,883,333	\$947,259
Total	46	808		\$126,248,286		\$75,881	\$79,708	\$156,248	\$61,353
Total (Paid Only)	46	379		\$126,248,286		\$161,774	\$169,932	\$333,109	\$94,055

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2015, 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	50	232	59.0%	\$0	0.0%	\$0	\$0	\$0	\$42,107
1,000 - 1,999	42	2	59.5%	\$1,563	0.0%	\$599	\$183	\$782	\$40,258
5,000 - 5,999	18	3	60.3%	\$15,000	0.0%	\$2,667	\$2,333	\$5,000	\$1,861
9,000 - 9,999	27	2	60.8%	\$19,633	0.0%	\$9,817	\$0	\$9,817	\$8,588
10,000 - 19,999	46	5	62.1%	\$58,128	0.1%	\$3,014	\$5,749	\$11,626	\$17,208
20,000 - 29,999	55	2	62.6%	\$47,826	0.2%	\$21,348	\$2,565	\$23,913	\$53,585
30,000 - 39,999	27	3	63.4%	\$102,500	0.3%	\$24,500	\$9,667	\$34,167	\$37,968
40,000 - 49,999	57	1	63.6%	\$40,000	0.4%	\$35,000	\$5,000	\$40,000	\$59,426
50,000 - 59,999	46	7	65.4%	\$362,500	0.8%	\$30,186	\$21,600	\$51,786	\$66,757
60,000 - 69,999	49	4	66.4%	\$245,000	1.1%	\$22,500	\$38,750	\$61,250	\$84,147
70,000 - 79,999	76	3	67.2%	\$220,000	1.4%	\$38,067	\$35,267	\$73,333	\$109,075
80,000 - 89,999	62	1	67.4%	\$80,000	1.5%	\$0	\$80,000	\$80,000	\$44,218
90,000 - 99,999	52	1	67.7%	\$99,900	1.6%	\$0	\$99,900	\$99,900	\$157,248
100,000 -199,999	55	36	76.8%	\$5,095,364	7.8%	\$51,662	\$89,876	\$141,538	\$116,105
200,000 - 299,999	48	17	81.2%	\$3,995,687	12.7%	\$91,989	\$128,934	\$235,040	\$140,835
300,000 - 399,999	57	14	84.7%	\$4,714,699	18.5%	\$152,941	\$183,823	\$336,764	\$315,722
400,000 - 499,999	53	12	87.8%	\$5,279,988	24.9%	\$225,037	\$214,963	\$439,999	\$166,391
500,000 - 999,999	46	33	96.2%	\$22,886,539	52.9%	\$302,750	\$390,781	\$693,531	\$158,256
1,000,000 - 1,999,999	49	9	98.5%	\$13,242,548	69.1%	\$847,571	\$623,823	\$1,471,394	\$199,247
2,000,000 - 2,999,999	46	2	99.0%	\$4,440,000	74.6%	\$1,913,000	\$307,000	\$2,220,000	\$310,015
3,000,000 - 3,999,999	98	1	99.2%	\$3,150,000	78.4%	\$2,362,500	\$787,500	\$3,150,000	\$754,509
Over 4,000,000	76	3	100.0%	\$17,650,000	100.0%	\$3,672,605	\$2,127,395	\$5,883,333	\$947,259
Total	50	393		\$81,746,875		\$111,199	\$95,525	\$208,007	\$91,079
Total (Paid Only)	51	161		\$81,746,875		\$271,435	\$233,177	\$507,745	\$161,647

Summary by Indemnity Range Awarded to Each Injured Party									
Closed in 2015, 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	44	153	47.1%	\$0	0.0%	\$0	\$0	\$0	\$35,218
1,000 - 1,999	35	4	48.3%	\$4,789	0.0%	\$1,057	\$141	\$1,197	\$19,282
2,000 - 2,999	14	1	48.6%	\$2,000	0.0%	\$1,120	\$880	\$2,000	\$2,560
4,000 - 4,999	12	3	49.5%	\$12,566	0.0%	\$3,090	\$1,099	\$4,189	\$1,302
5,000 - 5,999	31	4	50.8%	\$20,831	0.1%	\$2,833	\$2,375	\$5,208	\$17,940
6,000 - 6,999	13	2	51.4%	\$13,319	0.1%	\$1,927	\$4,733	\$6,660	\$1,713
7,000 - 7,999	81	1	51.7%	\$7,822	0.1%	\$2,040	\$5,782	\$7,822	\$0
8,000 - 8,999	29	1	52.0%	\$8,500	0.1%	\$8,500	\$0	\$8,500	\$9,551
10,000 - 19,999	27	14	56.3%	\$179,574	0.4%	\$4,755	\$8,072	\$12,827	\$11,373
20,000 - 29,999	47	8	58.8%	\$192,826	0.7%	\$13,337	\$10,766	\$24,103	\$50,427
30,000 - 39,999	16	3	59.7%	\$100,212	0.8%	\$7,867	\$25,537	\$33,404	\$7,336
40,000 - 49,999	13	4	60.9%	\$174,000	1.1%	\$16,250	\$27,250	\$43,500	\$940
50,000 - 59,999	52	5	62.5%	\$262,500	1.5%	\$31,060	\$21,440	\$52,500	\$67,673
60,000 - 69,999	36	4	63.7%	\$247,500	1.8%	\$17,500	\$44,375	\$61,875	\$63,705
70,000 - 79,999	57	4	64.9%	\$293,428	2.2%	\$35,532	\$37,825	\$73,357	\$70,718
90,000 - 99,999	53	6	66.8%	\$563,720	3.1%	\$17,333	\$76,620	\$93,953	\$41,889
100,000 -199,999	50	37	78.2%	\$5,041,885	10.5%	\$43,678	\$92,589	\$136,267	\$86,761
200,000 - 299,999	56	19	84.0%	\$4,517,449	17.2%	\$97,395	\$140,366	\$237,760	\$125,165
300,000 - 399,999	53	10	87.1%	\$3,324,998	22.1%	\$119,800	\$212,700	\$332,500	\$337,944
400,000 - 499,999	50	7	89.2%	\$3,069,166	26.6%	\$136,833	\$301,620	\$438,452	\$245,961
500,000 - 999,999	55	21	95.7%	\$14,445,675	48.0%	\$320,647	\$367,242	\$687,889	\$196,641
1,000,000 - 1,999,999	75	9	98.5%	\$12,317,548	66.2%	\$661,950	\$706,667	\$1,368,616	\$164,742
2,000,000 - 2,999,999	42	1	98.8%	\$2,200,000	69.4%	\$2,100,000	\$100,000	\$2,200,000	\$263,722
3,000,000 - 3,999,999	54	1	99.1%	\$3,075,000	73.9%	\$1,500,000	\$1,575,000	\$3,075,000	\$392,627
Over 4,000,000	76	3	100.0%	\$17,650,000	100.0%	\$3,672,605	\$2,127,395	\$5,883,333	\$947,259
Total	46	325		\$67,725,308		\$103,708	\$103,909	\$208,386	\$83,299
Total (Paid Only)	48	172		\$67,725,308		\$195,959	\$196,339	\$393,752	\$126,069

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:

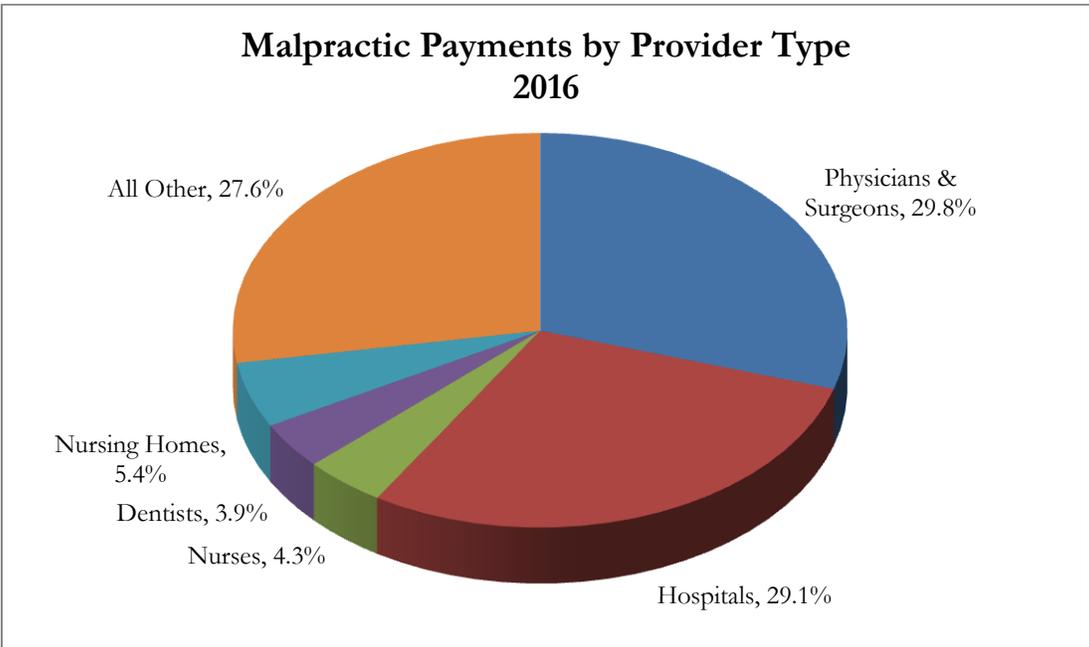
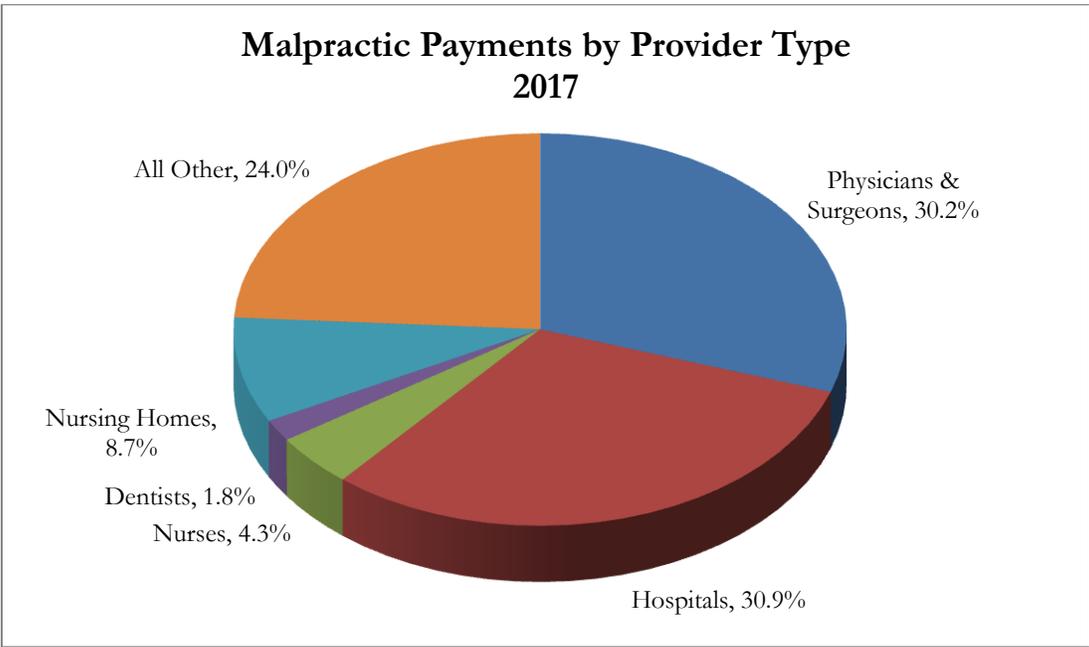
Temporary Injuries (1 – 4)

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.

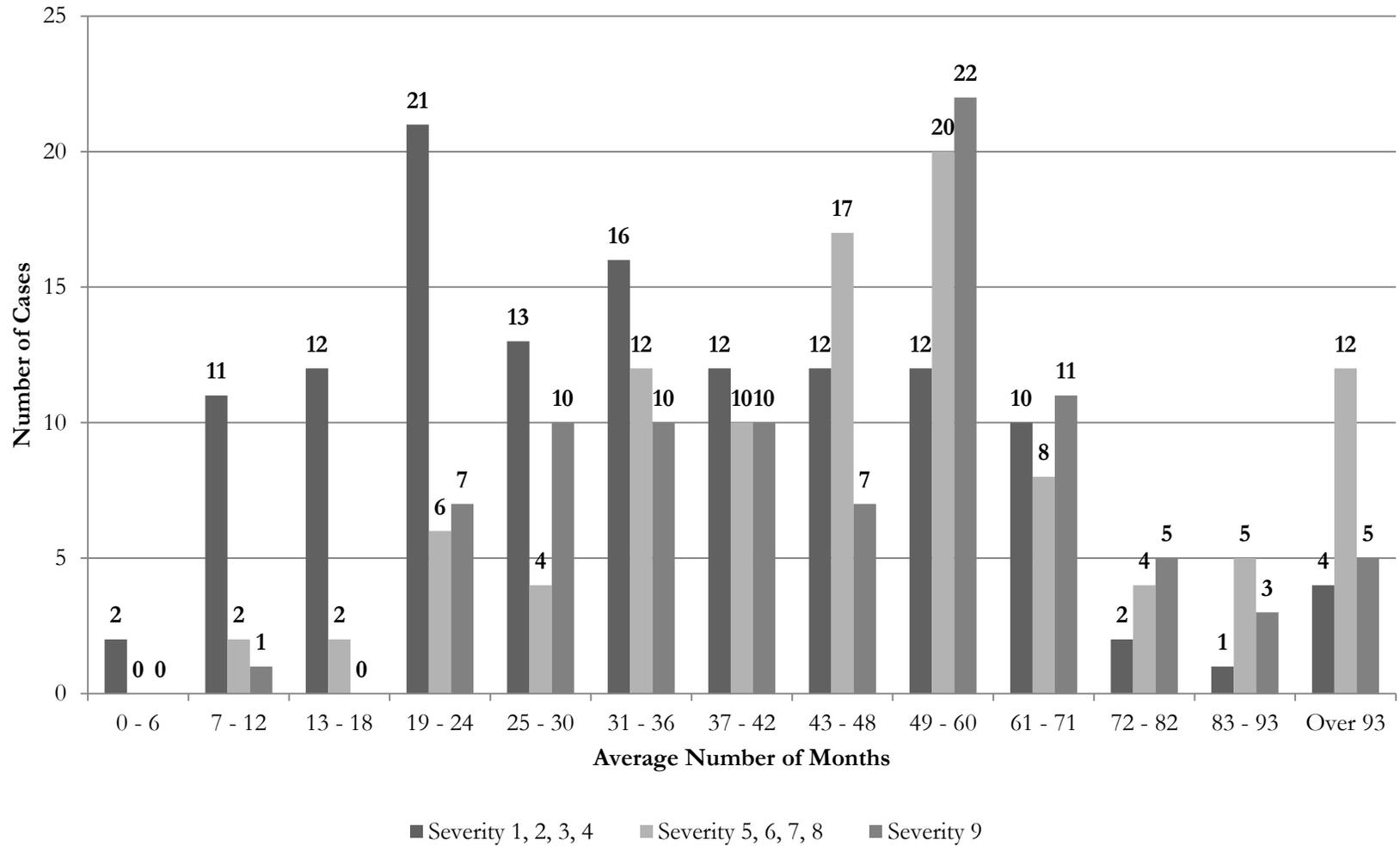
Fatalities – 9



Claims by Provider Type												
Profession Type	2017		2016 - 2017		2016		2015 - 2016		2015		2014 - 2015	
	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 (Temporary Injuries)												
Chiropractors	4	\$93,000	0.0%	-6.6%	4	\$99,625	300.0%	99.3%	1	\$50,000	-80.0%	212.5%
Clinics & Corporations	37	\$134,756	-9.8%	5.2%	41	\$128,147	10.8%	91.9%	37	\$66,766	0.0%	-57.5%
Dentists	7	\$60,146	-50.0%	-62.0%	14	\$158,107	-6.7%	533.3%	15	\$24,964	0.0%	-31.3%
Hospitals	43	\$149,090	-20.4%	41.0%	54	\$105,714	-1.8%	96.3%	55	\$53,842	-30.4%	-65.0%
Nurses	5	\$157,608	-16.7%	-46.9%	6	\$296,667	-40.0%	435.0%	10	\$55,450	150.0%	-41.1%
Nursing Homes	13	\$112,269	225.0%	-3.8%	4	\$116,656	-60.0%	47.9%	10	\$78,900	-9.1%	-10.8%
Optometrists	0	\$0			0	\$0			0	\$0		
Pharmacies	5	\$8,100	-68.8%	-62.6%	16	\$21,638	0.0%	-38.4%	16	\$35,117	220.0%	136.0%
Physicians & Surgeons	30	\$192,667	11.1%	-11.0%	27	\$216,453	-3.6%	-20.8%	28	\$273,469	3.7%	75.2%
Podiatrist/Chiropracist	1	\$40,000	-50.0%	-40.7%	2	\$67,500	-50.0%	-89.3%	4	\$631,629	33.3%	913.3%
Subtotal	145	\$139,986	-13.7%	6.2%	168	\$131,825	-4.5%	29.3%	176	\$101,961	-5.4%	-22.3%
Severity 5, 6, 7, 8 (Permanent Injuries)												
Chiropractors	1	\$87,500	-66.7%	-49.5%	3	\$173,333	200.0%	-37.0%	1	\$275,000		
Clinics & Corporations	25	\$585,000	-37.5%	-30.4%	40	\$840,655	-13.0%	36.2%	46	\$617,264	24.3%	26.0%
Dentists	0	\$0	-100.0%	-100.0%	2	\$10,750	-50.0%	-92.7%	4	\$148,125		
Hospitals	45	\$680,056	9.8%	8.1%	41	\$629,345	-16.3%	44.4%	49	\$435,860	8.9%	-32.9%
Nurses	8	\$204,916	60.0%	-82.3%	5	\$1,160,000	-28.6%	203.6%	7	\$382,143	133.3%	-2.4%
Nursing Homes	3	\$175,833	-25.0%	113.5%	4	\$82,375	100.0%	-63.4%	2	\$225,000	-33.3%	-8.2%
Optometrists	0	\$0			0	\$0	-100.0%	-100.0%	1	\$32,000		
Pharmacies	0	\$0			0	\$0	-100.0%	-100.0%	2	\$932,500	-50.0%	973.4%
Physicians & Surgeons	53	\$551,855	-24.3%	-24.7%	70	\$732,850	45.8%	52.6%	48	\$480,132	-21.3%	23.8%
Podiatrist/Chiropracist	1	\$150,000			0	\$0	-100.0%	-100.0%	3	\$212,500	200.0%	2733.3%
Subtotal	136	\$565,295	-17.6%	-20.6%	165	\$711,514	1.2%	46.2%	163	\$486,654	5.8%	2.3%
Severity 9 (Fatality)												
Chiropractors	0	\$0			0	\$0			0	\$0		

Claims by Provider Type												
Profession Type	2017		2016 - 2017		2016		2015 - 2016		2015		2014 - 2015	
	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
Clinics & Corporations	20	\$203,150	-13.0%	-6.4%	23	\$216,978	-30.3%	21.1%	33	\$179,105	22.2%	-33.2%
Dentists	0	\$0	-100.0%	-100.0%	2	\$875,000	.	.	0	\$0		
Hospitals	33	\$400,876	-19.5%	159.5%	41	\$154,500	13.9%	-31.7%	36	\$226,296	2.9%	-47.9%
Nurses	4	\$329,277	-55.6%	314.5%	9	\$79,445	125.0%	-66.9%	4	\$240,000	-50.0%	74.9%
Nursing Homes	18	\$266,472	5.9%	72.7%	17	\$154,331	13.3%	9.2%	15	\$141,270	15.4%	-22.1%
Pharmacies	0	\$0			0	\$0	-100.0%	-100.0%	2	\$412,500		
Physicians & Surgeons	35	\$252,877	-16.7%	-39.3%	42	\$416,798	-8.7%	74.0%	46	\$239,508	53.3%	-13.1%
Podiatrist/Chiropracist	0	\$0			0	\$0			0	\$0		
Subtotal	110	\$293,238	-17.9%	15.8%	134	\$253,128	-1.5%	18.8%	136	\$213,077	20.4%	-29.5%

Lapsed Months from Incident to Disposition 2017 Paid Incidents - All Cases



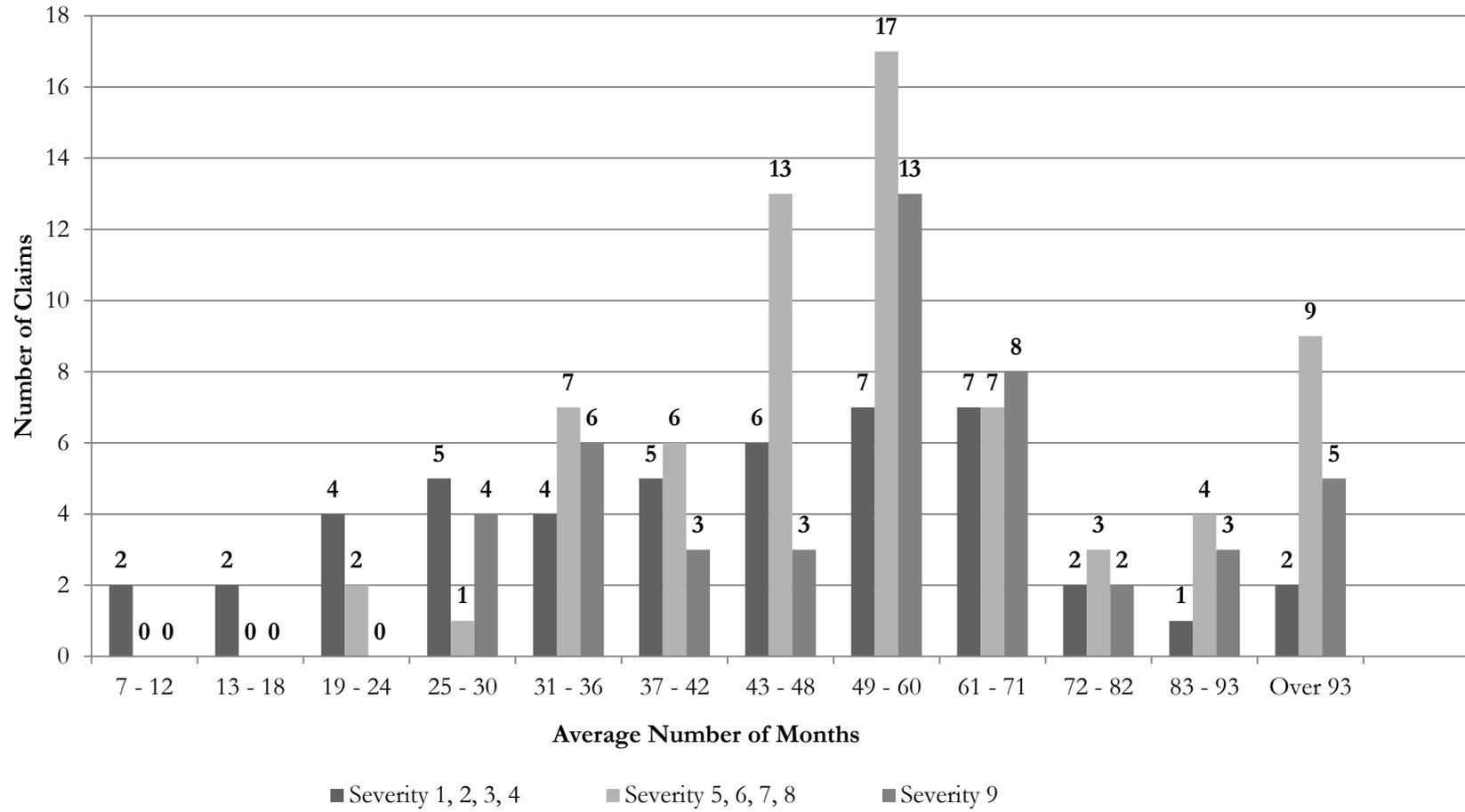
Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
	2017		2016 – 2017		2016		2015 – 2016		2015		2014 - 2015	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4 (Temporary Injuries)												
0 - 6	2	\$49,166	-75.0%	1027.8%	8	\$4,359	33.3%	-17.8%	6	\$5,303	-25.0%	-24.3%
7 - 12	11	\$42,367	10.0%	70.9%	10	\$24,783	-52.4%	33.3%	21	\$18,587	-8.7%	-43.7%
13 - 18	12	\$100,679	-33.3%	73.8%	18	\$57,934	-10.0%	64.9%	20	\$35,130	25.0%	-49.3%
19 - 24	21	\$92,692	-25.0%	-20.4%	28	\$116,497	86.7%	139.4%	15	\$48,661	-31.8%	-13.2%
25 - 30	13	\$183,423	-13.3%	28.5%	15	\$142,772	-16.7%	7.6%	18	\$132,686	12.5%	77.3%
31 - 36	16	\$152,689	100.0%	-38.3%	8	\$247,500	0.0%	-45.5%	8	\$454,002	-20.0%	139.8%
37 - 42	12	\$223,750	33.3%	-5.0%	9	\$235,634	-47.1%	27.3%	17	\$185,088	21.4%	14.0%
43 - 48	12	\$205,694	33.3%	-5.4%	9	\$217,500	-30.8%	37.0%	13	\$158,786	44.4%	4.8%
48 - 60	12	\$174,750	-40.0%	-9.4%	20	\$192,847	53.8%	108.7%	13	\$92,386	-23.5%	-54.9%
61 - 71	10	\$267,800	0.0%	-26.9%	10	\$366,100	66.7%	75.4%	6	\$208,750	-64.7%	234.2%
72 - 82	2	\$87,500	-71.4%	-32.1%	7	\$128,786	40.0%	170.8%	5	\$47,563	-28.6%	-78.4%
83 - 93	1	\$40,000	0.0%	33.3%	1	\$30,000	-50.0%	-42.5%	2	\$52,157	-77.8%	-78.6%
94 - 104	2	\$112,500	100.0%	1025.0%	1	\$10,000	-66.7%	-90.8%	3	\$109,167	50.0%	-96.0%
105 - 115	1	\$883,000			0	\$0	-100.0%	-100.0%	2	\$394,618	0.0%	26.8%
116 - 126	0	\$0	-100.0%	-100.0%	1	\$50,000	0.0%	-93.3%	1	\$750,000	0.0%	7400.0%
127 - 137	0	\$0	-100.0%	-100.0%	1	\$20,000			0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	-100.0%	-100.0%	1	\$435,000			0	\$0		
149 - 159	1	\$500,000			0	\$0	-100.0%	-100.0%	2	\$3,500		
160 - 170	0	\$0			0	\$0			0	\$0		
171 - 181	0	\$0			0	\$0			0	\$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		

Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
Months from Injury to Disposition	2017		2016 – 2017		2016		2015 – 2016		2015		2014 - 2015	
	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	-100.0%	-100.0%	1	\$395,000	0.0%	107.9%	1	\$190,000	.	.
Subtotal	128	\$158,577	-13.5%	6.0%	148	\$149,640	-3.3%	27.6%	153	\$117,288	-12.1%	-16.4%
Severity 5, 6, 7 & 8 (Permanent Injuries)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	2	\$50,250	0.0%	-98.0%	2	\$2,477,500	100.0%	4855.0%	1	\$50,000	-50.0%	122.2%
13 - 18	2	\$91,250	-50.0%	-71.7%	4	\$322,500	33.3%	222.5%	3	\$100,000	-25.0%	-90.3%
19 - 24	6	\$152,083	-40.0%	-87.6%	10	\$1,226,080	100.0%	602.6%	5	\$174,500	-16.7%	-47.3%
25 - 30	4	\$1,193,750	-50.0%	987.7%	8	\$109,750	100.0%	-70.6%	4	\$373,917	-55.6%	24.2%
31 - 36	12	\$1,244,792	-7.7%	201.7%	13	\$412,563	30.0%	-28.2%	10	\$574,607	100.0%	-35.4%
37 - 42	10	\$511,750	-44.4%	-60.5%	18	\$1,294,833	28.6%	3.5%	14	\$1,250,528	-22.2%	94.7%
43 - 48	17	\$830,735	21.4%	94.5%	14	\$427,036	16.7%	-31.7%	12	\$625,690	-45.5%	29.0%
48 - 60	20	\$548,233	-20.0%	29.2%	25	\$424,380	13.6%	-30.8%	22	\$613,111	83.3%	-43.3%
61 - 71	8	\$559,688	-33.3%	-64.4%	12	\$1,573,976	-50.0%	237.2%	24	\$466,751	84.6%	-42.2%
72 - 82	4	\$315,000	-33.3%	-48.7%	6	\$614,167	-14.3%	-22.7%	7	\$794,353	600.0%	297.2%
83 - 93	5	\$2,182,000	150.0%	-67.9%	2	\$6,787,500	-60.0%	1192.9%	5	\$525,000	0.0%	-36.5%
94 - 104	5	\$669,000	.	.	0	\$0	-100.0%	-100.0%	3	\$1,639,599	-50.0%	130.9%
105 - 115	2	\$125,000	.	.	0	\$0	-100.0%	-100.0%	1	\$5,000,000	0.0%	1900.0%
116 - 126	1	\$4,500,000	-50.0%	129.3%	2	\$1,962,500	0.0%	637.1%	2	\$266,250	0.0%	66.4%
127 - 137	1	\$250,000	0.0%	-85.2%	1	\$1,687,500	.	.	0	\$0	-100.0%	-100.0%
138 - 148	2	\$262,500	100.0%	-95.4%	1	\$5,700,000	.	.	0	\$0	.	.
149 - 159	1	\$250,000	0.0%	-95.2%	1	\$5,250,000	0.0%	7976.9%	1	\$65,000	0.0%	-96.7%
160 - 170	0	\$0	.	.	0	\$0	-100.0%	-100.0%	2	\$238,750	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$1,350,000	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
Months from Injury to Disposition	2017		2016 – 2017		2016		2015 – 2016		2015		2014 - 2015	
	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	-100.0%	-100.0%	1	\$625,000	.	.
215 - 225	0	\$0			0	\$0			0	\$0	.	.
Over 225	0	\$0	-100.0%	-100.0%	1	\$47,500			0	\$0	.	.
Subtotal	102	\$753,727	-15.0%	-23.0%	120	\$978,332	1.7%	45.5%	118	\$672,243	9.3%	-0.9%
Severity 9 (Fatal)												
0 - 6	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
7 - 12	1	\$55,001			0	\$0	-100.0%	-100.0%	1	\$1,700,000	-50.0%	1207.7%
13 - 18	0	\$0	-100.0%	-100.0%	4	\$366,250	-42.9%	39.7%	7	\$262,143	75.0%	-70.1%
19 - 24	7	\$261,667	75.0%	32.5%	4	\$197,500	-50.0%	-30.1%	8	\$282,479	14.3%	57.6%
25 - 30	10	\$293,917	-9.1%	-58.2%	11	\$702,408	-15.4%	322.2%	13	\$166,369	62.5%	-31.3%
31 - 36	10	\$245,400	-33.3%	-30.4%	15	\$352,399	25.0%	34.1%	12	\$262,741	-7.7%	-62.9%
37 - 42	10	\$194,500	-33.3%	-28.4%	15	\$271,734	7.1%	-26.2%	14	\$368,011	100.0%	61.0%
43 - 48	7	\$249,929	-58.8%	-33.3%	17	\$374,853	88.9%	-2.9%	9	\$385,877	125.0%	79.2%
48 - 60	22	\$233,849	120.0%	73.6%	10	\$134,714	-56.5%	-45.0%	23	\$244,726	53.3%	-18.6%
61 - 71	11	\$499,095	-8.3%	129.0%	12	\$217,917	20.0%	22.0%	10	\$178,600	11.1%	36.5%
72 - 82	5	\$189,000	66.7%	54.3%	3	\$122,500	-50.0%	-42.9%	6	\$214,714	-33.3%	4.4%
83 - 93	3	\$341,667	50.0%	217.8%	2	\$107,500	100.0%	258.3%	1	\$30,000	-50.0%	-86.7%
94 - 104	1	\$200,000	-87.5%	-18.6%	8	\$245,625	166.7%	67.5%	3	\$146,667	50.0%	-82.8%
105 - 115	1	\$122,106			0	\$0			0	\$0	-100.0%	-100.0%
116 - 126	2	\$4,027,510	0.0%	1202.3%	2	\$309,250	100.0%	341.8%	1	\$70,000	0.0%	4566.7%
127 - 137	0	\$0	-100.0%	-100.0%	1	\$1,000,000			0	\$0		
138 - 148	1	\$300,000	0.0%	300.0%	1	\$75,000			0	\$0		
149 - 159	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
160 - 170	0	\$0			0	\$0			0	\$0		
171 - 181	0	\$0			0	\$0			0	\$0		

Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition All Cases												
	2017		2016 – 2017		2016		2015 – 2016		2015		2014 - 2015	
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
182 - 192	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
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	91	\$354,464	-13.3%	9.7%	105	\$323,039	-2.8%	20.4%	108	\$268,320	20.0%	-29.3%

Lapsed Months from Incident to Disposition 2017 Paid Claims Involving At Least One Physician or Surgeon



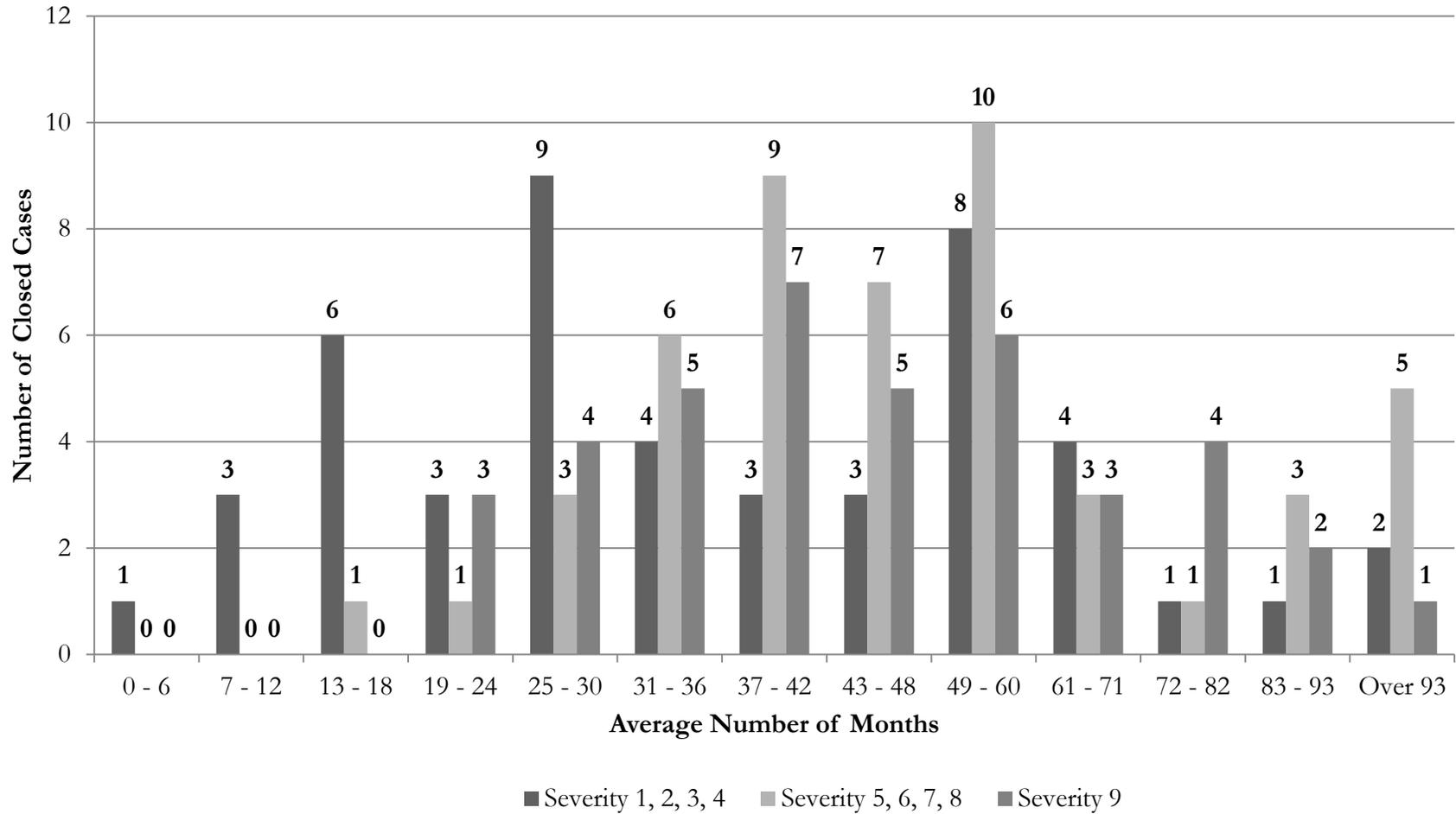
Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
Months from Injury to Disposition	2017		2016-2017		2016		2015-2016		2015		2014-2015	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4 (Temporary Injuries)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	2	\$150,000	0.0%	559.3%	2	\$22,750	-33.3%	25.7%	3	\$18,104	200.0%	-33.3%
13 - 18	2	\$237,500	-33.3%	39.1%	3	\$170,697	50.0%	1248.0%	2	\$12,663	0.0%	-81.6%
19 - 24	4	\$113,125	-20.0%	-23.7%	5	\$148,320	400.0%	394.4%	1	\$30,000	-80.0%	62.2%
25 - 30	5	\$69,500	25.0%	-79.1%	4	\$332,813	-33.3%	54.5%	6	\$215,392	100.0%	169.2%
31 - 36	4	\$126,875	0.0%	-71.2%	4	\$440,000	0.0%	44.6%	4	\$304,375	300.0%	2943.8%
37 - 42	5	\$135,000	25.0%	-68.9%	4	\$433,584	-20.0%	11.2%	5	\$390,000	-16.7%	40.5%
43 - 48	6	\$335,000	0.0%	33.3%	6	\$251,250	50.0%	17.9%	4	\$213,054	33.3%	22.9%
48 - 60	7	\$240,714	-12.5%	79.2%	8	\$134,344	60.0%	-26.6%	5	\$183,000	-37.5%	-35.4%
61 - 71	7	\$344,643	75.0%	-25.0%	4	\$459,375	33.3%	20.9%	3	\$380,000	-57.1%	472.6%
72 - 82	2	\$87,500	0.0%	20.7%	2	\$72,500			0	\$0	-100.0%	-100.0%
83 - 93	1	\$40,000	0.0%	33.3%	1	\$30,000	0.0%	200.0%	1	\$10,000	-66.7%	-94.9%
94 - 104	1	\$200,000			0	\$0	-100.0%	-100.0%	1	\$175,000	0.0%	1300.0%
105 - 115	0	\$0			0	\$0	-100.0%	-100.0%	1	\$410,000	0.0%	-31.7%
116 - 126	0	\$0	-100.0%	-100.0%	1	\$50,000	0.0%	-93.3%	1	\$750,000	0.0%	7400.0%
127 - 137	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	-100.0%	-100.0%	1	\$435,000			0	\$0		
149 - 159	1	\$500,000			0	\$0			0	\$0		
160 - 170	0	\$0			0	\$0			0	\$0		
171 - 181	0	\$0			0	\$0			0	\$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	-100.0%	-100.0%	1	\$395,000			0	\$0		

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2017		2016-2017		2016		2015-2016		2015		2014-2015	
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	47	\$208,085	2.2%	-17.5%	46	\$252,164	24.3%	5.8%	37	\$238,424	-19.6%	33.4%
Severity 5, 6, 7, 8 (Permanent Injuries)												
7 - 12	0	\$0			0	\$0			0	\$0		
13 - 18	0	\$0	-100.0%	-100.0%	2	\$620,000	0.0%	376.9%	2	\$130,000	-33.3%	-85.3%
19 - 24	2	\$281,250	-66.7%	-85.4%	6	\$1,922,917			0	\$0		
25 - 30	1	\$4,000,000	-66.7%	2973.0%	3	\$130,167	0.0%	-72.1%	3	\$467,306	-50.0%	73.6%
31 - 36	7	\$1,146,429	-22.2%	169.5%	9	\$425,323	80.0%	-49.8%	5	\$846,653	150.0%	30.8%
37 - 42	6	\$679,083	-62.5%	-51.8%	16	\$1,409,375	77.8%	-22.0%	9	\$1,806,700	-10.0%	152.0%
43 - 48	13	\$851,731	-7.1%	99.5%	14	\$427,036	180.0%	-22.8%	5	\$553,000	-72.2%	11.2%
48 - 60	17	\$602,627	-15.0%	25.4%	20	\$480,549	33.3%	-7.8%	15	\$520,993	66.7%	-62.9%
61 - 71	7	\$618,214	-30.0%	-65.7%	10	\$1,802,009	-28.6%	483.7%	14	\$308,717	16.7%	-64.7%
72 - 82	3	\$350,000	0.0%	-62.5%	3	\$933,333	-40.0%	-12.2%	5	\$1,063,095	400.0%	431.5%
83 - 93	4	\$2,671,250	100.0%	-60.6%	2	\$6,787,500	-50.0%	1570.8%	4	\$406,250	-20.0%	-50.9%
94 - 104	5	\$669,000			0	\$0	-100.0%	-100.0%	3	\$1,639,599	-25.0%	774.5%
105 - 115	1	\$100,000			0	\$0	-100.0%	-100.0%	1	\$5,000,000	0.0%	1900.0%
116 - 126	0	\$0	-100.0%	-100.0%	2	\$1,962,500			0	\$0	-100.0%	-100.0%
127 - 137	1	\$250,000			0	\$0			0	\$0	-100.0%	-100.0%
138 - 148	1	\$500,000	0.0%	-91.2%	1	\$5,700,000			0	\$0		
149 - 159	1	\$250,000	0.0%	-95.2%	1	\$5,250,000			0	\$0	-100.0%	-100.0%
160 - 170	0	\$0			0	\$0			0	\$0		
171 - 181	0	\$0			0	\$0			0	\$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		
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												
Months from Injury to Disposition	2017		2016-2017		2016		2015-2016		2015		2014-2015	
	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	69	\$847,633	-22.5%	-27.7%	89	\$1,173,095	34.8%	43.6%	66	\$816,919	-12.0%	10.3%
Severity 9 (Fatalities)												
0 - 6	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
7 - 12	0	\$0			0	\$0	-100.0%	-100.0%	1	\$1,700,000	0.0%	1033.3%
13 - 18	0	\$0	-100.0%	-100.0%	1	\$750,000			0	\$0	-100.0%	-100.0%
19 - 24	0	\$0	-100.0%	-100.0%	2	\$140,000	0.0%	-74.2%	2	\$541,666	-33.3%	98.2%
25 - 30	4	\$255,043	33.3%	-86.3%	3	\$1,863,333	-40.0%	834.3%	5	\$199,430	66.7%	-49.0%
31 - 36	6	\$328,167	0.0%	-52.9%	6	\$697,083	-14.3%	124.6%	7	\$310,413	-12.5%	-56.5%
37 - 42	3	\$118,333	-72.7%	-60.1%	11	\$296,455	37.5%	-32.8%	8	\$441,250	300.0%	-1.9%
43 - 48	3	\$174,833	-66.7%	-62.6%	9	\$467,778	50.0%	-3.1%	6	\$482,982	200.0%	88.9%
48 - 60	13	\$204,976	225.0%	22.9%	4	\$166,750	-76.5%	-35.9%	17	\$260,295	88.9%	-19.2%
61 - 71	8	\$339,381	0.0%	25.1%	8	\$271,250	33.3%	68.8%	6	\$160,667	0.0%	-4.6%
72 - 82	2	\$282,500	100.0%	841.7%	1	\$30,000	-75.0%	-88.5%	4	\$260,804	0.0%	-9.3%
83 - 93	3	\$341,667	50.0%	217.8%	2	\$107,500			0	\$0	-100.0%	-100.0%
94 - 104	1	\$200,000	-83.3%	-33.3%	6	\$300,000	500.0%	140.0%	1	\$125,000		
105 - 115	1	\$122,106			0	\$0			0	\$0		
116 - 126	2	\$4,027,510	100.0%	1855.1%	1	\$206,000	0.0%	194.3%	1	\$70,000		
127 - 137	0	\$0	-100.0%	-100.0%	1	\$1,000,000			0	\$0		
138 - 148	1	\$300,000	0.0%	300.0%	1	\$75,000			0	\$0		
149 - 159	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
160 - 170	0	\$0			0	\$0			0	\$0	.	.
171 - 181	0	\$0			0	\$0			0	\$0	.	.
182 - 192	0	0			0	0			0	0	-1	-1
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												
	2017		2016-2017		2016		2015-2016		2015		2014-2015	
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	47	\$415,224	-16.1%	-4.8%	56	\$436,366	-3.4%	33.1%	58	\$327,733	26.1%	-32.2%

Lapsed Months from Incident to Disposition 2017 Paid Claims, Cases Involving At Least One Hospital



Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2017			2016 - 2017, % Change		2016		2015 - 2016, % Change		2015		2014 - 2015, % 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	Average Indemnity
Severity 1, 2, 3, 4 (Temporary)												
0 - 6	1	\$831	-66.7%	-88.6%	3	\$7,291	0.0%	-1.4%	3	\$7,395	-25.0%	123.4%
7 - 12	3	\$5,844	-40.0%	-86.4%	5	\$42,916	-44.4%	117.2%	9	\$19,755	-35.7%	-54.6%
13 - 18	6	\$149,129	-45.5%	67.1%	11	\$89,236	-31.3%	133.3%	16	\$38,256	60.0%	-29.0%
19 - 24	3	\$189,167	-62.5%	25.0%	8	\$151,362	33.3%	191.6%	6	\$51,904	-14.3%	-40.7%
25 - 30	9	\$237,167	12.5%	11.3%	8	\$213,011	60.0%	109.4%	5	\$101,700	-50.0%	38.9%
31 - 36	4	\$84,375	100.0%	-85.5%	2	\$580,000	0.0%	1225.7%	2	\$43,750	-66.7%	-75.6%
37 - 42	3	\$155,000	-40.0%	-29.9%	5	\$220,994	66.7%	213.5%	3	\$70,500	0.0%	-68.7%
43 - 48	3	\$83,444	0.0%	-73.9%	3	\$320,000	-57.1%	22.6%	7	\$261,031	133.3%	61.5%
48 - 60	8	\$169,625	100.0%	1098.8%	4	\$14,150	100.0%	-92.1%	2	\$180,000	-60.0%	-18.6%
61 - 71	4	\$158,750	33.3%	-70.5%	3	\$538,333	50.0%	1166.7%	2	\$42,500	-81.8%	-27.3%
72 - 82	1	\$100,000	-80.0%	24.4%	5	\$80,400	66.7%	22.2%	3	\$65,772	-25.0%	-81.1%
83 - 93	1	\$40,000			0	\$0	-100.0%	-100.0%	1	\$10,000	-83.3%	-95.8%
94 - 104	1	\$25,000			0	\$0	-100.0%	-100.0%	2	\$90,000	0.0%	-96.7%
105 - 115	1	\$883,000			0	\$0			0	\$0	-100.0%	-100.0%
116 - 126	0	\$0			0	\$0			0	\$0		
127 - 137	0	\$0	-100.0%	-100.0%	1	\$20,000			0	\$0		
138 - 148	0	\$0	-100.0%	-100.0%	1	\$435,000			0	\$0		
160 - 170	0	\$0			0	\$0			0	\$0		
171 - 181	0	\$0			0	\$0			0	\$0		
182 - 192	0	\$0			0	\$0			0	\$0		
204 -214	0	\$0			0	\$0			0	\$0		
Over 225	0	\$0			0	\$0			0	\$0		
Subtotal	48	\$160,583	-18.6%	-4.2%	59	\$167,570	-3.3%	122.7%	61	\$75,255	-29.1%	-56.1%

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2017			2016 - 2017, % Change		2016		2015 - 2016, % Change		2015		2014 - 2015, % 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	Average Indemnity
Severity 5, 6, 7, 8 (Permanent)												
0 - 6	0	\$0			0	\$0			0	\$0		
7 - 12	0	\$0	-100.0%	-100.0%	1	\$4,900,000			0	\$0	-100.0%	-100.0%
13 - 18	1	\$20,000	-50.0%	-60.0%	2	\$50,000	100.0%	25.0%	1	\$40,000	0.0%	-97.3%
19 - 24	1	\$80,000	-75.0%	-94.5%	4	\$1,444,575	0.0%	594.1%	4	\$208,125	0.0%	-26.7%
25 - 30	3	\$1,458,333	0.0%	1006.2%	3	\$131,833	200.0%	40.6%	1	\$93,750	-66.7%	19.7%
31 - 36	6	\$1,474,583	50.0%	94.0%	4	\$760,125	100.0%	-4.2%	2	\$793,750	-50.0%	-17.5%
37 - 42	9	\$535,278	-10.0%	-60.9%	10	\$1,367,500	25.0%	-27.4%	8	\$1,884,531	-27.3%	103.0%
43 - 48	7	\$497,500	-22.2%	50.1%	9	\$331,500	125.0%	-15.3%	4	\$391,250	-50.0%	-41.9%
48 - 60	10	\$793,000	-37.5%	70.3%	16	\$465,531	0.0%	-8.3%	16	\$507,871	100.0%	-58.6%
61 - 71	3	\$956,667	-50.0%	-10.5%	6	\$1,068,786	-50.0%	156.1%	12	\$417,278	200.0%	-65.9%
72 - 82	1	\$210,000	-50.0%	-64.7%	2	\$595,000	-33.3%	-61.6%	3	\$1,548,022		
83 - 93	3	\$3,161,667			0	\$0	-100.0%	-100.0%	5	\$525,000	66.7%	-56.1%
94 - 104	2	\$1,600,000			0	\$0	-100.0%	-100.0%	2	\$884,399	-50.0%	-15.3%
105 - 115	0	\$0			0	\$0	-100.0%	-100.0%	1	\$5,000,000		
116 - 126	1	\$4,500,000	-50.0%	129.3%	2	\$1,962,500	100.0%	7750.0%	1	\$25,000	0.0%	-90.0%
127 - 137	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
138 - 148	2	\$262,500			0	\$0			0	\$0		
149 - 159	0	\$0	-100.0%	-100.0%	1	\$5,250,000			0	\$0	-100.0%	-100.0%
160 - 170	0	\$0			0	\$0	-100.0%	-100.0%	1	\$202,500		
171 - 181	0	\$0			0	\$0	.	.	0	\$0		
182 - 192	0	\$0			0	\$0	-100.0%	-100.0%	1	\$1,350,000		
193 - 203	0	\$0			0	\$0	.	.	0	\$0		
204 - 214	0	\$0			0	\$0	-100.0%	-100.0%	100.0%	\$625,000		
215 - 225	0	\$0			0	\$0	.	.	0	\$0		

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2017			2016 - 2017, % Change		2016		2015 - 2016, % Change		2015		2014 - 2015, % 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	Average Indemnity
Over 225	0	\$0	-100.0%	-100.0%	1	\$47,500	.	.	0	\$0	.	.
Subtotal	49	\$1,027,398	-19.7%	13.6%	61	\$904,041	-3.2%	17.3%	63	\$770,931	16.7%	-17.0%
Severity 9 (Fatalities)												
0 - 6	0	\$0			0	\$0			0	\$0		
7 - 12	0	\$0			0	\$0	-100.0%	-100.0%	1	\$1,700,000	0.0%	1033.3%
13 - 18	0	\$0	-100.0%	-100.0%	3	\$238,333	0.0%	17.2%	3	\$203,333	200.0%	-91.9%
19 - 24	3	\$297,222	0.0%	35.1%	3	\$220,000	0.0%	-52.6%	3	\$464,167	50.0%	48.5%
25 - 30	4	\$255,043	0.0%	9.1%	4	\$233,750	0.0%	41.1%	4	\$165,625	0.0%	-2.6%
31 - 36	5	\$272,000	-28.6%	48.1%	7	\$183,712	75.0%	12.5%	4	\$163,250	0.0%	-90.3%
37 - 42	7	\$228,571	40.0%	-49.6%	5	\$453,200	25.0%	-6.8%	4	\$486,354	100.0%	194.8%
43 - 48	5	\$259,900	-44.4%	-23.2%	9	\$338,611	80.0%	-39.3%	5	\$557,578	400.0%	271.7%
48 - 60	6	\$360,458	50.0%	139.5%	4	\$150,500	-63.6%	-31.0%	11	\$217,960	37.5%	-44.4%
61 - 71	3	\$751,683	-50.0%	260.8%	6	\$208,333	50.0%	20.1%	4	\$173,500	-42.9%	41.6%
72 - 82	4	\$167,500	300.0%	458.3%	1	\$30,000	-83.3%	-86.0%	6	\$214,714	50.0%	-3.1%
83 - 93	2	\$450,000	100.0%	328.6%	1	\$105,000			0	\$0	-100.0%	-100.0%
94 - 104	0	\$0	-100.0%	-100.0%	3	\$255,000	50.0%	39.7%	2	\$182,500	100.0%	-81.5%
105 - 115	0	\$0			0	\$0			0	\$0	-100.0%	-100.0%
116 - 126	1	\$8,000,020			0	\$0	-100.0%	-100.0%	1	\$70,000	0.0%	4566.7%
127 - 137	0	\$0			0	\$0			0	\$0		
138 - 148	0	\$0	-100.0%	-100.0%	1	\$75,000			0	\$0		
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			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												
2017			2016 - 2017, % Change		2016		2015 - 2016, % Change		2015		2014 - 2015, % 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	Average Indemnity
Over 225	0	\$0			0	\$0			0	\$0		
Subtotal	40	\$503,979	-14.9%	101.8%	47	\$249,712	-2.1%	-17.7%	48	\$303,461	17.1%	-35.2%

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 Malpractice Actions by Company, 2017
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	255	333	190	\$84,013,976
Missouri Hospital Plan	107	93	32	\$13,150,919
Missouri Professionals Mutual-Physicians Professional	40	64	24	\$3,573,000
Medical Protective Company	59	60	9	\$3,290,000
Norcal Mutual Insurance Company	57	40	8	\$1,185,000
Columbia Casualty Company	37	36	20	\$3,262,371
Proassurance Indemnity Company Inc	34	34	9	\$1,394,650
Medical Liability Alliance	37	32	10	\$2,190,000
Doctors Company An Interins Exchange	28	30	10	\$4,482,540
Lexington Insurance Company	7	21	4	\$416,500
Continental Casualty Company	20	20	5	\$596,500
MMIC Insurance Inc	9	16	4	\$875,000
American Casualty Company Of Reading Pennsylvania	10	12	4	\$115,750
St Lukes Health System Risk Retention Group	9	11	9	\$1,531,500
Physicians Professional Indemnity Association	0	9	7	\$1,950,000
Medicus Insurance Company	0	8	2	\$1,300,000
Capson Physicians Insurance Company	6	8	4	\$332,500
Preferred Physicians Medical Risk Retention Group A	10	8	0	\$0
Health Care Industry Liability Reciprocal Insurance	3	7	7	\$1,905,000
NCMIC Insurance Company	5	7	5	\$459,500
Professional Solutions Insurance Company	4	6	2	\$520,000
Evanston Insurance Company	2	6	3	\$783,222
Pharmacists Mutual Insurance Company	3	5	3	\$37,750
National Fire & Marine Insurance Company	7	5	0	\$0
Cincinnati Insurance Company The	1	4	1	\$50,000
Missouri Doctors Mutual Insurance Company	10	4	2	\$1,158,688
Galen Insurance Company	0	4	4	\$670,000
Keystone Mutual Insurance Company	7	4	1	\$150,000
Podiatry Insurance Company Of America A Mutual	3	4	2	\$80,000
Allied World Surplus Lines Insurance Company	2	4	1	\$2,500
Admiral Insurance Company	4	4	0	\$0
Ironshore Speciality Insurance Company	3	4	4	\$700,000
Oms National Insurance Company Rrg	3	4	0	\$0
Physicians Insurance Mutual	1	3	1	\$50,000
Steadfast Insurance Company	4	3	3	\$1,437,500
Centennial Casualty Company	2	3	3	\$225,679
Proassurance Specialty Insurance Inc	2	2	1	\$4,800,000
Paco Assurance Company Inc	1	2	1	\$100,000
Emergency Physicians Insurance Exchange Risk Retention	0	2	1	\$15,000
Illinois Union Insurance Company	0	2	2	\$72,500

Medical Malpractice Actions by Company, 2017
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Intermed Insurance Company	0	2	1	\$500,000
Homeland Insurance Company Of New York	3	2	1	\$175,000
Kansas Medical Mutual Insurance Company	2	2	0	\$0
Essex Insurance Company	0	2	1	\$185,000
Fortress Insurance Company	3	1	0	\$0
Everest Indemnity Insurance Company	0	1	1	\$250,000
Oceanus Insurance Company Rrg	3	1	1	\$250,000
Orthoforum Insurance Company A Risk Retention Group	0	1	1	\$175,000
Missouri Medical Malpractice Joint Underwriting	1	1	0	\$0
Allied World Specialty Insurance Company	1	1	0	\$0
National Union Fire Insurance Company Of Pittsburg Pa	3	1	0	\$0
Ace American Insurance Company	0	1	1	\$100,000
Chicago Insurance Company	0	1	1	\$62,106
Landmark American Insurance Company	0	1	1	\$100,000
Preferred Professional Insurance Company	2	1	0	\$0
Hudson Specialty Insurance Company	1	1	0	\$0
Starstone Specialty Insurance Company	0	1	0	\$0
James River Insurance Company	1	0	0	\$0
Hudson Excess Insurance Company	2	0	0	\$0
Liberty Insurance Underwriters Inc	1	0	0	\$0
Arch Specialty Insurance Company	8	0	0	\$0
Allied World Insurance Company	3	0	0	\$0
Cincinnati Casualty Company The	1	0	0	\$0
Fair American Insurance And Reinsurance Company	3	0	0	\$0

Medical Malpractice Actions by Company, 2016
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	288	348	197	\$128,784,179
Missouri Hospital Plan	101	116	45	\$11,689,112
Missouri Professionals Mutual-Physicians Professional	66	53	17	\$4,781,007
Medical Protective Company	42	50	7	\$629,000
Doctors Company An Interins Exchange	35	43	4	\$947,500
Columbia Casualty Company	24	33	18	\$1,882,878
Medical Liability Alliance	31	31	18	\$6,748,000
Proassurance Indemnity Company Inc	31	29	5	\$1,912,592
Norcal Mutual Insurance Company	59	26	4	\$898,000
Medicus Insurance Company	1	25	10	\$4,875,000
Lexington Insurance Company	17	22	2	\$30,000
Continental Casualty Company	15	18	3	\$401,500
Pharmacists Mutual Insurance Company	11	17	12	\$216,212
Physicians Professional Indemnity Association	0	15	9	\$742,500
NCMIC Insurance Company	10	12	7	\$918,500
MMIC Insurance Inc	13	12	3	\$830,000
St Lukes Health System Risk Retention Group	11	11	6	\$5,312,500
Capson Physicians Insurance Company	5	8	5	\$1,555,000
National Union Fire Insurance Company Of Pittsburg PA	4	8	2	\$110,000
American Casualty Company Of Reading Pennsylvania	9	8	5	\$360,001
Homeland Insurance Company Of New York	5	8	5	\$1,325,000
Evanston Insurance Company	6	8	1	\$400,000
Health Care Industry Liability Reciprocal Insurance Company	2	6	5	\$875,000
Missouri Doctors Mutual Insurance Company	9	6	2	\$606,000
Galen Insurance Company	10	6	5	\$1,640,000
Essex Insurance Company	1	6	3	\$4,175,000
Professional Solutions Insurance Company	4	5	1	\$575,000
Centennial Casualty Company	2	5	3	\$248,409
Ironshore Speciality Insurance Company	2	4	2	\$216,631
Intermed Insurance Company	2	4	1	\$100,000
Oms National Insurance Company RRG	2	4	2	\$2,500,000
Everest Indemnity Insurance Company	0	3	1	\$250,000
Oceanus Insurance Company RRG	1	3	1	\$110,000
Physicians Insurance Mutual	4	3	2	\$900,000
Admiral Insurance Company	3	3	2	\$8,300
Steadfast Insurance Company	7	3	2	\$915,825
Preferred Physicians Medical Risk Retention Group A Mutual	8	3	1	\$1,000,000
Proassurance Specialty Insurance Inc	0	2	1	\$500,000
Cincinnati Insurance Company The	4	2	1	\$68,500
National Fire & Marine Insurance Company	3	2	1	\$200,000

Medical Malpractice Actions by Company, 2016				
Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Arch Specialty Insurance Company	0	2	0	\$0
Ace American Insurance Company	1	2	0	\$0
Allied World Surplus Lines Insurance Company	5	2	2	\$175,000
Illinois Union Insurance Company	1	2	2	\$76,250
Hudson Specialty Insurance Company	0	2	0	\$0
Paco Assurance Company Inc	4	1	0	\$0
Fortress Insurance Company	2	1	0	\$0
Emergency Physicians Insurance Exchange Risk Retention	0	1	1	\$1,800,000
Keystone Mutual Insurance Company	2	1	0	\$0
Orthoforum Insurance Company A Risk Retention Group	1	1	0	\$0
Podiatry Insurance Company Of America A Mutual Company	2	1	1	\$85,000
Missouri Medical Malpractice Joint Underwriting Association	2	1	1	\$425,000
Allied World Specialty Insurance Company	2	1	1	\$175,000
American Home Assurance Company	1	1	0	\$0
American Alternative Insurance Corporation	0	1	1	\$225,000
Massachusetts Bay Insurance Company	0	1	1	\$59,999
American Safety Indemnity Company	0	1	1	\$150,000
Atlantic Specialty Insurance Company	0	1	0	\$0
North American Specialty Insurance Company	0	1	0	\$0
Citizens Insurance Company Of America	0	1	1	\$25,000
Kansas Medical Mutual Insurance Company	3	1	1	\$70,000
Fair American Insurance And Reinsurance Company	0	1	0	\$0
Proassurance Casualty Company	1	1	0	\$0
Zurich American Insurance Company	1	0	0	\$0
Axis Surplus Insurance Company	1	0	0	\$0
Landmark American Insurance Company	2	0	0	\$0
Preferred Professional Insurance Company	1	0	0	\$0

Medical Malpractice Actions by Company, 2015
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	359	328	177	\$62,008,608
Missouri Hospital Plan	99	124	46	\$6,620,766
Missouri Professionals Mutual-Physicians Professional	62	64	25	\$8,202,198
Medical Protective Company	50	53	11	\$3,466,500
Doctors Company An Interins Exchange	58	45	4	\$2,780,000
Lexington Insurance Company	20	41	7	\$890,000
Proassurance Indemnity Company Inc	37	39	4	\$518,313
Medical Liability Alliance	30	30	5	\$2,258,000
Medicus Insurance Company	13	29	8	\$2,777,500
Columbia Casualty Company	32	24	15	\$2,607,750
St Lukes Health System Risk Retention Group	9	22	11	\$6,951,615
Physicians Professional Indemnity Association	1	19	13	\$3,209,592
Missouri Doctors Mutual Insurance Company	9	18	10	\$756,500
Pharmacists Mutual Insurance Company	14	16	15	\$3,249,866
MMIC Insurance Inc	20	16	5	\$1,294,000
Continental Casualty Company	16	12	7	\$1,557,500
National Union Fire Insurance Company Of Pittsburg Pa	7	11	8	\$30,966
Galen Insurance Company	12	9	2	\$1,020,000
Preferred Physicians Medical Risk Retention Group A	9	9	3	\$1,370,000
Oms National Insurance Company RRG	4	9	1	\$20,000
Professional Solutions Insurance Company	8	8	2	\$1,375,000
Capson Physicians Insurance Company	8	8	2	\$290,000
American Casualty Company Of Reading Pennsylvania	8	8	3	\$1,215,000
Chicago Insurance Company	2	7	2	\$1,075,000
Steadfast Insurance Company	6	6	1	\$135,000
Intermed Insurance Company	0	6	3	\$4,225,000
Essex Insurance Company	6	6	1	\$500,000
Emergency Physicians Insurance Exchange Risk Retention	2	5	4	\$1,775,000
Health Care Industry Liability Reciprocal Insurance	8	5	4	\$502,500
Southwest Physicians Risk Retention Group Inc	0	5	0	\$0
Liberty Insurance Underwriters Inc	1	5	1	\$32,000
Cincinnati Insurance Company The	3	4	4	\$407,500
Fortress Insurance Company	3	4	1	\$12,500
Everest Indemnity Insurance Company	0	4	0	\$0
NCMIC Insurance Company	5	4	2	\$325,000
Ace American Insurance Company	2	4	2	\$116,000
Ironshore Speciality Insurance Company	4	4	4	\$410,000
Keystone Mutual Insurance Company	3	3	2	\$375,000
Podiatry Insurance Company Of America A Mutual	2	3	3	\$515,000
National Fire & Marine Insurance Company	7	3	1	\$866,011
Allied World Surplus Lines Insurance Company	3	3	0	\$0

Medical Malpractice Actions by Company, 2015
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Admiral Insurance Company	1	3	3	\$282,500
Homeland Insurance Company Of New York	4	3	0	\$0
Kansas Medical Mutual Insurance Company	2	3	1	\$110,000
Evanston Insurance Company	9	3	3	\$1,413,274
Proassurance Specialty Insurance Inc	1	2	1	\$69,000
Emergency Medicine Risk Retention Group Inc	0	2	2	\$650,000
Oceanus Insurance Company RRG	1	2	1	\$410,934
Missouri Medical Malpractice Joint Underwriting	1	2	2	\$420,000
Centennial Casualty Company	5	2	1	\$239,800
General Star Indemnity Company	0	2	1	\$245,764
James River Insurance Company	1	1	0	\$0
Physicians Insurance Mutual	2	1	1	\$80,000
Community Blood Centers Exchange	0	1	1	\$80,000
Allied World Specialty Insurance Company	0	1	0	\$0
Church Mutual Insurance Company	0	1	0	\$0
Arch Specialty Insurance Company	0	1	1	\$225,000
American Insurance Company The	0	1	1	\$207,500
Massachusetts Bay Insurance Company	1	1	1	\$310,000
Granite State Insurance Company	0	1	1	\$3,000
St Paul Fire & Marine Insurance Company	0	1	1	\$202,500
Atlantic Specialty Insurance Company	1	1	1	\$35,000
Norcal Mutual Insurance Company	42	1	0	\$0
Health Care Indemnity Inc	0	1	1	\$750,000
Preferred Professional Insurance Company	0	1	0	\$0
Orthoforum Insurance Company A Risk Retention Group	2	0	0	\$0
Illinois Union Insurance Company	2	0	0	\$0
Fair American Insurance And Reinsurance Company	1	0	0	\$0
Hudson Specialty Insurance Company	3	0	0	\$0
Starstone Specialty Insurance Company	1	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 / Entity Type, 2017
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Misc . Corporations / Partnership, etc	228	253	77	\$27,713,336
Hospitals	214	247	137	\$47,446,695
General Physician / Surgeon	94	119	28	\$8,773,299
Orthopedics	66	60	14	\$2,425,000
OB / GYN	34	57	15	\$5,047,500
Dentists	55	46	12	\$527,794
Emergency Medicine	59	44	18	\$6,124,705
Nurses (excluding anesthesiologist)	38	43	14	\$2,150,369
Skilled Nursing Facilities	32	34	31	\$5,925,750
Cardiologists / Vascular Specialists	31	32	4	\$4,642,500
Internal Medicine	40	32	10	\$1,119,564
Neurology	11	27	6	\$2,397,500
Radiology	31	27	8	\$2,632,500
Clinics - Outpatient - Surgery	22	25	8	\$6,530,334
Clinics - Outpatient Only, No Surgery	16	22	7	\$1,240,750
Anesthesiology	14	20	5	\$485,000
Pediatricians	11	18	5	\$9,609,044
Urologists	9	15	4	\$1,000,000
All other (speech therapists, other therapists)	11	14	4	\$365,000
Gastroenterology	9	13	3	\$650,000
Nursing Homes	6	12	5	\$548,001
Cosmetic Surgery	7	10	3	\$355,000
Nurse Anesthetists	2	10	1	\$300,000
Hospitalists	13	9	3	\$762,000
Otorhinolaryngology	6	9	1	\$90,000
Physicians / Surgeons Assistants	10	8	1	\$480,000
Chiropractor	9	8	5	\$459,500
Pharmacists / Pharmacies	9	7	6	\$50,500
Dermatology	3	6	1	\$500,000
Podiatrists	6	6	4	\$305,000
Psychiatry	12	5	2	\$240,000
Ophthalmology	6	4	0	\$0
Physicians - Misc.	10	4	1	\$15,000
Infectious Disease	6	3	0	\$0
Pathology	4	3	0	\$0
Psychologists	4	2	1	\$100,000
Allergy / Immunologists	0	2	1	\$75,000
Pulmonologists	1	2	0	\$0
Oncology	3	2	0	\$0

indemnity by Specialty / Entity Type, 2017
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Radiologists - Non-Physicians (techs, etc)	4	2	1	\$300,000
Physical Medicine	10	1	0	\$0
Hematology	2	1	0	\$0
Nephrology	0	1	0	\$0
Geriatrics	4	1	0	\$0
Hospices	0	1	0	\$0
Alcohol / Drug Rehabilitation Centers	0	1	0	\$0
Cardiac Centers	1	1	0	\$0
Lab Techs - Non-Physicians	0	1	0	\$0
Mental Institutions	1	1	0	\$0
Occupational Medicine	1	0	0	\$0
Intensive Care Physicians	1	0	0	\$0
Rehabilitation Hospitals	3	0	0	\$0
Optometrists	1	0	0	\$0

Indemnity by Specialty / Entity Type, 2016				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	258	304	171	\$48,946,852
Misc . Corporations / Partnership, etc	214	259	100	\$35,810,181
General Physician / Surgeon	101	126	40	\$24,347,000
Dentists	35	63	21	\$3,846,648
Orthopedics	75	62	19	\$5,820,600
Emergency Medicine	43	50	17	\$8,580,000
Radiology	23	49	16	\$7,964,500
OB / GYN	50	48	24	\$16,617,572
Nurses (excluding anesthesiologist)	34	43	25	\$8,128,542
Internal Medicine	39	42	10	\$9,525,000
Skilled Nursing Facilities	29	31	32	\$5,040,839
Neurology	27	25	8	\$3,509,475
Cardiologists / Vascular Specialists	27	24	2	\$1,362,499
Pharmacists / Pharmacies	14	21	20	\$361,712
Urologists	7	21	5	\$3,887,500
Anesthesiology	27	20	4	\$1,450,000
Clinics - Outpatient Only, No Surgery	16	20	12	\$3,663,873
Chiropractor	18	19	11	\$1,255,500
Clinics - Outpatient - Surgery	29	17	9	\$7,117,500
Nurse Anesthetists	8	17	6	\$1,470,000
Hospitalists	5	12	1	\$125,000
Nursing Homes	8	12	7	\$653,251
Gastroenterology	10	10	4	\$277,592
Physicians - Misc.	9	10	8	\$2,837,000
Cosmetic Surgery	7	9	0	\$0
Pediatricians	4	7	5	\$3,343,500
Pulmonologists	0	6	1	\$315,000
Physicians / Surgeons Assistants	9	5	2	\$460,000
Psychiatry	5	5	0	\$0
Ophthalmology	5	5	1	\$10,000
Otorhinolaryngology	7	5	1	\$400,000
Podiatrists	5	5	2	\$125,000
Physical Medicine	3	4	1	\$155,000
Pathology	2	4	0	\$0
All other (speech therapists, other therapists)	5	4	4	\$1,056,500
Radiologists - Non-Physicians (techs, etc)	3	3	2	\$225,000
Hematology	2	2	2	\$285,000
Psychologists	1	2	2	\$275,000
Intensive Care Physicians	0	2	2	\$525,000
Oncology	1	2	1	\$1,000,000

Indemnity by Specialty / Entity Type, 2016				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospices	1	2	1	\$59,999
Cardiac Centers	2	2	0	\$0
EMT	0	2	1	\$225,000
Pharmacologists	0	1	1	\$25,000
Nephrology	0	1	0	\$0
Endocrinology	1	1	0	\$0
Geriatrics	1	1	0	\$0
Dermatology	3	1	1	\$925,000
Mental Institutions	0	1	0	\$0
Optometrists	0	1	0	\$0
Forensic / Legal Medicine	1	0	1	\$425,000
Infectious Disease	1	0	0	\$0
Rehabilitation Hospitals	2	0	0	\$0
Alcohol / Drug rehabilitation Centers	4	0	1	\$4,000
Midwives	1	0	1	\$600,000

Indemnity by Specialty of Individual / Entity Type, 2015
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	303	315	257	\$95,731,989
Misc . Corporations / Partnership, etc	255	225	111	\$33,957,808
General Physician / Surgeon	119	136	45	\$14,463,096
Nurses (excluding anesthesiologist)	41	87	27	\$5,687,000
Clinics - Outpatient Only, No Surgery	30	63	38	\$8,552,256
Dentists	52	62	27	\$1,307,464
Emergency Medicine	40	57	31	\$10,612,670
Internal Medicine	50	52	18	\$4,148,730
OB / GYN	60	51	27	\$7,669,950
Orthopedics	66	49	22	\$4,853,441
Radiology	36	43	17	\$5,633,434
Cardiologists / Vascular Specialists	25	30	10	\$8,523,162
Anesthesiology	19	25	8	\$2,840,000
Skilled Nursing Facilities	44	24	40	\$6,592,220
Clinics - Outpatient - Surgery	26	23	14	\$7,112,246
Pharmacists / Pharmacies	21	19	23	\$2,214,366
Urologists	20	17	7	\$3,745,764
All other (speech or other therapists)	9	14	9	\$1,107,250
Neurology	26	13	9	\$3,336,975
Ophthalmology	2	13	1	\$200,000
Nursing Homes	10	13	13	\$1,537,900
Podiatrists	11	12	9	\$3,249,015
Hospitalists	27	11	4	\$387,000
Gastroenterology	10	11	4	\$727,592
Cosmetic Surgery	10	10	2	\$425,000
Otorhinolaryngology	3	10	4	\$2,580,000
Nephrology	3	9	2	\$635,753
Physicians / Surgeons Assistants	8	7	5	\$1,958,750
Pulmonologists	6	7	0	\$0
Pediatricians	20	6	5	\$10,450,000
Radiologists - Non-Physicians (techs, etc)	3	6	4	\$1,635,000
Physicians - Misc.	7	5	1	\$472,000
Chiropractor	8	5	5	\$463,500
Nurse Anesthetists	10	5	3	\$1,300,000
Physical Medicine	6	4	1	\$220,000
Infectious Disease	2	4	1	\$25,000
Blood Banks	0	4	1	\$80,000
Psychiatry	4	3	1	\$245,000
Psychologists	1	3	2	\$80,000

Indemnity by Specialty of Individual / Entity Type, 2015
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Pathology	4	3	2	\$925,000
Oncology	1	3	1	\$1,000,000
Rehabilitation Hospitals	2	3	0	\$0
Endocrinology	1	2	0	\$0
Geriatrics	0	2	1	\$50,000
Dermatology	3	2	3	\$2,225,000
Optometrists	1	2	1	\$32,000
Sports Medicine	0	1	1	\$35,000
Hematology	1	1	0	\$0
Nuclear Medicine	0	1	0	\$0
Intensive Care Physicians	1	1	0	\$0
Hospices	3	1	1	\$59,999
Mental Institutions	2	1	1	\$60,000
Allergy / Immunologists	1	0	0	\$0
Alcohol / Drug Rehabilitation Centers	2	0	0	\$0
EMT	1	0	0	\$0

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, 2017									
Claim Reports			Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Claims settled before litigation	76	23.7%	10	26	4.5	\$41,883	\$84,133	\$132,630	\$15,686
Settled before judgment	241	75.1%	16	51	6.2	\$206,578	\$281,967	\$490,060	\$164,842
Settled after verdict	2	0.6%	16	126	2.5	\$145,000	\$205,000	\$350,000	\$193,456
Total Settled	319	99.4%	15	46	5.7	\$166,954	\$234,352	\$404,026	\$129,486
Judgment for plaintiff	1	0.3%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total Court Dispositions	1	0.3%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total paid claim dispositions	320	100.0%	15	46	5.8	\$165,914	\$234,605	\$403,222	\$129,877
Closed Without Payment									
Claims closed before litigation	129	31.2%	13	28	3.8				\$5,288
Lawsuit closed or abandoned before trial	253	61.3%	24	48	5.1				\$37,189
Settled after verdict	1	0.2%	14	86	4				.
Total not disposed by court	383	92.7%	20	41	4.6				\$26,347
Direct verdict for defendant	11	2.7%	21	69	5.5				\$108,412
Judgment for defendant	17	4.1%	20	60	5.9				\$151,574
Judgment for defendant after appeal	1	0.2%	24	95	8				\$990,405
Total Court Dispositions	29	7.0%	20	65	5.9				\$164,128
Total unpaid claim dispositions	412	100.0%	20	43	4.7				\$35,958

Means of Disposition, Cases Involving At Least One Physician or Surgeon, 2017									
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	16	9.8%	15	35	4.8	\$121,406	\$50,469	\$203,291	\$20,677
Settled before judgment	144	88.3%	20	56	6.4	\$232,368	\$348,393	\$580,761	\$239,843
Settled after verdict	2	1.2%	16	126	2.5	\$145,000	\$205,000	\$350,000	\$193,456
Total Settled	162	99.4%	19	55	6.2	\$220,330	\$317,198	\$540,631	\$217,625
Judgment for plaintiff	1	0.6%	51	98	9		\$200,000	\$200,000	\$245,384
Total Court Dispositions	1	0.6%	51	98	9		\$200,000	\$200,000	\$245,384
Total paid claim dispositions	163	100.00	19	55	6.2	\$218,978	\$316,479	\$538,541	\$217,795
Claims Closed Without Payment									
Claims closed before litigation	47	22.4%	19	33	4.1				\$11,367
Lawsuit closed or abandoned before	141	67.1%	27	52	5.4				\$52,363
Total not disposed by court	188	89.5%	25	47	5.1				\$42,114
Direct verdict for defendant	8	3.8%	26	75	6.3				\$131,635
Judgment for defendant	13	6.2%	22	61	6				\$141,693
Judgment for defendant after appeal	1	0.5%	24	95	8				\$990,405
Total Court Dispositions	22	10.5%	23	68	6.2				\$176,613
Total unpaid claim dispositions	210	100.0%	25	49	5.2				\$56,204

Means of Disposition, Cases Involving At Least One Hospital, 2017									
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	19.0%	10	25	4.6	\$28,157	\$84,752	\$112,909	\$20,072
Settled before judgment	110	80.3%	15	52	6.2	\$261,630	\$419,497	\$681,127	\$267,992
Total Settled	136	99.3%	14	47	5.9	\$216,996	\$355,502	\$572,497	\$220,595
Total paid claim dispositions	136	100.0%	14	47	5.9	\$216,996	\$355,501	\$572,497	\$220,595
Incidents Closed Without Payment									
Claims closed before litigation	39	35.8%	9	30	4.1				\$12,825
Lawsuit closed or abandoned before	63	57.8%	23	53	5.2				\$71,387
Settled after verdict	1	0.9%	14	86	4				
Total not disposed by court	103	94.5%	18	45	4.7				\$48,520
Direct verdict for defendant	2	1.8%	8	55	5.5				\$75,531
Judgment for defendant	2	1.8%	4	78	9				\$170,821
Judgment for defendant after appeal	1	0.9%	24	95	8				\$990,405
Total Court Dispositions	5	4.6%	10	72	7.4				\$296,622
Total unpaid claim dispositions	108	100.0%	17	46	4.8				\$59,456

Means of Disposition, All Cases, 2016									
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	92	24.7%	7	28	3.8	\$75,550	\$107,756	\$183,828	\$12,124
Settled before judgment	277	74.3%	18	50	6.3	\$280,518	\$246,966	\$543,500	\$143,886
Total Settled	369	98.9%	15	45	5.7	\$229,415	\$212,258	\$453,826	\$111,035
Direct verdict for plaintiff	1	0.3%	15	116	9	\$206,000		\$206,000	\$243,171
Judgment for plaintiff	3	0.8%	31	70	7	\$1,032,636	\$900,000	\$1,932,636	\$245,863
Total Court Dispositions	4	1.1%	27	81	7.5	\$825,977	\$675,000	\$1,500,977	\$245,190
Total paid claim dispositions	373	100.0%	15	45	5.7	\$235,812	\$217,221	\$465,055	\$112,473
Incidents Closed Without Payment									
Claims closed before litigation	136	33.4%	10	29	3.6				\$1,779
Lawsuit closed or abandoned before	251	61.7%	22	48	5.1				\$30,791
Settled after verdict	1	0.2%	34	45	9				\$44,636
Total not disposed by court	388	95.3%	18	41	4.6				\$20,657
Direct verdict for defendant	4	1.0%	17	56	4.8				\$65,866
Judgment for defendant	13	3.2%	23	53	5				\$156,715
Judgment for defendant after appeal	2	0.5%	10	74	6				\$48,106
Total Court Dispositions	19	4.7%	20	56	5.1				\$126,157
Total unpaid claim dispositions	407	100.0%	18	42	4.6				\$25,582

Means of Disposition, All Involving At Least One Physician or Surgeon, 2016									
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	17	8.9%	11	34	4	\$71,555	\$238,671	\$310,226	\$22,122
Settled before judgment	171	89.5%	20	53	6.5	\$400,266	\$330,770	\$755,636	\$189,084
Total Settled	188	98.4%	19	52	6.3	\$370,542	\$322,442	\$715,360	\$173,986
Direct verdict for plaintiff	1	0.5%	15	116	9	\$206,000		\$206,000	\$243,171
Judgment for plaintiff	2	1.0%	35	91	6	\$1,523,954	\$1,350,000	\$2,873,954	\$360,166
Total Court Dispositions	3	1.6%	28	99	7	\$1,084,636	\$900,000	\$1,984,636	\$321,168
Total paid claim dispositions	191	100.0%	19	52	6.3	\$381,758	\$331,513	\$735,296	\$176,298
Incidents Closed Without Payment									
Claims closed before litigation	31	16.7%	14	37	4.1				\$2,356
Lawsuit closed or abandoned before	145	78.0%	24	52	5.4				\$38,631
Settled after verdict	1	0.5%	34	45	9				\$44,636
Total not disposed by court	177	95.2%	22	49	5.2				\$32,312
Direct verdict for defendant	1	0.5%	25	50	9				\$164,530
Judgment for defendant	7	3.8%	32	71	5.9				\$280,377
Judgment for defendant after appeal	1	0.5%	18	70	3				\$76,548
Total Court Dispositions	9	4.8%	30	69	5.9				\$244,857
Total unpaid claim dispositions	186	100.00	23	50	5.3				\$42,596

Means of Disposition, Cases Involving At Least One Hospital, 2016									
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	45	26.9%	6	28	4.4	\$107,619	\$162,986	\$270,605	\$15,287
Settled before judgment	121	72.5%	16	51	6.5	\$234,716	\$264,808	\$533,408	\$145,034
Total Settled	166	99.4%	13	45	5.9	\$200,262	\$237,206	\$462,166	\$109,861
Judgment for plaintiff	1	0.6%	23	27	9	\$50,000		\$50,000	\$17,258
Total Court Dispositions	1	0.6%	23	27	9	\$50,000		\$50,000	\$17,258
Total paid claim dispositions	167	100.0%	14	45	6	\$199,362	\$235,785	\$459,698	\$109,307
Incidents Closed Without Payment									
Claims closed before litigation	66	49.3%	7	29	3.7				\$2,066
Lawsuit closed or abandoned before	61	45.5%	23	53	5.4				\$38,413
Total not disposed by court	127	94.8%	15	40	4.5				\$19,524
Direct verdict for defendant	2	1.5%	21	86	3.5				\$47,218
Judgment for defendant	3	2.2%	13	40	7				\$140,061
Judgment for defendant after appeal	2	1.5%	10	74	6				\$48,106
Total Court Dispositions	7	5.20%	14	63	5.7				\$87,262
Total unpaid claim dispositions	134	100.00	15	42	4.6				\$23,063

Means of Disposition, All Cases, 2015									
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	105	27.70%	8	23	4.5	\$58,527	\$53,410	\$112,336	\$5,046
Settled before judgment	262	69.10%	21	54	6.2	\$198,596	\$213,230	\$413,696	\$122,905
Settled after verdict	3	0.80%	17	82	4.7	\$891,030	\$631,215	\$1,522,245	\$399,106
Total Settled	370	97.60%	18	46	5.7	\$164,461	\$171,265	\$337,163	\$91,698
Direct verdict for plaintiff	2	0.50%	10	59	4	\$77,310		\$77,310	
Judgment for plaintiff	6	1.60%	17	60	4.8	\$50,833	\$171,757	\$222,590	\$286,429
Total Court Dispositions	8	2.10%	15	60	4.6	\$57,453	\$128,818	\$186,270	\$214,822
Total paid claim dispositions	378	100.00	18	46	5.7	\$161,774	\$169,932	\$333,109	\$94,055
Incidents Closed Without Payment									
Claims closed before litigation	145	33.80%	10	30	4.2				\$3,724
Lawsuit closed or abandoned before	255	59.40%	26	53	4.8				\$36,392
Settled after verdict	1	0.20%	9	12	3				\$1,088
Total not disposed by court	401	93.50%	20	44	4.6				\$24,491
Direct verdict for defendant	19	4.40%	19	59	5.7				\$170,673
Judgment for defendant	9	2.10%	43	82	6.6				\$95,863
Total Court Dispositions	28	6.50%	27	66	6				\$146,627
Total unpaid claim dispositions	429	100.0%	21	46	4.7				\$32,463

Means of Disposition, Cases Involving At Least One Physician, 2015									
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	19	11.80%	13	28	5.2	\$152,473	\$72,259	\$225,485	\$10,775
Settled before judgment	136	84.50%	19	53	6.8	\$281,237	\$247,345	\$532,185	\$170,883
Settled after verdict	1	0.60%	24	77	5	\$2,267,816	\$1,732,184	\$4,000,000	\$975,887
Total Settled	156	96.90%	19	50	6.6	\$278,289	\$235,538	\$517,060	\$156,543
Judgment for plaintiff	5	3.10%	16	58	4.8	\$57,600	\$159,508	\$217,108	\$320,888
Total Court Dispositions	5	3.10%	16	58	4.8	\$57,600	\$159,508	\$217,108	\$320,888
Total paid claim dispositions	161	100.00	19	51	6.6	\$271,435	\$233,177	\$507,745	\$161,647
Incidents Closed Without Payment									
Claims closed before litigation	51	22.00%	19	36	5				\$6,522
Lawsuit closed or abandoned before	164	70.70%	25	53	5				\$43,764
Total not disposed by court	215	92.70%	23	49	5				\$34,930
Direct verdict for defendant	11	4.70%	24	64	6				\$168,704
Judgment for defendant	6	2.60%	26	56	7				\$67,207
Total Court Dispositions	17	7.30%	24	61	6.4				\$132,882
Total unpaid claim dispositions	232	100.0%	24	50	5.1				\$42,107

Means of Disposition, Cases Involving At Least One Hospital, 2015									
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	50	29.1%	7	21	4.4	\$51,953	\$45,687	\$97,640	\$7,488
Settled before judgment	119	69.2%	19	58	6.6	\$242,332	\$247,042	\$491,474	\$162,486
Settled after verdict	1	0.6%	24	77	5	\$2,267,816	\$1,732,184	\$4,000,000	\$975,887
Total Settled	170	98.8%	16	47	5.9	\$198,253	\$196,556	\$396,279	\$121,683
Judgment for plaintiff	1	0.6%	23	65	7		\$350,000	\$350,000	\$997,691
Total Court Dispositions	1	0.6%	23	65	7		\$350,000	\$350,000	\$997,691
Total paid claim dispositions	171	100.0%	16	48	5.9	\$195,959	\$196,339	\$393,752	\$126,069
Incidents Closed Without Payment									
Claims closed before litigation	69	45.1%	7	31	4.3				\$3,263
Lawsuit closed or abandoned before	76	49.7%	25	54	5				\$46,461
Total not disposed by court	145	94.8%	16	43	4.7				\$25,905
Direct verdict for defendant	7	4.6%	17	60	6.1				\$233,165
Judgment for defendant	1	0.7%	15	40	9				
Total Court Dispositions	8	5.2%	16	58	6.5				\$204,019
Total unpaid claim dispositions	153	100.0%	16	44	4.8				\$35,218

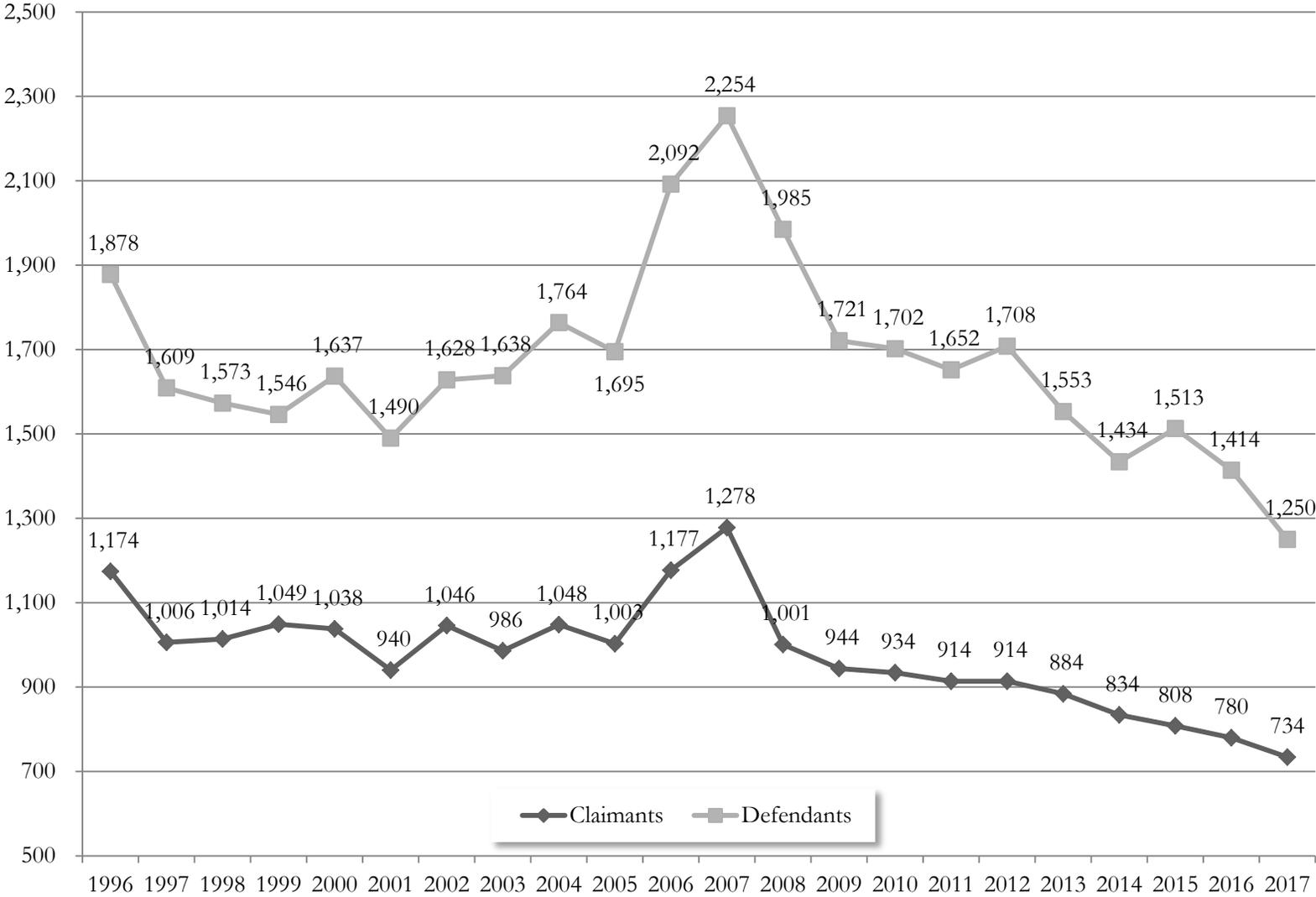
Section VII

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 Year Closed



**Closed Malpractice Actions by Type of Defendants
1996-2017**

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
1996	1,174	512	\$95,102,860	\$185,748	969	709	200	268	263	73
1997	1,006	437	\$89,262,936	\$204,263	769	677	163	201	260	72
1998	1,014	420	\$73,073,271	\$173,984	748	643	182	136	254	83
1999	1,049	484	\$77,005,522	\$159,102	708	683	155	210	289	63
2000	1,038	393	\$103,221,836	\$262,651	797	681	159	204	228	45
2001	940	395	\$86,460,489	\$218,887	685	665	140	199	248	53
2002	1,046	446	\$110,002,907	\$246,643	791	705	132	201	280	44
2003	986	447	\$118,799,306	\$265,770	732	758	148	208	302	42
2004	1,048	427	\$128,704,434	\$301,416	828	760	176	223	255	56
2005	1,003	401	\$136,180,518	\$339,602	815	698	182	195	248	60
2006	1,177	438	\$121,275,893	\$276,886	973	890	229	171	290	64
2007	1,278	582	\$132,699,469	\$228,006	1,004	1,056	194	222	399	76
2008	1,001	458	\$119,999,675	\$262,008	894	906	185	158	396	39
2009	944	412	\$120,822,788	\$293,259	742	798	181	152	296	54
2010	934	426	\$100,846,371	\$236,729	757	790	155	140	328	45
2011	914	430	\$128,698,130	\$299,298	648	817	187	129	350	46
2012	914	438	\$130,737,532	\$298,488	697	843	168	143	357	48
2013	884	386	\$111,689,945	\$289,352	617	745	191	123	265	56
2014	834	372	\$131,878,794	\$354,513	536	737	161	118	287	48
2015	808	379	\$126,248,286	\$333,109	576	740	197	122	283	70
2016	780	373	\$173,465,614.00	\$465,055	565	664	185	139	265	63
2017	734	321	\$129,434,267.00	\$403,222	513	616	121	118	237	36

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

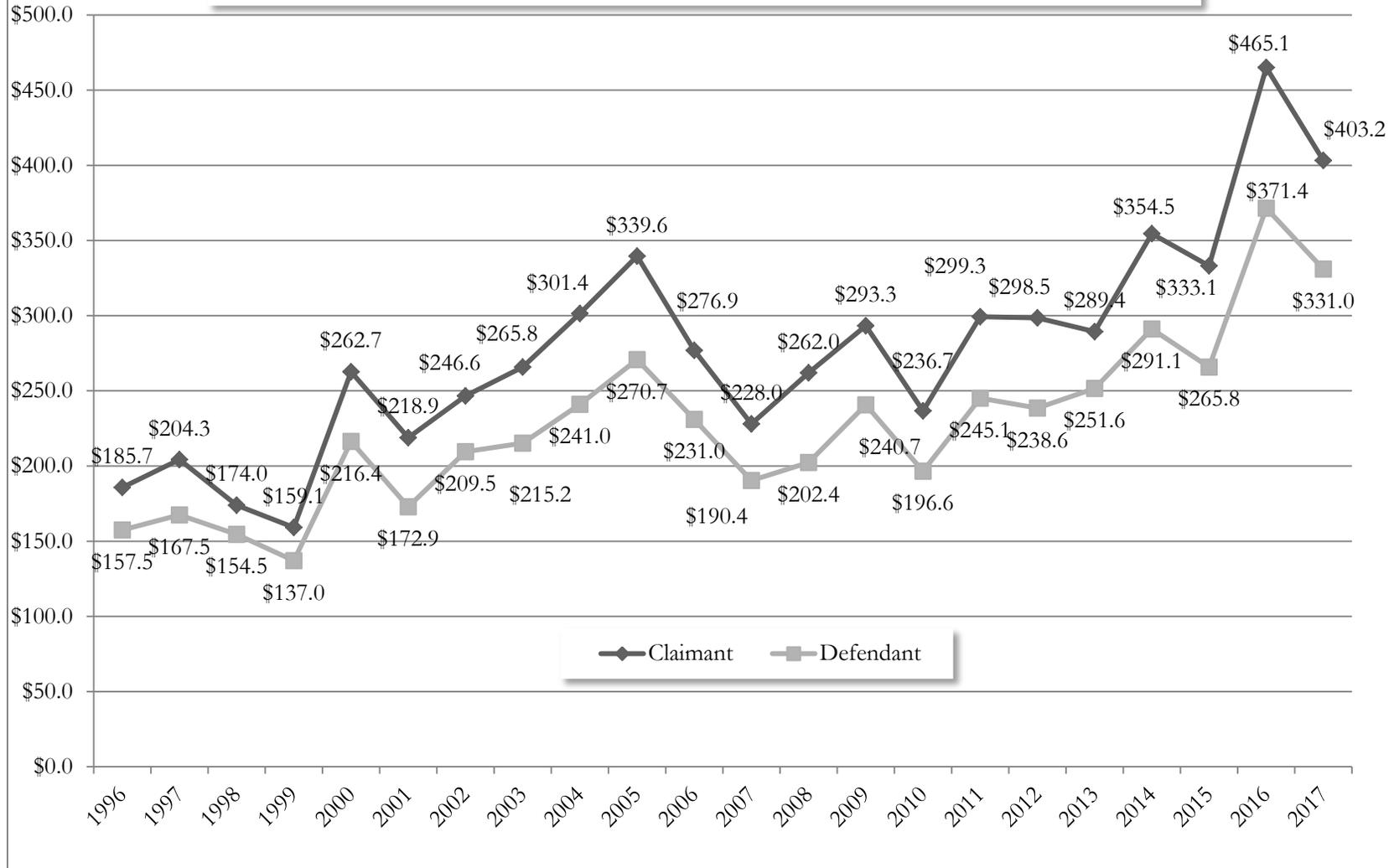
Cases Involving At Least One Physician Defendant, Closed 1996-2017										
Year Closed	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1996	694	293	\$68,390,019	\$233,413	969	338	41	268	90	16
1997	556	228	\$70,821,499	\$310,621	769	320	21	201	106	8
1998	531	183	\$50,269,231	\$274,695	748	282	15	136	88	3
1999	542	240	\$54,021,376	\$225,089	708	267	16	210	89	3
2000	579	223	\$69,813,034	\$313,063	797	317	21	204	94	2
2001	505	199	\$64,014,819	\$321,683	685	285	28	199	83	11
2002	583	217	\$60,898,939	\$280,640	791	301	24	201	81	6
2003	521	236	\$76,069,069	\$322,327	732	363	23	208	118	6
2004	582	233	\$94,393,306	\$405,121	828	372	30	223	93	11
2005	571	226	\$100,559,047	\$444,952	815	355	46	195	111	13
2006	674	220	\$87,892,272	\$399,510	973	490	64	171	123	8
2007	702	298	\$91,560,866	\$307,251	1004	565	49	222	164	16
2008	556	244	\$89,389,536	\$366,351	894	517	62	158	197	5
2009	500	231	\$95,531,197	\$413,555	742	439	54	152	160	6
2010	513	209	\$69,018,806	\$330,234	757	430	40	140	147	3
2011	435	195	\$84,904,922	\$435,410	648	402	76	129	143	11
2012	450	204	\$91,486,567	\$448,464	697	440	51	143	152	5
2013	432	182	\$75,465,657	\$414,646	617	368	62	123	95	12
2014	402	167	\$86,018,143	\$515,079	536	353	52	118	107	10
2015	393	161	\$81,746,875	\$507,745	576	357	56	122	98	16
2016	377	191	\$140,441,518	\$735,296	565	338	57	139	123	14
2017	373	163	\$87,782,193	\$538,541	513	299	37	118	99	9

Cases Involving At Least One Payment Made on Behalf of a Physician Defendant, Closed 1996-2017										
	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
1996	244	244	\$61,066,911	\$250,274	350	119	24	268	40	14
1997	179	179	\$57,760,631	\$322,685	248	102	5	201	40	2
1998	126	126	\$33,109,245	\$262,772	175	76	2	136	27	
1999	192	192	\$44,453,963	\$231,531	253	89	7	210	35	3
2000	181	181	\$58,661,903	\$324,099	251	104	13	204	44	2
2001	169	169	\$54,398,300	\$321,883	244	118	9	199	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	174	174	\$87,657,017	\$503,776	269	140	15	195	59	8
2006	150	150	\$64,123,400	\$427,489	246	139	5	171	49	3
2007	199	199	\$67,867,074	\$341,041	308	158	21	222	56	13
2008	142	142	\$66,121,143	\$465,642	244	125	13	158	57	3
2009	143	143	\$62,662,802	\$438,201	210	134	8	152	66	3
2010	128	128	\$50,037,262	\$390,916	210	120	8	140	56	1
2011	110	110	\$59,403,455	\$540,031	200	103	19	129	47	6
2012	129	129	\$69,047,975	\$535,256	205	135	11	143	74	3
2013	113	113	\$45,914,299	\$406,321	160	82	8	123	24	5
2014	111	111	\$60,237,853	\$542,683	147	108	14	118	47	7
2015	110	110	\$63,732,275	\$579,384	163	119	13	122	44	11
2016	118	118	\$101,736,787	\$862,176	184	108	22	139	47	7
2017	106	106	\$65,781,271	\$620,578	152	93	13	118	41	5

Cases Involving At Least One Institutional Defendant (Including Nursing Homes, Hospitals, Clinics & Group Practices) Closed 1996-2017										
	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
1996	629	316	\$64,893,163	\$205,358	451	709	36	109	263	14
1997	571	274	\$68,932,758	\$251,579	393	677	26	94	260	8
1998	562	274	\$59,875,606	\$218,524	363	643	26	67	254	4
1999	606	310	\$52,450,674	\$169,196	336	683	19	84	289	4
2000	580	248	\$80,960,099	\$326,452	395	681	22	91	228	2
2001	551	271	\$66,376,752	\$244,933	326	665	29	105	248	12
2002	602	313	\$86,248,579	\$275,555	374	705	17	92	280	6
2003	623	327	\$93,081,105	\$284,652	383	758	26	113	302	9
2004	623	302	\$104,195,247	\$345,017	439	760	33	125	255	14
2005	596	278	\$109,197,786	\$392,798	446	698	37	114	248	11
2006	731	329	\$101,700,111	\$309,119	582	890	59	104	290	13
2007	869	440	\$105,633,727	\$240,077	650	1056	49	128	399	15
2008	681	363	\$103,399,137	\$284,846	593	906	48	90	396	4
2009	647	315	\$101,599,181	\$322,537	511	798	45	99	296	7
2010	652	339	\$87,223,226	\$257,296	518	790	45	88	328	5
2011	676	360	\$118,798,113	\$329,995	441	817	81	89	350	13
2012	689	364	\$113,080,919	\$310,662	497	843	44	102	357	7
2013	630	293	\$97,642,527	\$333,251	429	745	64	65	265	11
2014	615	300	\$121,175,623	\$403,919	384	737	62	79	287	11
2015	598	311	\$111,810,328	\$359,519	404	740	74	86	283	23
2016	558	290	\$133,951,312	\$461,901	386	664	55	93	265	13
2017	523	253	\$108,604,362	\$429,266	316	616	37	72	237	7

Cases Involving At Least One Payment Made on Behalf of an Institutional Defendant (Including Nursing Homes, Hospitals, Clinics & Group Practices) Closed 1996-2017										
	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
1996	252	252	\$49,716,804	\$197,289	164	290	15	45	263	8
1997	229	229	\$55,223,758	\$241,152	144	293	8	44	260	4
1998	235	235	\$52,304,371	\$222,572	121	274	11	26	254	2
1999	267	267	\$46,329,612	\$173,519	116	319	10	35	289	2
2000	207	207	\$70,078,156	\$338,542	135	263	11	46	228	1
2001	232	232	\$56,314,110	\$242,733	112	295	14	65	248	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	229	229	\$89,427,773	\$390,514	164	290	15	57	248	5
2006	275	275	\$85,154,472	\$309,653	200	366	38	49	290	8
2007	374	374	\$91,133,955	\$243,674	239	469	19	59	399	8
2008	331	331	\$91,317,297	\$275,883	266	475	20	54	396	2
2009	275	275	\$92,100,590	\$334,911	233	365	25	60	296	3
2010	307	307	\$74,837,171	\$243,769	222	382	20	53	328	4
2011	328	328	\$109,411,413	\$333,571	204	409	39	54	350	10
2012	327	327	\$97,379,062	\$297,795	218	410	17	64	357	1
2013	255	255	\$84,408,553	\$331,014	146	300	37	26	265	6
2014	260	260	\$107,270,911	\$412,580	145	326	22	36	287	9
2015	258	258	\$95,547,102	\$370,338	135	345	30	37	283	12
2016	247	247	\$110,012,212	\$445,394	165	304	29	47	265	10
2017	222	222	\$93,717,362	\$422,150	125	270	15	44	237	3

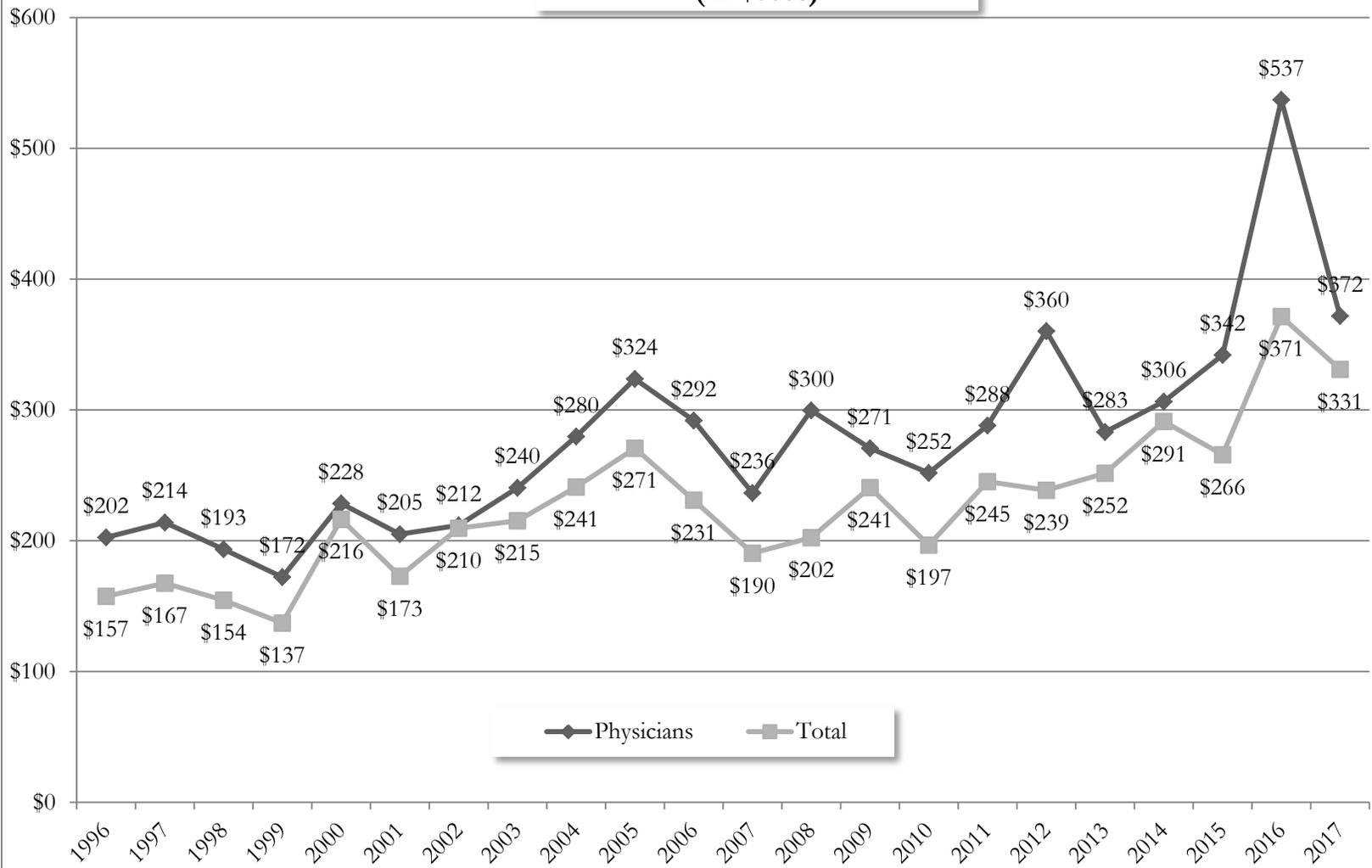
Average Payment Received by Claimant, and Paid on Behalf of Defendant in \$000s



Number of Defendants, 1996 – 2017*												
	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
1996	969	268	\$202,485	709	263	\$143,975	200	73	\$40,705	1,878	604	\$157,455
1997	769	201	\$213,930	677	260	\$170,440	163	72	\$27,063	1,609	533	\$167,473
1998	748	136	\$193,433	643	254	\$173,643	182	83	\$32,059	1,573	473	\$154,489
1999	708	210	\$172,152	683	289	\$132,716	155	63	\$39,663	1,546	562	\$137,021
2000	797	204	\$228,460	681	228	\$241,281	159	45	\$35,639	1,637	477	\$216,398
2001	685	199	\$205,014	665	248	\$170,477	140	53	\$63,858	1,490	500	\$172,921
2002	791	201	\$211,716	705	280	\$228,640	132	44	\$77,931	1,628	525	\$209,529
2003	732	208	\$240,411	758	302	\$210,645	148	42	\$123,313	1,638	552	\$215,216
2004	828	223	\$279,692	760	255	\$246,580	176	56	\$61,698	1,764	534	\$241,020
2005	815	195	\$323,656	698	248	\$266,143	182	60	\$117,736	1,695	503	\$270,737
2006	973	171	\$291,873	890	290	\$221,107	229	64	\$113,196	2,092	525	\$231,002
2007	1004	222	\$236,463	1056	399	\$183,383	194	76	\$92,565	2,254	697	\$190,387
2008	894	158	\$299,578	906	396	\$173,894	185	39	\$97,546	1,985	593	\$202,360
2009	742	152	\$270,658	798	296	\$254,439	181	54	\$80,904	1,721	502	\$240,683
2010	757	140	\$251,793	790	328	\$192,536	155	45	\$54,301	1,702	513	\$196,582
2011	648	129	\$288,000	817	350	\$250,591	187	46	\$83,463	1,652	525	\$245,139
2012	697	143	\$360,290	843	357	\$212,452	168	48	\$70,226	1,708	548	\$238,572
2013	617	123	\$283,043	745	265	\$253,196	191	56	\$174,618	1,553	444	\$251,554
2014	536	118	\$306,351	737	287	\$319,995	161	48	\$81,061	1,434	453	\$291,123
2015	576	122	\$341,974	740	283	\$256,530	197	70	\$170,419	1,513	475	\$265,786
2016	565	139	\$537,045	664	265	\$321,271	185	63	\$217,138	1,414	467	\$371,447
2017	513	118	\$371,856	616	237	\$340,505	121	36	\$134,875	1250	391	\$331,034

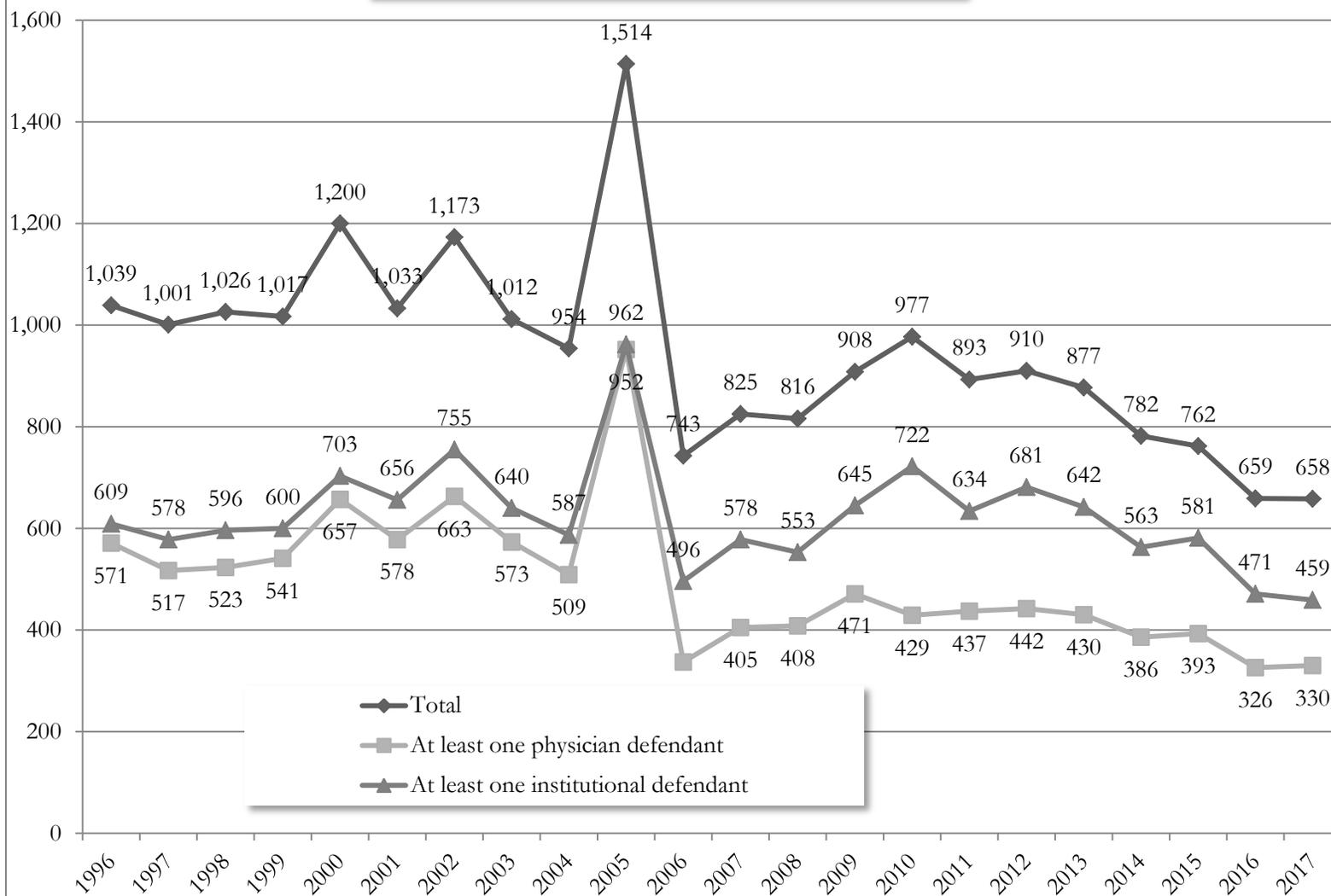
*Each defendant is counted in the year the occurrence was closed, regardless of whether the claim against the individual practitioner was closed in an earlier year.

**Average Indemnity Per Defendant
(In \$000s)**

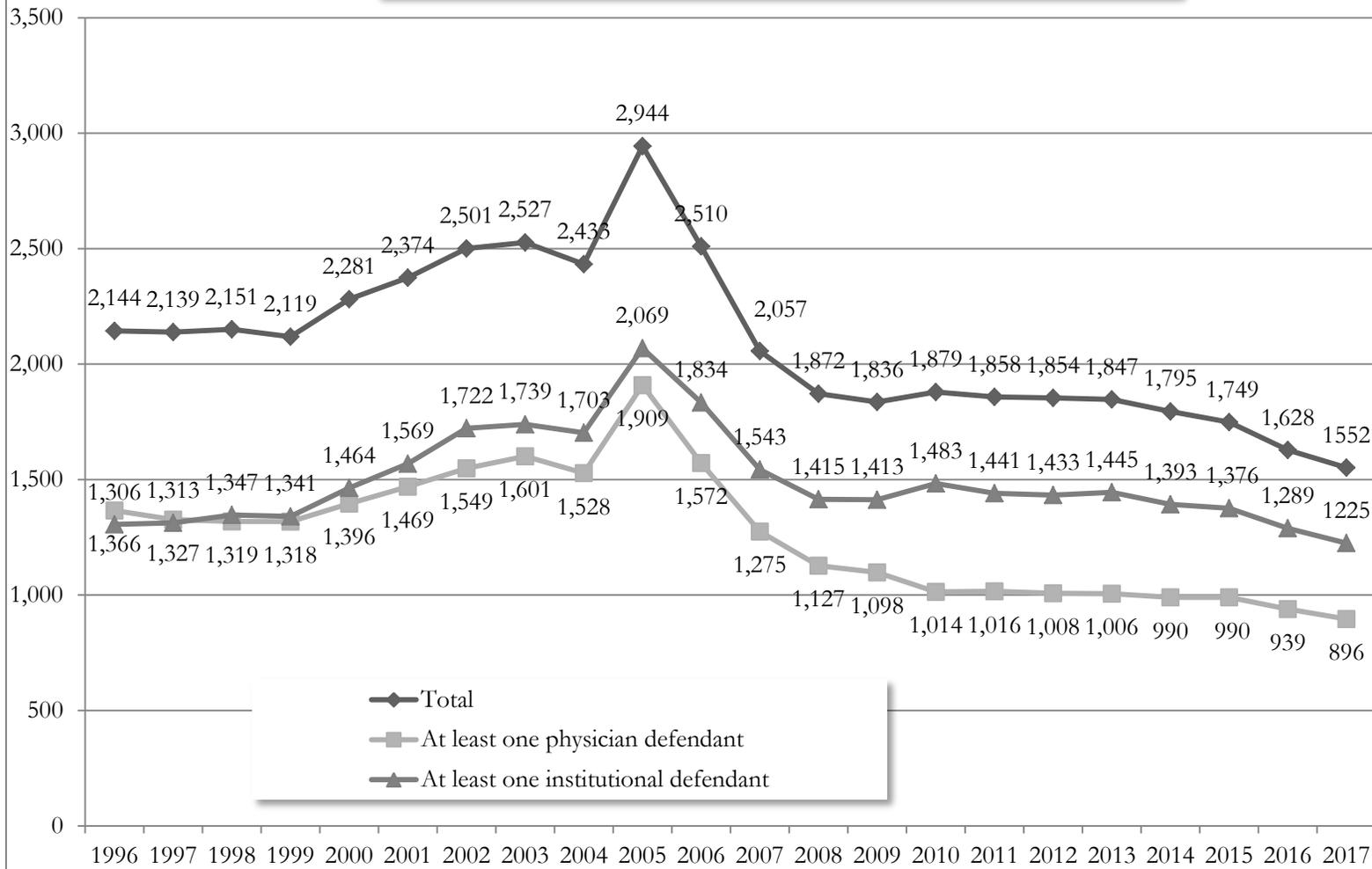


Claimants and Associated Number of Defendants By Report Year					
		Defendants			
Year Reported	Claimants	Physicians	Institutions	All Other	Total
1990	1,075	798	561	243	1,602
1991	1,121	901	642	192	1,735
1992	1,181	902	677	198	1,777
1993	1,138	934	678	185	1,797
1994	1,094	896	639	163	1,698
1995	1,163	934	707	186	1,827
1996	1,039	782	709	139	1,630
1997	1,001	708	663	163	1,534
1998	1,026	711	727	163	1,601
1999	1,017	728	715	171	1,614
2000	1,200	940	885	158	1,983
2001	1,033	813	809	171	1,793
2002	1,173	965	941	176	2,082
2003	1,012	800	795	187	1,782
2004	954	755	715	216	1,686
2005	1,514	1461	1229	260	2,950
2006	743	511	559	144	1,214
2007	825	614	675	164	1,453
2008	816	575	652	163	1,390
2009	908	681	780	151	1,612
2010	977	599	856	201	1,656
2011	893	619	766	202	1,587
2012	910	594	792	195	1,581
2013	877	616	792	174	1,582
2014	782	543	660	148	1,351
2015	762	561	699	129	1,389
2016	659	469	551	120	1140
2017	658	463	519	112	1094

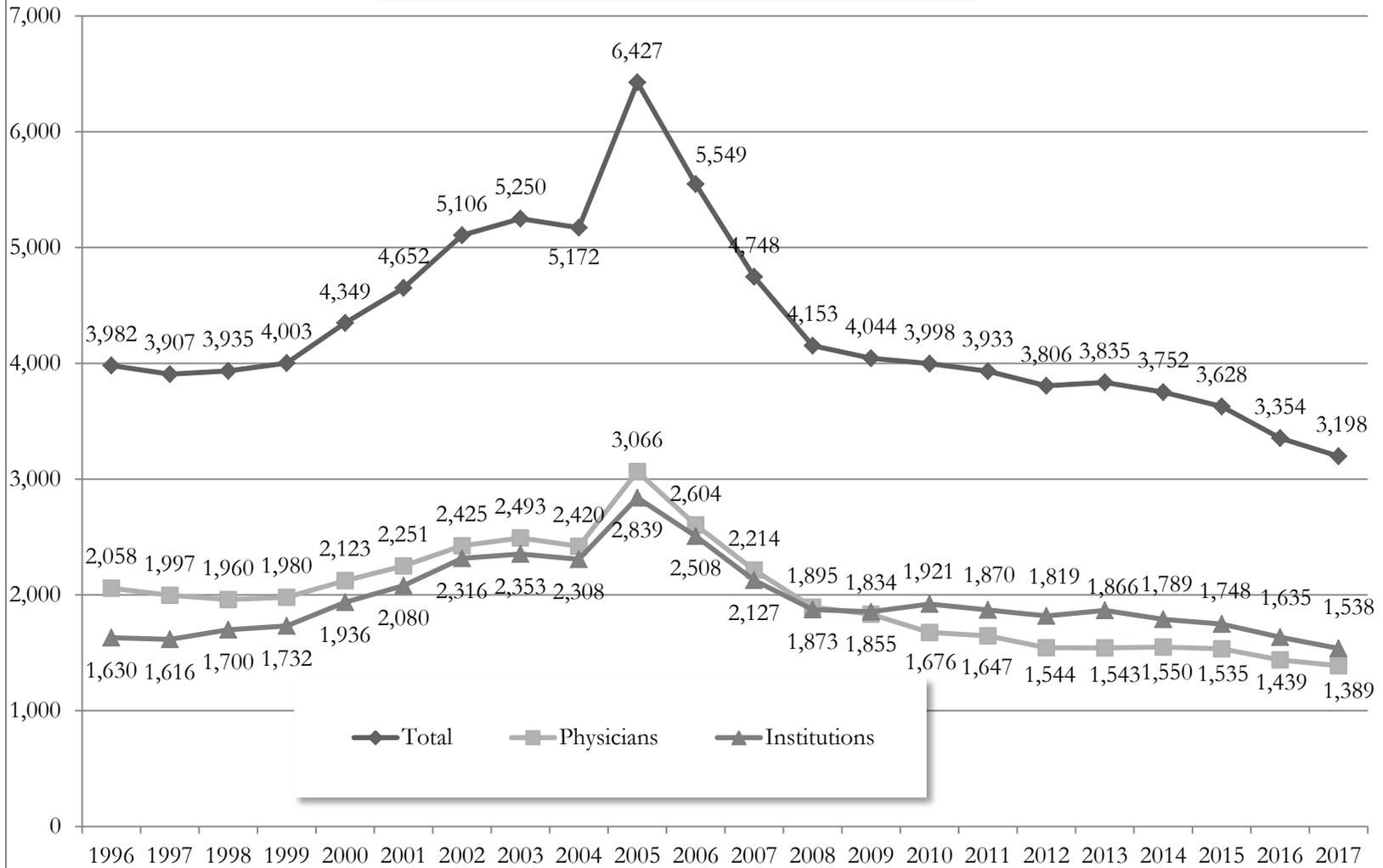
Number of New Claimants, by Report Year



Number of Claimants With Actions Pending at Year-End



Defendants With Claims Open At Year-End



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. To date, over 13,000 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 accounting 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, 2004-2017			
Category	Claimants	Claimants With Payment	Average Indemnity Per Paid Claimant
Surgery	4,529	1,987	\$323,725
Diagnosis	2,594	1,217	\$472,509
Non-surgical Treatment	2,591	1,216	\$246,231
Patient Safety / Ethics	2,154	1,001	\$140,147
Medication	1,266	574	\$187,428
Pregnancy & childbirth	877	444	\$821,825
Anesthesia	275	109	\$356,493
IV & Blood Products	226	124	\$178,476
Total	14,514	6,673	\$328,413

Adverse Outcomes by Medical Category Closed Occurrences, 2004-2017 Percent			
Category	Claimants	Claimants With Payment	Total Indemnity
Surgery	31.2%	29.8%	29.4%
Diagnosis	17.9%	18.2%	26.2%
Non-surgical Treatment	17.9%	18.2%	13.7%
Patient Safety / Ethics	14.8%	15.0%	6.4%
Medication	8.7%	8.6%	4.9%
Pregnancy & childbirth	6.0%	6.7%	16.7%
Anesthesia	1.9%	1.6%	1.8%
IV & Blood Products	1.6%	1.9%	1.0%
Total	100.0%	100.0%	100.0%

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Alleged Diagnostic Failures, by Condition				
Diagnostic Allegations - Infectious Conditions				
Respiratory infections	51	25	\$281,674	8.3
Meningitis, encephalitis, and inflammatory	49	32	\$1,219,940	4.8
Digestive disorders	29	11	\$57,727	5.8
Spine / spinal cord disorder	17	6	\$928,056	5.0
Musculoskeletal disorder order- excluding	15	10	\$806,500	7.7
Sepsis	15	10	\$575,950	6.0
Heart Condition	13	6	\$472,500	6.4
Integumentary system - skin, hair, nails	12	3	\$436,667	5.6
Diseases of the genitourinary system (kidneys,	9	4	\$86,950	8.3
Diseases of the reproductive system	6	4	\$179,737	6.8
Auditory condition	4	1	\$65,000	4.8
Infection affecting blood or immune system	3	3	\$833,333	6.3
Visual condition	2	1	\$3,000	6.5
Staph infection	2	1	\$1,155,850	9.0
Development of septic condition during care	2	1	\$350,000	9.0
Gangrene or other necrotizing condition	1	1	\$733,000	9.0
Other or unknown infection	48	23	\$387,122	6.2
Subtotal	280	142	\$304,768	6.6
Diagnostic Allegations - Non-infectious Conditions				
Cardiovascular Conditions				
Heart Condition	235	130	\$422,968	7.9
Stroke	169	82	\$574,195	7.1
Embolism/ thrombosis	102	57	\$385,360	7.3
Hematoma / aneurysm	61	37	\$525,247	8.0
Ischemia / vascular deficiency	9	6	\$686,167	7.0
Transient cerebral ischemic attacks and related	2	1	\$815,000	7.0
Subtotal	579	314	\$473,015	7.6
Cancers				
Breast	133	55	\$449,371	7.1
Respiratory tract	111	54	\$374,244	8.7
Digestive tract	81	39	\$493,977	7.3
Skin	47	24	\$454,671	6.1
Unknown or benign neoplasms	52	24	\$384,817	5.4
Reproductive organs	40	19	\$400,992	7.7
Cancer - Unknown type	37	18	\$243,302	6.4

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Kidney, bladder and related	32	16	\$611,057	6.5
Thyroid and related	27	13	\$336,602	6.3
Bone and cartilage	24	13	\$473,567	7.3
Oral	20	4	\$222,500	7.2
Central nervous system	14	10	\$233,570	7.9
Hodgkin's lymphoma, and related	11	3	\$604,500	7.4
Subtotal	629	292	\$416,726	7.2
Diagnostic Allegations - Traumatic Injuries				
Fracture	192	57	\$124,895	3.8
Injury to internal organs	66	31	\$378,935	7.1
Spinal injury	47	20	\$1,020,092	5.7
Injury to tendons or muscle	38	9	\$89,258	6.4
Poison, exposure to toxin	9	4	\$111,000	5.7
Dislocation w/out fracture	7	4	\$318,750	4.8
Cuts, burns, abrasions	2	1	\$200,000	4.0
Neurological injury	4	4	\$96,604	4.3
Trauma - details unknown	3	1	\$170,000	3.7
Peripheral nervous system	1			5.0
Sprains or other soft tissue injury	1			3.0
Injury to nerves	1			5.0
Subtotal	371	131	\$324,783	5.0
Diagnostic Allegations - Nervous system disorders				
Spine / spinal cord disorder	57	24	\$1,311,306	5.9
Other conditions of central nervous system	9	3	\$1,128,333	7.1
Epilepsy and related syndromes	4	1	\$250,000	7.5
Hydrocephalus	4			7.3
Gullian-Barre and related syndromes	2			6.0
Multiple sclerosis	1			2.0
Nerve root and plexus disorders	1			3.0
Cerebral palsy	1	1	\$75,000	6.0
Subtotal	79	29	\$1,213,149	6.1
Diagnostic Allegations – Miscellaneous Conditions				
Digestive disorders	184	90	\$400,450	5.8
Healthy patient misdiagnosed with condition	80	33	\$402,251	3.6
Diseases of the genitourinary system	35	18	\$485,139	5.9
Diseases of the reproductive system	31	14	\$240,446	5.0
Nutritional, and metabolic disorders	26	16	\$956,208	7.6
Visual condition	25	14	\$502,221	5.6

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Musculoskeletal disorder order- excluding	21	6	\$1,415,000	4.2
Blood and immune disorders	15	9	\$599,352	6.9
Diabetes	14	8	\$393,586	6.4
Compartment syndrome	12	9	\$256,666	5.3
Respiratory conditions	11	6	\$626,619	7.1
Fistula	1	1	\$35,000	3.0
Integumentary system - skin, hair, nails etc	1	1	\$125,000	4.0
Allergic reactions	1			6.0
Subtotal	456	224	\$477,150	5.5
Unknown	298	84	\$435,400	6.1
Complications of Anesthesia				
Intubation Injuries				
Injury during intubation	142	35	\$58,133	3.2
Failure to timely / properly intubate	11	10	\$646,100	8.6
Premature extubation	9	7	\$511,106	7.7
Endotracheal tube wrongly placed	2	1	\$175,000	3.0
Subtotal	164	53	\$231,102	3.8
Dosage/Agent Errors (Other Than Medications)				
Wrong dosage administered	9	4	\$451,979	5.6
Wrong agent administered	2	2	\$17,500	3.0
Other agent error	1	1	\$2,304	3.0
Injection into wrong body part	1			4.0
Subtotal	13	7	\$263,603	4.8
Cardiovascular / Respiratory Complications of Anesthesia				
Hypoxia	18	9	\$1,355,694	7.0
Other respiratory distress	13	7	\$459,528	7.4
Myocardial infarction	3	1	\$287,500	7.0
Injury from aspiration	2	1	\$25,000	5.5
Hematoma / aneurysm	1	1	\$300,000	9.0
Ischemia / vascular deficiency	5	4	\$504,250	6.6
Stroke	1			7.0
Subtotal	43	23	\$784,671	7.0
Misc. Anesthesia Complications				
Other negative side-effect of medications	13	3	\$306,667	4.5
Allergic reaction	9	4	\$296,271	4.6
Other inadequate anesthetization	12	8	\$435,199	6.8
Anesthetic or intra-operative awareness	12	7	\$42,861	1.3
Injury from equipment malfunction	3	2	\$55,000	7.0

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Cut, puncture, tear during injection	2	1	\$690,000	5.5
Pathology specimen lost	1			3.0
Subtotal	39	22	\$262,123	4.4
Unknown anesthesia problems	2	1	\$30,000	9.0
Surgical Complications				
Cardiovascular / Respiratory Complications of Surgery				
Postoperative bleeding	114	52	\$580,201	7.0
Embolism/ thrombosis	81	43	\$262,043	7.3
Ischemia / vascular deficiency	59	30	\$718,875	6.8
Myocardial infarction	58	28	\$435,381	8.0
Hypoxia	41	23	\$1,022,330	7.9
Hematoma / aneurysm	34	24	\$528,660	6.6
Stroke	31	11	\$264,950	6.7
Excess blood loss during surgery or treatment	19	8	\$875,486	6.9
Other respiratory distress	19	10	\$369,650	7.5
Injury from aspiration	16	5	\$165,613	6.2
Subtotal	472	234	\$537,776	7.2
Complications With Implanted Prosthetic, Therapeutic or Other Devices				
Improper placement of prosthetic device	181	73	\$397,379	4.7
Incorrect prosthetic device, or wrong size	75	23	\$168,098	4.2
Improper placement of therapeutic device	70	30	\$307,580	5.6
Defective implant	28	6	\$76,896	4.3
Incorrect therapeutic device, or wrong size	5	2	\$338,500	5.0
Failure to introduce or remove other device	3	1	\$70,000	3.7
Subtotal	362	135	\$320,820	4.7
Informed Consent Issues / Unnecessary Treatment				
Treatment lacked salutary effect	349	95	\$168,932	4.3
Unnecessary surgery	144	50	\$301,815	4.5
Did not consent to procedure	18	6	\$128,333	4.1
Failure to warn of risks of procedure	7	3	\$75,833	3.7
Subtotal	518	154	\$208,681	4.4
Surgical Trauma				
Cut, puncture, tear during surgery	886	476	\$329,293	5.5
Other surgical injury - nerve injury	116	44	\$363,728	5.0
Injury from patient positioning	63	25	\$250,327	4.3
Other injury incidental to medical procedure	38	19	\$247,618	4.6
Other surgical injury - internal organ	35	11	\$182,702	5.2

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Cut, puncture, tear during heart catheterization	34	14	\$761,174	6.4
Injury from equipment malfunction	32	13	\$141,282	5.7
Other surgical injury - central nervous system	20	11	\$1,016,818	6.9
Other surgical injury - impaired vision	15	8	\$264,375	4.9
Other surgical injury - fracture	13	3	\$22,833	3.8
Cut, puncture, tear during injection	11	4	\$82,500	4.9
Other surgical injury - peripheral nervous	11	6	\$547,079	5.5
Burns	9	7	\$105,213	4.0
Other surgical injury - morphology problem	8	4	\$325,000	5.4
Injury from improper operation of equipment	7	5	\$170,815	5.1
Other surgical injury - non-fracture	3			5.0
Other surgical injury - veins or arteries	1	1	\$202,000	9.0
Subtotal	1,302	651	\$335,310	5.4
Surgical Infections				
Other infection contracted during care	421	135	\$349,098	5.0
Staph infection contracted during care	55	16	\$295,537	5.1
Development of septic condition during care	44	16	\$630,932	6.7
Development of gangrene or other necrotizing	20	7	\$371,429	5.5
Pressure ulcers during care	7	2	\$65,000	3.1
Subtotal	547	176	\$367,510	5.2
Problems with Surgical Site				
Other improper closure of surgical site	79	37	\$406,073	5.2
Sutures, staples, etc improperly placed	58	31	\$606,508	5.3
Development of fistula	43	16	\$461,131	4.7
Other problem with surgical site	28	9	\$135,833	3.7
Failure in suture or ligature	4	1	\$225,000	5.3
Subtotal	212	94	\$453,745	4.9
Misc. Surgical Issues				
Foreign body retained - surgery related	303	174	\$115,481	4.0
Misset fracture or non-union	130	48	\$211,077	4.3
Procedure performed on wrong body part	115	87	\$290,910	4.2
Inappropriate handling of transplantable	42	39	\$174,602	6.2
Aborted surgery	27	11	\$58,668	3.5
Failure to identify or treat compartment	26	14	\$615,544	6.2
G-tube or feeding tube improperly placed of	23	15	\$161,303	7.5
Allergic reaction to medical materials,	16	4	\$141,625	3.3
Other problem in post-surgical care	16	5	\$426,000	6.3
Failed sterilization	13	6	\$68,500	1.8

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Contaminated substance taken or injected	7	3	\$213,333	3.0
Retained body part	7	3	\$105,833	3.7
Accidental or unnecessary sterilization	6			5.0
Foreign body retained - during heart	4	2	\$790,000	3.5
Nonadministration of necessary care or other	2	1	\$10,000	4.0
Failure to stabilize prior to transfer /	2	1	\$225,000	9.0
Wrong patient	2	1	\$122,000	5.0
Cut, puncture, tear during endoscopic exam	1			5.0
Cut, puncture, tear during other	1			6.0
Wrong fluid used in transfusion	1	1	\$175,000	6.0
Pathology specimen lost	1			1.0
Delay in scheduling surgery	1			2.0
Failure to ensure proper nutrition or hydration	1			5.0
Physician delay or failure to respond to call	1	1	\$5,500	3.0
Subtotal	748	416	\$192,810	4.4
Unknown	368	127	\$286,885	4.9
Medication-Related Allegations				
Dosage / Medication Errors				
Wrong medication administered	263	187	\$48,925	3.3
Wrong dosage administered	255	172	\$219,853	5.1
Other medication error	12	7	\$117,000	4.4
Medication administered via the wrong route	11	7	\$1,335,354	6.0
Incorrect dilution of fluid	2			8.5
Agent use or selection error	1	1	\$1,200,000	9.0
Injury from improper operation of equipment	1			3.0
Injury from equipment malfunction	1	1	\$1,250,000	7.0
Administered to wrong patient	1	1	\$25,000	3.0
Subtotal	547	376	\$158,525	4.2
Adverse Reactions to Correct Medication and Correct Dose By Medication Type				
Cognitive & affective disorders	112	2	\$55,000	4.5
Anticoagulants	63	26	\$293,778	5.8
Weight loss medications	31			3.5
Pain management, narcotics	31	9	\$126,068	6.3
Antibiotics	28	10	\$278,000	4.9
Pain management, non-narcotics	16	1	\$100,000	6.1
Steroids	15	7	\$105,714	4.2
Heart medications	13	4	\$198,125	8.0

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Cholesterol agents	9	1	\$100,000	4.3
Anti-seizure medications	7	3	\$355,000	5.1
Digestives medications	7	3	\$312,500	5.9
Chemotherapy	7	1	\$5,000	7.3
Diabetic medications	7	2	\$35,500	5.0
Anti-inflammatory, excluding steroids	7			5.0
Hypertension medications	6			5.0
Sedatives & relaxants	5	2	\$267,500	6.0
Anti-parasitic agents	4	1	\$40,000	4.5
Adrenaline & related	3	2	\$525,000	5.3
Hormonal treatments	3			4.7
Immune medications	3	1	\$325,000	5.3
Antiviral agents	3	3	\$773,667	4.7
Vaccines	2			6.0
Topical applications	1			3.0
Substance abuse	1			9.0
Antifungal agents	1			5.0
Unknown medication	116	23	\$204,677	4.9
Subtotal	501	101	\$242,103	5.1
Misc. Medicine Issues				
Allergic reaction to medication	79	36	\$149,665	4.4
Interaction of two or more medications	47	25	\$250,450	6.5
Injury from excessive use of medication	38	18	\$202,570	5.8
Addiction or withdrawal issues	25	9	\$830,842	3.5
Accident attributed to medicine	10	2	\$5,512	5.0
Premature cessation of medications	2	1	\$100,000	3.0
All acts of self-harm attributed to medication	1			9.0
Cut, puncture, tear during injection	1			3.0
Unnecessary treatment	1	1	\$60,331	3.0
Subtotal	204	92	\$249,395	5.1
Complications of IV & Blood Products				
IV infiltration event	134	74	\$115,131	6.4
Cut, puncture, tear during injection	32	14	\$57,573	3.6
Incorrect blood type	10	9	\$759,667	7.1
Embolism/ thrombosis	9	4	\$285,275	3.9
Staph infection contracted during care	7	4	\$909,000	5.6
Other infection contracted during care	7	5	\$45,060	3.9
Excessive amount of blood or other fluid	4	1	\$275,000	6.8

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Injection into wrong body part	3	3	\$79,167	4.7
Foreign body retained - during injection	3	3	\$21,667	3.7
Contaminated substance taken or injected	3	1	\$15,000	3.3
Inappropriate temperature in local application	2	2	\$77,500	4.5
Failure to identify or treat compartment	2			4.0
Wrong dosage administered	1	1	\$125,000	3.0
Wrong medication administered	1	1	\$19,500	4.0
Other negative side-effect of medications	1			9.0
Incorrect dilution of fluid	1	1	\$54,000	4.0
Development of septic condition during care	1			9.0
Injury from improper operation of equipment	1			3.0
Subtotal	222	123	\$179,765	5.6
Unknown	4	1	\$20,000	4.3
Pregnancy & Childbirth				
Intrauterine hypoxia	130	83	\$1,540,545	7.6
Shoulder dystocia	97	53	\$605,140	5.8
Complications of placental disorders	54	27	\$1,321,212	9.6
Spontaneous abortion / stillbirth	52	26	\$200,994	7.7
Infections	43	18	\$1,138,222	6.2
Cut, tear, perforation	29	10	\$755,223	4.3
Ectopic pregnancy	28	10	\$140,900	4.1
Retained surgical or other material	28	18	\$145,837	3.6
Pre-term labor	24	9	\$418,836	7.0
Other birth injuries to central nervous system	21	14	\$810,201	7.2
Birth injury to peripheral nervous system	21	12	\$446,667	20.4
Eclampsia	20	9	\$1,951,275	7.4
Complications from disproportion	17	10	\$817,973	5.7
Injury to fetus or mother due to procedure	15	4	\$94,250	6.7
Intracranial laceration or hemorrhage due to	11	6	\$682,917	6.2
Cardiovascular complications of pregnancy	11	5	\$1,193,743	8.0
Fetal abnormality or damage	10	4	\$668,750	6.9
Other obstructed labor	9	6	\$168,333	6.4
Prolonged labor	8	5	\$1,213,800	6.6
Fetus / newborn affected by maternal	8	4	\$873,750	7.6
Other injury incidental to medical procedure	8	2	\$475,000	7.1
Complications w/ abortion	7	3	\$43,333	5.4
Complications of gestational diabetes	5	2	\$237,500	8.8
Inadequate anesthetization	5	2	\$26,450	2.4

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Development of gangrene or other necrotizing	5	2	\$1,062,500	5.8
Complications of multiple gestation	4	1	\$300,000	8.5
Other obstetric trauma	4	2	\$275,000	7.0
Postpartum hemorrhage	4	2	\$475,000	7.0
Failure to stabilize prior to transfer /	4	2	\$75,000	7.5
Rh Isoimmunization	3	3	\$1,757,553	6.0
Failed induction of labor	3	3	\$2,227,575	7.0
Umbilical cord complications	3	1	\$175,000	7.0
Retained placenta and membranes	3			3.3
Other birth injuries	3	3	\$471,667	7.0
Development of fistula	3			4.3
Postoperative bleeding	3	1	\$25,000	6.7
Other maternal complications related to	2	2	\$210,000	9.0
Other fetal problems	2			9.0
Deficient fetal growth rate	2	1	\$400,000	7.0
Respiratory distress of newborn	2	1	\$300,000	9.0
Pulmonary hemorrhage originating in the	2	2	\$487,500	8.5
Seizure disorder of infant	2	1	\$100,000	7.0
Reaction to medication	2	1	\$50,000	9.0
Other improper closure of surgical site	2	1	\$7,500	3.0
Unnecessary surgery or procedure	2	1	\$150,000	9.0
Failed resuscitation	2	2	\$120,000	9.0
Retained body part	2			4.5
Breach of patient confidentiality	1	1	\$10,000	1.0
Not applicable, no allegation of medical injury	1	1	\$7,500	1.0
Complications w hypertension	1			6.0
Complications from prolonged pregnancy	1	1	\$85,000	5.0
Hemolytic disease of fetus or newborn	1			9.0
Kernicterus	1	1	\$3,000,000	8.0
Neonatal Jaundice	1	1	\$3,850,000	7.0
Metabolic / endocrine disorders of fetus or	1	1	\$250,000	7.0
Mix-up of newborn at discharge	1			1.0
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
Failure to identify or treat compartment	1			3.0
Sutures, staples, etc improperly placed	1	1	\$85,000	3.0
Other respiratory distress	1			4.0

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Development of septic condition during care	1	1	\$450,000	9.0
Other problem with surgical site	1			5.0
Failure to timely / properly intubate	1	1	\$300,000	7.0
Physician delay or failure to respond to call	1	1	\$1,725,000	7.0
Injury from patient positioning	1			1.0
Injury from improper operation of equipment	1	1	\$93,000	5.0
Injury from equipment malfunction	1			3.0
Other injury unrelated to medical treatment	1	1	\$16,500	3.0
Subtotal	802	429	\$779,940	6.6
Unknown	129	57	\$531,515	6.7
Complications of Non-Surgical Treatment				
Cardiovascular / Respiratory Complications				
Myocardial infarction	41	20	\$405,417	8.0
Embolism/ thrombosis	30	13	\$274,282	5.5
Stroke	28	9	\$706,111	7.0
Hematoma / aneurysm	13	6	\$147,208	7.7
Hypoxia	11	7	\$303,714	8.6
Ischemia / vascular deficiency	9	3	\$391,667	6.7
Subtotal	132	58	\$382,987	7.2
Allegations Related to Medical & Biological Agents (Excluding Medication)				
Overdose of radiation during therapy	81	67	\$362,791	5.8
Allergic reaction to medical materials,	26	10	\$62,419	4.0
Wrong dosage of medical agent	6	2	\$683,354	4.0
Dosage failure in electroshock therapy	5	3	\$543,167	4.8
Wrong fluid used in transfusion	5	5	\$287,000	4.8
Failure of sterile precautions	4	2	\$25,500	2.8
Incorrect dilution of fluid	3	2	\$47,500	4.0
Contaminated substance taken or injected	3			5.3
Excessive amount of fluid	2	1	\$230,000	6.5
Inadvertent exposure to radiation	2	2	\$42,500	6.5
Subtotal	137	94	\$317,270	5.2
Problems With Equipment and Devices				
Injury from improper operation of equipment	31	20	\$79,941	4.9
Improper placement of therapeutic device	25	13	\$153,390	4.3
Injury from equipment malfunction	18	11	\$203,909	5.7
Feeding tube improperly placed or maintained	13	5	\$1,875,000	7.5
Improper placement of prosthetic device	8	2	\$47,500	3.4
Incorrect prosthetic device, or wrong size	3	2	\$6,000	2.7

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Incorrect therapeutic device, or wrong size	4	1	\$43,500	3.0
Defective implant	1			5.0
Subtotal	103	54	\$284,470	5.0
Physical Injuries Resulting from Procedure				
Injury during physical therapy	212	97	\$105,075	3.7
Cut, puncture, tear during injection	132	58	\$230,970	4.4
Cut, puncture, tear during endoscopic exam	109	38	\$290,810	5.1
Cut, puncture, tear during other medical	74	45	\$58,203	3.6
Cut, puncture, tear during other	56	22	\$190,481	4.6
Other injury incidental to medical procedure	39	18	\$51,014	3.7
Inappropriate temperature in local application	26	20	\$30,413	3.5
Other respiratory distress	16	9	\$523,611	8.1
Injury from patient positioning	12	1	\$150,000	3.7
Injection into wrong body part	8	4	\$227,500	5.8
Extravasation from injection	6	4	\$63,802	3.0
Injury during intubation	5	3	\$94,333	3.8
Subtotal	695	319	\$154,502	4.2
Infections and Related				
Pressure ulcers during care	328	198	\$187,626	7.3
Other infection contracted during care	185	73	\$242,280	6.6
Development of septic condition during care	32	15	\$562,239	7.6
Development of gangrene or other necrotizing	22	10	\$311,065	5.7
Staph infection contracted during care	17	2	\$30,000	3.8
Subtotal	584	298	\$222,955	
Retention of Foreign Object				
During other / nonspecified medical	15	8	\$74,670	3.1
Injection	3			3.0
Endoscopic exam	1	1	\$35,000	3.0
During other catheterization	1			3.0
Subtotal	20	9	\$70,262	
Delays and Other Omissions				
Nonadministration of necessary care	172	76	\$301,399	6.4
Failure to stabilize prior to transfer /	33	17	\$365,416	7.5
Failure to timely / properly intubate	26	19	\$529,632	8.3
Delay in Emergency Department	24	10	\$604,132	5.8
Other Delay	16	6	\$381,970	6.4
Failure in follow-up care	14	4	\$356,250	6.2
Failure to monitor	14	9	\$396,266	7.4

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Failure to make timely or appropriate referral	12	6	\$299,167	6.0
Delay in transport	9	4	\$402,069	7.3
Delay in scheduling surgery	8	5	\$317,922	8.1
Nonadministration of necessary drug	6	2	\$162,500	7.7
Failure to communicate with patient	4	1	\$50,000	7.3
Physician delay or failure to respond to call	3	2	\$154,250	9.0
Subtotal	341	161	\$361,381	6.8
Misc. Complications of Non-Surgical Treatment				
Treatment lacked salutary effect	123	41	\$193,768	5.6
Misset fracture or non-union	54	24	\$103,040	4.2
Injury from aspiration	29	13	\$330,794	7.7
Other failure to effectively treat	29	13	\$161,236	6.6
Failure to ensure proper nutrition or hydration	20	9	\$649,963	7.9
Unnecessary procedure	17	5	\$42,300	3.4
Failed resuscitation	14	8	\$414,875	8.8
Did not consent to procedure	9	3	\$6,667	2.1
Not applicable, no allegation of medical injury	9	5	\$57,650	1.6
Failure to identify or treat compartment	8	6	\$202,850	4.9
Sutures, staples, etc improperly placed	6	1	\$5,000	3.2
Procedure performed on wrong body part	5	3	\$678,333	3.6
Procedure performed on wrong patient	5	4	\$85,000	4.2
Inappropriate handling of transplantable	4	1	\$20,000	1.0
Aborted procedure	4	1	\$12,500	3.0
Performance of inappropriate procedure	3	2	\$67,000	4.3
Pathology specimen lost	3	3	\$7,500	1.7
Failure to warn of risks of procedure	2			2.5
Failed sterilization	2			1.5
Improper phone of other remote instructions	2	2	\$150,000	6.0
Premature extubation	2	1	\$175,000	6.5
Development of fistula	1	1	\$123,000	6.0
Excess blood loss	1	1	\$225,000	6.0
Subtotal	352	147	\$211,642	5.3
Unknown	219	71	\$289,599	5.3
Patient Safety / Breach of Ethical or Regulatory Standard				
Fall while under care or on premises	906	548	\$129,531	5.6
Civil rights originating among incarcerated	382	33	\$320,929	3.3
Injury during transporting or repositioning	156	100	\$98,463	4.1
Other injury unrelated to medical treatment	110	78	\$116,276	5.0

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Breach of patient confidentiality	102	53	\$63,345	1.1
Other legal or ethical misconduct	88	26	\$112,661	1.3
All acts of self-harm	74	38	\$272,935	8.4
Sexual misconduct	56	24	\$102,344	1.3
Harmed by 3rd party	54	30	\$100,995	4.4
Assault & battery	30	16	\$139,656	2.6
Failure to warn of health hazard	28	2	\$8,750	5.7
False imprisonment	26	6	\$17,821	1.3
Breach of specific regulation	20	5	\$296,990	1.8
Refusal to treat / indifference	18	1	\$760,000	4.1
Injury from aspiration	15	7	\$507,857	8.1
Insurance coverage or monetary dispute	14	2	\$224,116	1.2
Elopement from facility	14	12	\$366,513	6.6
Not applicable, no allegation of medical injury	11	2	\$11,500	1.3
Patient abandonment	6	1	\$153,255	2.8
Patient harmed third party	6	2	\$1,260,000	3.8
Abuse / neglect	6	2	\$181,250	6.3
Injury while restraining patient or by security	6	3	\$103,352	4.2
Religious issues	3	2	\$31,250	2.3
Wrongful life / birth	3	1	\$45,000	1.0
Did not consent to procedure	3	1	\$9,000	1.0
Other respiratory distress	3	2	\$181,666	9.0
Failure to ensure proper nutrition or hydration	3	1	\$2,500	7.3
EMTALA violation	2	1	\$2,000	2.0
Practitioner with communicable disease	1			3.0
Not applicable, no allegation of medical injury	1			1.0
Subtotal	2,147	999	\$139,632	4.4
Unknown	5	2	\$312,500	4.4

Unknown Category of Error				
Hypoxia	1			6.0
Stroke	1			5.0
Inappropriate temperature in local application	1			3.0
Injury from aspiration	1			3.0
Other infection contracted during care	1	1	\$425,000	5.0
Development of septic condition during care	1			9.0
Failed resuscitation	1			9.0
Unknown	411	115	\$181,858	4.7

Medical Outcomes 2004-2017				
Medical Outcome	Occurrences	Occurrences With Payment	Average Payment	Average Injury Severity (1-9)
Emotion injury, pain				
Emotional distress	598	199	\$90,371	1.1
Physical pain, little loss of function	224	80	\$38,647	2.5
Injury primarily psychological	16	7	\$103,450	2.1
Subtotal	838	286	\$76,223	1.5
Tissue / Musculoskeletal Injuries and Amputations				
Skin - burns, lacerations, etc	562	307	\$59,776	3.3
Soft tissue injury	45	20	\$81,837	3.3
Fracture from error	570	322	\$83,814	4.7
Skeletal problem from error	305	113	\$81,011	3.4
Fracture complicated by error	219	67	\$84,497	4.2
Skeletal problem complicated by error	275	62	\$173,044	3.7
Partial loss of function of limb	62	32	\$338,859	5.2
Full loss of function of limb	24	15	\$407,700	5.9
Amputation of fingers/toes	67	31	\$136,956	5.1
Amputation of hands/feet	35	14	\$511,372	5.7
Amputation of one limb	164	90	\$517,974	6.1
Amputation of two or more limbs	14	7	\$559,769	7.1
Amputation of other body part	195	90	\$541,814	7.2
Disfigurement / cosmetic	49	21	\$149,377	4.0
Other morphology problem	422	154	\$194,167	4.4
Subtotal	3,008	1345	\$173,399	4.4
Neurological injury / nervous system impairment				
Cut, perforation, or tear of nerve	42	22	\$266,625	5.3
Other damage to nerve	668	282	\$286,801	5.7
other cognitive or neurological deficit	573	303	\$1,175,156	6.3
Other nervous system impairment	6	2	\$175,000	5.0
ERBS palsy	25	13	\$430,962	6.0
Cauda equine syndrome	17	10	\$588,252	5.9
Brachial plexus disorders	74	43	\$472,002	5.8
Cerebral palsy	62	47	\$1,910,805	7.6
Monoplegia - lower limb	3	1	\$30,000	6.0
Hemiplegia	21	11	\$1,127,273	6.8
Paraplegia	120	76	\$1,506,517	7.0
Quadriplegia	46	32	\$1,964,122	8.0
Subtotal	1,657	842	\$896,119	6.1
Cardiovascular Injuries				
Damage to veins or arteries	23	8	\$138,773	4.3

Allegations by Category of Error 2004-2017					
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)	
Internal bleeding	154	51	\$335,051	4.1	
Embolism/thrombosis	62	19	\$98,500	4.0	
Ruptured aneurism	4	1	\$1,375	5.3	
Stroke	134	69	\$681,362	6.8	
Myocardial infarction	62	23	\$325,600	4.8	
Other ischemic or anoxic event	2	1	\$5,000	4.5	
Subtotal	441	172	\$433,595	5.0	
Contraction or progression of various conditions					
Contraction - staph infection	57	13	\$64,277	3.6	
Progression- staph infection	11	4	\$62,750	3.8	
Contraction - meningitis	13	2	\$840,000	4.9	
Progression - meningitis	13	8	\$1,866,000	6.2	
Contraction - encephalitis	1			4.0	
Progression - encephalitis	2	1	\$1,025,000	6.5	
Contraction - peritonitis	16	9	\$275,611	4.7	
Contraction - hepatitis	5	1	\$50,000	4.4	
Progression - hepatitis	11			2.0	
Progression - cancer	391	182	\$413,100	6.4	
Contraction - sepsis	62	33	\$566,415	9.2	
Progression - sepsis	4	3	\$366,498	5.0	
Contraction - gangrene / necrotizing condition	32	19	\$312,114	4.7	
Progression - gangrene / necrotizing condition	1			4.0	
Contraction - other infection	517	184	\$184,436	4.5	
Progression - other infection	75	19	\$132,812	3.4	
Progression - non-infectious condition	85	21	\$117,486	3.3	
Subtotal	1,296	499	\$322,811	5.1	
Damage to internal organs					
Cut, perforation, tear to internal organ	521	218	\$298,257	4.4	
Leakage from internal organ	48	26	\$169,781	4.0	
Temp - partial loss of organ	91	27	\$115,897	3.5	
Temp - full loss of organ	20	9	\$157,167	4.0	
Perm - partial loss of organ	289	91	\$668,625	5.3	
Perm - full loss of organ	29	18	\$702,326	9.4	
Subtotal	931	358	\$353,996	4.7	
Impairment of vision or hearing					
Partial - loss of vision	175	73	\$258,150	5.3	
Full - loss of vision	45	25	\$761,026	6.6	

Allegations by Category of Error 2004-2017				
Allegation	Claimants	Claimants With Payment	Average Payment	Average Injury Severity (1-9)
Partial - loss of hearing	39	16	\$214,594	5.0
Full - loss of hearing	2	2	\$1,037,500	6.0
Subtotal	261	116	\$373,958	5.5
Nutritional issues				
Malnutrition / dehydration	4	3	\$31,467	2.8
Subtotal	4	3	\$31,467	2.8
Miscellaneous				
Partial loss of mobility	8	2	\$187,500	5.1
Respiratory distress	78	34	\$156,537	3.8
Accidental / unnecessary sterilization	14	3	\$236,250	5.5
Coma	10	5	\$930,000	5.7
Injury primarily psychological	16	7	\$103,450	2.1
Legal or ethical issue	7	3	\$13,833	2.1
Unnecessary surgery - no complications	81	27	\$172,825	4.0
Unnecessary surgery - complications	13	2	\$87,500	4.0
Additional surgery necessary	870	389	\$142,637	4.3
Wrong site surgery	1	1	\$1,000,000	5.0
Unknown	2,000	730	\$133,227	3.3
Subtotal	3,098	1,203	\$141,650	3.6
Death	3,456	1,960	\$310,059	9.0

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Surgery Related				
Emotional distress	1	1	\$150,000	1.0
Fracture from error	1	1	\$50,000	4.0
Progression - cancer	1			5.0
Unknown	2	1	\$5,831	2.0
Subtotal	5	3	\$68,610	2.8
Emotional distress	30	8	\$56,375	1.2
Physical pain, little loss of function	23	6	\$40,143	2.9
Skin - burns, lacerations, etc	165	89	\$47,534	3.4
Soft tissue injury	12	6	\$95,382	3.7
Fracture from error	22	9	\$102,010	3.7
Skeletal problem from error	32	12	\$155,897	4.4
Fracture complicated by error	31	12	\$77,691	4.0
Skeletal problem complicated by error	115	27	\$207,869	4.1
Partial loss of function of limb	39	20	\$390,049	5.4
Full loss of function of limb	16	11	\$511,409	5.8
Amputation of fingers/toes	16	7	\$183,320	5.2
Amputation of hands/feet	4	3	\$278,333	6.0
Amputation of one limb	56	29	\$538,978	6.0
Amputation of two or more limbs	2	2	\$585,000	7.0
Amputation of other body part	79	40	\$417,299	5.5
Disfigurement / cosmetic	44	19	\$152,601	4.0
Other morphology problem	289	108	\$173,196	4.5
Cut, perforation, or tear of nerve	30	17	\$282,824	5.4
Other damage to nerve	372	156	\$341,166	5.8
Cauda equine syndrome	9	5	\$623,494	5.8
Brachial plexus disorders	5	3	\$170,000	4.8
Monoplegia - lower limb	3	1	\$30,000	6.0
Hemiplegia	8	5	\$1,605,000	6.9
Paraplegia	52	34	\$1,473,393	6.9
Quadriplegia	12	9	\$2,216,322	8.0
other cognitive or neurological deficit	99	43	\$1,316,583	6.3
Damage to veins or arteries	15	5	\$175,637	4.7
Internal bleeding	57	15	\$303,920	4.1
Embolism/thrombosis	17	6	\$208,846	4.5
Ruptured aneurism	2	1	\$1,375	4.5

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Stroke	25	9	\$521,612	6.0
Myocardial infarction	10	3	\$325,000	5.0
Contraction - staph infection	31	8	\$52,762	3.6
Contraction - meningitis	7	1	\$1,600,000	5.1
Contraction - encephalitis	1			4.0
Contraction - peritonitis	12	6	\$234,250	4.3
Contraction - hepatitis	2	1	\$50,000	5.0
Progression - cancer	31	23	\$211,564	5.2
Contraction - sepsis	32	14	\$595,455	4.3
Contraction - gangrene / necrotizing condition	13	6	\$330,417	5.1
Contraction - other infection	271	79	\$229,770	3.9
Progression - non-infectious condition	4			5.0
Cut, perforation, tear to internal organ	320	149	\$331,269	4.5
Leakage from internal organ	19	8	\$257,500	3.8
Temp - partial loss of organ	29	6	\$142,871	3.7
Temp - full loss of organ	6	1	\$17,500	4.3
Perm - partial loss of organ	104	41	\$450,499	5.4
Perm - full loss of organ	11	7	\$818,143	14.8
Partial loss of mobility	4	1	\$200,000	4.8
Partial - loss of vision	98	40	\$240,521	5.2
Full - loss of vision	17	8	\$659,773	6.7
Partial - loss of hearing	10	6	\$172,917	5.1
Full - loss of hearing	1	1	\$225,000	6.0
Respiratory distress	9	3	\$31,500	4.0
Accidental / unnecessary sterilization	10	2	\$132,500	5.6
Coma	1	1	\$225,000	4.0
Unnecessary surgery - no complications	65	19	\$91,858	3.9
Unnecessary surgery - complications	10	2	\$87,500	3.8
Additional surgery necessary	704	319	\$149,110	4.4
Wrong site surgery	1	1	\$1,000,000	5.0
Unknown	336	116	\$203,687	3.8
Death	664	386	\$363,173	9.0
Subtotal	4,514	1,975	\$323,102	5.3
Anesthesia Related Allegations				
Emotional distress	8	4	\$19,382	1.0
Physical pain, little loss of function	13	4	\$56,201	2.1
Skin - burns, lacerations, etc.	3	1	\$3,048	3.0
Fracture from error	21	7	\$1,481	2.9

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Skeletal problem from error	52	10	\$16,948	2.4
Fracture complicated by error	19	5	\$97,059	2.5
Skeletal problem complicated by error	4			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	11	1	\$600,000	5.0
other cognitive or neurological deficit	30	18	\$1,118,215	6.6
Stroke	1			7.0
Myocardial infarction	1			3.0
Contraction - other infection	2			3.5
Cut, perforation, tear to internal organ	20	5	\$100,360	4.0
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
Full - loss of vision	1	1	\$1,667,000	6.0
Partial - loss of hearing	1			3.0
Respiratory distress	9	3	\$20,000	3.4
Injury primarily psychological	1	1	\$110,000	4.0
Additional surgery necessary	4	3	\$70,310	3.5
Unknown	11	3	\$18,333	3.4
Death	49	34	\$393,453	9.0
Subtotal	270	105	\$373,095	4.5
Medication Related Allegation				
Emotional distress	66	24	\$256,478	1.4
Physical pain, little loss of function	65	36	\$56,968	2.5
Skin - burns, lacerations, etc	21	10	\$72,363	3.4
Soft tissue injury	1			3.0
Fracture from error	6	3	\$105,833	3.5
Skeletal problem from error	13	4	\$119,564	3.9
Fracture complicated by error	3	2	\$868,750	5.0
Skeletal problem complicated by error	2	1	\$25,000	3.5
Amputation of fingers/toes	2			5.0
Amputation of hands/feet	2	1	\$55,000	6.0
Amputation of one limb	2	2	\$405,000	6.5
Amputation of other body part	4	3	\$983,333	6.0
Disfigurement / cosmetic	1			4.0
Other morphology problem	4			3.8

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Other damage to nerve	7	1	\$197,500	4.7
Cauda equine syndrome	1	1	\$85,000	7.0
Hemiplegia	1	1	\$1,250,000	7.0
Paraplegia	5	2	\$692,233	7.0
Quadriplegia	1	1	\$875,000	8.0
other cognitive or neurological deficit	58	33	\$502,844	5.3
Other nervous system impairment	2	1	\$100,000	5.0
Damage to veins or arteries	2	1	\$27,000	4.5
Internal bleeding	17	9	\$244,461	3.9
Embolism/thrombosis	2	1	\$50,000	4.5
Stroke	16	5	\$290,000	6.1
Myocardial infarction	13	4	\$92,202	4.6
Other ischemic or anoxic event	1	1	\$5,000	4.0
Progression - cancer	3			5.7
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
Cut, perforation, tear to internal organ	17	3	\$296,667	4.9
Temp - partial loss of organ	19	8	\$124,620	3.4
Temp - full loss of organ	7	4	\$144,875	3.9
Perm - partial loss of organ	78	9	\$182,778	5.0
Perm - full loss of organ	5	2	\$1,246,473	6.4
Partial loss of mobility	2	1	\$175,000	5.5
Partial - loss of vision	15	5	\$194,630	5.1
Full - loss of vision	3	1	\$1,804,000	6.7
Partial - loss of hearing	7	4	\$478,625	5.1
Respiratory distress	31	15	\$129,244	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	2			4.0
Unknown	484	229	\$70,835	3.2
Death	269	136	\$267,077	9.0
Subtotal	1,274	574	\$186,726	4.7
Diagnosis Related Allegations				
Emotional distress	30	10	\$22,686	1.1
Physical pain, little loss of function	21	2	\$55,000	2.9

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Skin - burns, lacerations, etc	6	1	\$34,000	4.0
Soft tissue injury	1	1	\$30,000	3.0
Fracture from error	4	1	\$32,500	3.3
Skeletal problem from error	49	12	\$186,875	3.7
Fracture complicated by error	85	24	\$46,991	3.5
Skeletal problem complicated by error	46	10	\$150,174	4.0
Partial loss of function of limb	14	8	\$258,125	5.1
Full loss of function of limb	2			5.5
Amputation of fingers/toes	6	4	\$76,875	5.0
Amputation of hands/feet	10	3	\$176,667	5.6
Amputation of one limb	44	29	\$613,045	6.1
Amputation of two or more limbs	3	2	\$350,000	7.0
Amputation of other body part	75	36	\$734,238	9.6
Disfigurement / cosmetic	2	1	\$200,000	4.0
Other morphology problem	61	17	\$405,218	4.2
Cut, perforation, or tear of nerve	1			5.0
Other damage to nerve	45	20	\$434,875	5.0
Cauda equine syndrome	4	3	\$835,015	6.5
Cerebral palsy	1			7.0
Hemiplegia	6	3	\$141,667	6.8
Paraplegia	41	24	\$1,799,101	6.9
Quadriplegia	12	8	\$2,279,375	8.0
other cognitive or neurological deficit	123	56	\$945,859	6.2
Other nervous system impairment	1			6.0
Damage to veins or arteries	1			3.0
Internal bleeding	23	6	\$288,333	4.4
Embolism/thrombosis	13	1	\$750	4.0
Ruptured aneurism	1			7.0
Stroke	62	34	\$813,714	7.8
Myocardial infarction	25	14	\$376,071	5.1
Contraction - staph infection	1			4.0
Progression- staph infection	7	3	\$75,333	3.9
Progression - meningitis	13	8	\$1,866,000	6.2
Progression - encephalitis	2	1	\$1,025,000	6.5
Contraction - peritonitis	3	3	\$358,333	5.3
Progression - cancer	340	153	\$454,008	6.6
Contraction - sepsis	11	8	\$366,563	3.9
Progression - sepsis	4	3	\$366,498	5.0
Contraction - gangrene / necrotizing condition	1			3.0

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Progression - gangrene / necrotizing condition	1			4.0
Contraction - other infection	12	2	\$590,000	3.8
Progression - other infection	39	10	\$191,575	4.0
Progression - non-infectious condition	45	15	\$124,799	3.6
Cut, perforation, tear to internal organ	38	18	\$140,947	4.0
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	57	25	\$1,145,038	5.3
Perm - full loss of organ	9	7	\$517,418	6.1
Partial - loss of vision	30	14	\$344,007	5.8
Full - loss of vision	16	12	\$673,585	6.8
Partial - loss of hearing	8	2	\$97,500	5.0
Full - loss of hearing	1	1	\$1,850,000	6.0
Respiratory distress	7	3	\$151,111	4.6
Accidental / unnecessary sterilization	1	1	\$443,750	6.0
Coma	1			6.0
Injury primarily psychological	1			1.0
Legal or ethical issue	1	1	\$35,000	1.0
Unnecessary surgery - no complications	13	6	\$178,495	4.0
Unnecessary surgery - complications	3			4.7
Additional surgery necessary	39	13	\$105,962	4.0
Unknown	120	34	\$260,836	3.7
Death	893	508	\$366,733	9.0
Subtotal	2,583	1,203	\$472,309	6.6
Non-Surgical Treatment Allegations				
Emotional distress	66	18	\$21,542	1.1
Physical pain, little loss of function	43	16	\$12,513	2.5
Skin - burns, lacerations, etc	234	125	\$68,168	3.3
Soft tissue injury	16	4	\$138,000	3.4
Fracture from error	62	26	\$25,991	3.4
Skeletal problem from error	67	23	\$90,918	3.6
Fracture complicated by error	42	6	\$20,009	7.5
Skeletal problem complicated by error	61	15	\$162,998	3.4
Partial loss of function of limb	7	2	\$96,250	4.3
Full loss of function of limb	4	3	\$130,000	6.3
Amputation of fingers/toes	34	16	\$141,483	5.1
Amputation of hands/feet	15	4	\$101,053	5.7

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Amputation of one limb	53	25	\$351,160	6.1
Amputation of two or more limbs	6	1	\$750,000	7.2
Amputation of other body part	13	8	\$265,688	6.0
Disfigurement / cosmetic	2	1	\$37,500	3.5
Other morphology problem	58	26	\$149,875	4.4
Cut,perforation, or tear of nerve	8	3	\$168,333	4.8
Other damage to nerve	129	55	\$192,911	4.4
Cauda equine syndrome	2			5.5
Brachial plexus disorders	2	1	\$10,000	3.0
Hemiplegia	5	1	\$200,000	6.6
Paraplegia	14	11	\$1,112,460	7.0
Quadriplegia	2	2	\$1,150,000	8.0
other cognitive or neurological deficit	59	44	\$1,316,814	5.9
Damage to veins or arteries	3	1	\$165,000	3.7
Internal bleeding	25	6	\$158,208	3.8
Embolism/thrombosis	18	7	\$51,797	3.8
Ruptured aneurism	1			5.0
Stroke	27	19	\$680,430	5.9
Myocardial infarction	10	2	\$440,000	4.1
Other ischemic or anoxic event	1			5.0
Contraction - staph infection	17	2	\$121,250	3.5
Progression- staph infection	2	1	\$25,000	2.5
Contraction - meningitis	3	1	\$80,000	4.7
Contraction - peritonitis	1			7.0
Contraction - hepatitis	3			4.0
Progression - hepatitis	11			2.0
Progression - cancer	15	6	\$142,495	5.2
Contraction - sepsis	17	10	\$733,783	22.5
Contraction - gangrene / necrotizing condition	8	6	\$208,333	4.4
Contraction - other infection	204	91	\$152,127	5.4
Progression - other infection	25	6	\$77,054	2.9
Progression - non-infectious condition	21	4	\$97,273	2.7
Cut, perforation, tear to internal organ	100	33	\$261,552	4.1
Leakage from internal organ	2	1	\$275,000	5.0
Temp - partial loss of organ	19	7	\$71,898	3.4
Temp - full loss of organ	2			3.5
Perm - partial loss of organ	23	10	\$1,035,077	5.5
Perm - full loss of organ	3	2	\$400,000	5.3
	1	1	\$350,000	3.0

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Malnutrition / dehydration	4	3	\$31,467	2.8
Partial loss of mobility	2			5.5
Partial - loss of vision	22	8	\$315,925	5.4
Full - loss of vision	7	3	\$731,144	6.3
Partial - loss of hearing	11	5	\$96,300	4.7
Respiratory distress	15	7	\$329,036	3.7
Coma	4	1	\$1,862,500	6.8
Injury primarily psychological	1			1.0
Legal or ethical issue	1			3.0
Unnecessary surgery - no complications	3	2	\$925,000	4.3
Additional surgery necessary	66	25	\$110,787	3.7
Unknown	392	128	\$116,651	3.2
Death	767	429	\$268,419	9.0
Subtotal	2,862	1,264	\$255,137	5.5
IV & Blood Products				
Emotional distress	1	1	\$15,000	1.0
Physical pain, little loss of function	3	2	\$8,250	3.3
Skin - burns, lacerations, etc	28	15	\$74,479	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
Fracture complicated by error	1			3.0
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	\$300,000	5.0
Amputation of hands/feet	3	2	\$2,575,000	6.0
Amputation of one limb	1	1	\$1,100,000	6.0
Amputation of two or more limbs	1			7.0
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	2	1	\$50,000	5.5
Other damage to nerve	79	39	\$137,635	8.0
Paraplegia	1			7.0
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
Embolism/thrombosis	10	4	\$51,275	3.6

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
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
Perm - partial loss of organ	2	1	\$150,000	6.0
Respiratory distress	1	1	\$140,000	3.0
Additional surgery necessary	11	7	\$51,643	3.9
Unknown	28	17	\$106,165	3.7
Death	14	7	\$354,571	9.0
Subtotal	226	125	\$177,849	5.7
Pregnancy & Childbirth				
Emotional distress	12	4	\$45,000	1.0
Physical pain, little loss of function	14	3	\$17,833	2.8
Skin - burns, lacerations, etc	16	8	\$51,756	3.3
Fracture from error	2			3.0
Skeletal problem from error	1			1.0
Fracture complicated by error	1			3.0
Amputation of fingers/toes	1	1	\$55,000	5.0
Amputation of other body part	7	1	\$10,000	4.9
Other morphology problem	5	3	\$153,333	5.8
Other damage to nerve	20	6	\$212,167	5.0
ERBS palsy	25	13	\$430,962	6.0
Cauda equine syndrome	1	1	\$175,000	5.0
Brachial plexus disorders	66	39	\$507,079	5.9
Cerebral palsy	61	47	\$1,910,805	7.6
Hemiplegia	1	1	\$2,500,000	7.0
Paraplegia	7	6	\$1,608,333	7.1
Quadriplegia	18	11	\$1,772,273	8.0
other cognitive or neurological deficit	189	100	\$1,446,597	6.8
Other nervous system impairment	3	1	\$250,000	4.7
Internal bleeding	4			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	3	1	\$1,850,000	4.7
Contraction - other infection	14	3	\$19,033	3.4
Cut, perforation, tear to internal organ	23	10	\$310,100	4.4

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Leakage from internal organ	1	1	\$18,000	5.0
Temp - partial loss of organ	2	1	\$85,000	3.5
Temp - full loss of organ	1	1	\$220,000	4.0
Perm - partial loss of organ	6	2	\$75,000	5.8
Perm - full loss of organ	2			6.0
Partial - loss of vision	4	1	\$155,000	5.5
Full - loss of vision	1			6.0
Respiratory distress	1			4.0
Accidental / unnecessary sterilization	3			5.0
Death for cause NOC	13	8	\$100,250	11.3
Injury primarily psychological	1	1	\$20,400	4.0
Additional surgery necessary	38	17	\$159,130	3.8
Unknown	54	15	\$365,336	4.8
Death	244	135	\$356,495	9.0
Subtotal	874	443	\$806,585	6.7
Patient Safety / Ethics or Legal Transgression				

Emotional distress	384	129	\$80,157	1.1
Physical pain, little loss of function	42	11	\$17,729	2.2
Skin - burns, lacerations, etc	87	57	\$57,768	3.0
Soft tissue injury	13	7	\$55,500	2.8
Fracture from error	449	275	\$90,851	5.1
Skeletal problem from error	83	48	\$45,920	3.1
Fracture complicated by error	37	18	\$69,910	3.1
Skeletal problem complicated by error	47	9	\$127,172	3.0
Partial loss of function of limb	1	1	\$650,000	6.0
Amputation of fingers/toes	7	2	\$18,078	5.3
Amputation of hands/feet	1	1	\$185,000	6.0
Amputation of one limb	7	3	\$798,333	6.0
Amputation of two or more limbs	1	1	\$608,384	7.0
Amputation of other body part	14			7.0
Other morphology problem	5			3.6
Other damage to nerve	2	1	\$10,000	4.5
Brachial plexus disorders	1			4.0
Paraplegia	1			7.0
other cognitive or neurological deficit	10	7	\$838,571	6.1
Internal bleeding	27	15	\$509,958	4.4
Embolism/thrombosis	1			3.0
Stroke	2	2	\$137,500	6.0

Injury / Outcome by Allegation Category, 2004-2017				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Myocardial infarction	3			5.0
Contraction - staph infection	1			3.0
Progression - cancer	1			8.0
Contraction - sepsis	1			5.0
Contraction - other infection	4	1	\$10,000	2.3
Progression - other infection	8			2.4
Progression - non-infectious condition	14	1	\$201,128	2.6
Cut, perforation, tear to internal organ	3			3.0
Temp - partial loss of organ	2	1	\$30,000	3.5
Perm - partial loss of organ	13	1	\$502,658	5.0
Partial - loss of vision	4	3	\$184,167	4.5
Partial - loss of hearing	1			5.0
Respiratory distress	4	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	6	5	\$99,000	3.5
Unknown	274	104	\$79,319	3.0
Death	416	275	\$208,659	9.0
Subtotal	1,994	988	\$133,976	4.5
Unknown Cause				
Skin - burns, lacerations, etc	3	1	\$15,000	3.7
Fracture from error	2			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
Stroke	1			
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	286	73	\$198,882	2.9
Death	130	45	\$192,815	9.0
Subtotal	439	128	\$205,182	4.8

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
2017 Financial Data for Missouri**

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	23.8%	\$26,314,239	\$25,840,140	\$3,862,799	\$20,430,000	\$21,578,416	83.5%
0031	11843	Medical Protective Company	12.4%	\$13,754,429	\$11,025,623	\$3,532,366	\$4,360,746	\$13,918,046	126.2%
0861	10686	Medical Liability Alliance	9.5%	\$10,535,256	\$10,247,128	\$1,493,341	\$2,790,000	\$4,430,901	43.2%
1282	33200	Norcal Mutual Insurance Company	8.7%	\$9,587,391	\$9,584,178	\$3,337,734	\$2,013,500	\$16,103,374	168.0%
2698	33391	Proassurance Indemnity Company	7.7%	\$8,485,533	\$8,545,901	\$1,985,549	\$2,924,650	\$2,952,728	34.6%
0831	34495	Doctors Company An Interins	7.2%	\$7,992,515	\$8,073,911	\$1,230,145	\$4,529,478	\$7,284,129	90.2%
4782	11582	Missouri Professionals Mutual-	6.7%	\$7,383,269	\$8,726,991	\$3,912,104	\$4,264,557	\$1,591,135	18.2%
0000	11964	Missouri Doctors Mutual Insurance	3.1%	\$3,456,568	\$3,487,566	\$893,356	\$1,508,689	\$856,202	24.6%
4790	16942	MMIC Insurance Inc	2.5%	\$2,803,899	\$2,863,506	\$378,574	\$125,000	(\$175,007)	-6.1%
0218	20427	American Casualty Company Of	2.2%	\$2,436,026	\$2,504,999	\$248,831	\$420,177	\$757,797	30.3%
0000	13073	Keystone Mutual Insurance	2.2%	\$2,422,026	\$2,184,214	\$730,308	\$270,000	\$255,524	11.7%
0000	35904	Health Care Indemnity Inc	1.9%	\$2,139,667	\$2,139,667	(\$197,443)	\$0	\$4,194,911	196.1%
1282	44083	Preferred Physicians Medical Risk	1.6%	\$1,745,888	\$1,742,086	\$885,572	\$0	\$625,286	35.9%
2638	15865	NCMIC Insurance Company	1.6%	\$1,717,189	\$1,713,709	\$470,144	\$459,500	\$804,578	46.9%
0000	13714	Pharmacists Mutual Insurance	1.2%	\$1,315,950	\$1,371,372	\$139,930	\$27,687	\$298,177	21.7%
0000	13194	Physicians Insurance Mutual	0.9%	\$1,010,145	\$947,199	\$266,748	\$475,000	\$550,000	58.1%
0111	19917	Liberty Insurance Underwriters Inc	0.8%	\$880,826	\$888,316	\$444,551	\$0	(\$41,804)	-4.7%
0000	19348	Capson Physicians Insurance	0.8%	\$870,217	\$916,495	\$161,458	\$332,500	(\$726,852)	-79.3%
2638	11127	Professional Solutions Insurance	0.6%	\$645,569	\$670,090	\$97,043	\$520,000	(\$138,374)	-20.7%
0501	35157	Fair American Insurance And	0.5%	\$593,811	\$632,518	\$71,560	\$0	\$30,356	4.8%
0218	20443	Continental Casualty Company	0.5%	\$556,777	\$554,386	\$114,207	\$164,347	(\$283,020)	-51.1%
0626	22667	Ace American Insurance Company	0.5%	\$508,114	\$1,167,158	\$239,809	\$480,000	\$780,657	66.9%
1154	36234	Preferred Professional Insurance	0.4%	\$438,725	\$416,119	\$315,963	\$0	\$790,738	190.0%
4837	34703	Kansas Medical Mutual Insurance	0.4%	\$426,369	\$426,369	\$337,806	\$350,000	\$41,125	9.6%

**All Medical Malpractice
2017 Financial Data for Missouri**

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
0244	10677	Cincinnati Insurance Company The	0.4%	\$417,361	\$369,415	\$71,123	\$350,000	(\$32,109)	-8.7%
2698	14460	Podiatry Insurance Company Of	0.3%	\$364,518	\$425,570	\$883	\$80,000	(\$14,434)	-3.4%
0158	22730	Allied World Insurance Company	0.3%	\$284,382	\$291,411	\$66,184	\$0	\$60,533	20.8%
0012	19445	National Union Fire Insurance	0.2%	\$255,966	\$292,246	(\$274,545)	\$2,500	(\$2,842,685)	-972.7%
4851	18767	Church Mutual Insurance Company	0.2%	\$183,935	\$158,149	(\$10,124)	\$0	(\$36,182)	-22.9%
4782	13816	Physicians Standard Insurance	0.1%	\$150,636	\$159,302	\$448,925	\$50,000	\$55,000	34.5%
0000	13793	Medmal Direct Insurance Company	0.1%	\$116,547	\$111,069	\$0	\$0	\$5	0.0%
0031	22276	Berkshire Hathaway Specialty	0.1%	\$110,324	\$58,906	\$13,874	\$0	\$31,660	53.7%
0098	25224	Great Divide Insurance Company	0.1%	\$109,787	\$99,867	(\$12,145)	\$0	\$39,675	39.7%
0361	19720	American Alternative Insurance	0.1%	\$85,744	\$93,961	\$4,866	\$0	\$9,915	10.6%
0218	35289	Continental Insurance Company	0.1%	\$83,526	\$41,040	\$1,820	\$0	\$19,165	46.7%
2698	10222	Paco Assurance Company Inc	0.1%	\$77,759	\$81,405	\$20,454	\$103,677	\$55,191	67.8%
0000	12843	Doctors Direct Insurance Inc	0.1%	\$63,323	\$36,640	\$10,067	\$0	\$16,164	44.1%
0012	19380	American Home Assurance	0.1%	\$62,363	\$63,817	\$110	\$0	(\$55,360)	-86.7%
0508	10801	Fortress Insurance Company	0.1%	\$60,484	\$89,029	\$34,422	\$0	\$17,417	19.6%
0176	25143	State Farm Fire And Casualty	0.0%	\$42,121	\$44,081	(\$2,129)	\$0	(\$2,137)	-4.8%
4698	43460	Aspen American Insurance	0.0%	\$21,771	\$2,143	\$0	\$0	\$15,031	701.4%
0244	23280	Cincinnati Indemnity Company Inc	0.0%	\$21,331	\$25,723	\$2,041	\$0	(\$1,319)	-5.1%
0244	28665	Cincinnati Casualty Company The	0.0%	\$14,674	\$9,361	\$1,746	\$0	\$1,113	11.9%
0012	23809	Granite State Insurance Company	0.0%	\$8,572	\$8,127	(\$2,628)	\$0	(\$15,709)	-193.3%
0158	25054	Hudson Insurance Company	0.0%	\$6,828	\$7,309	\$0	\$0	\$4,694	64.2%
0000	37540	Beazley Insurance Company Inc	0.0%	\$5,339	\$5,624	\$3,283	\$0	\$31,510	560.3%
0111	24732	General Insurance Company Of	0.0%	\$4,744	\$4,744	\$4	\$0	\$1,824	38.4%
3548	25674	Travelers Property Casualty	0.0%	\$3,837	\$3,837	\$0	\$0	\$0	0.0%
2358	32921	Ismie Mutual Insurance Company	0.0%	\$3,220	\$14,491	(\$21,046)	\$0	(\$30,133)	-207.9%
0084	26344	Great American Assurance	0.0%	\$2,313	\$4,909	\$918	\$0	(\$1,845)	-37.6%

**All Medical Malpractice
2017 Financial Data for Missouri**

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
0212	16535	Zurich American Insurance	0.0%	\$104	\$104	\$5	\$0	\$53	51.0%
3098	18058	Philadelphia Indemnity Insurance	0.0%	\$3	\$0	(\$5)	\$0	(\$4)	
Total			100.00%	\$110,581,910	\$109,171,921	\$25,310,558	\$47,032,008	\$73,806,056	67.6%

**Physicians and Surgeons Coverage
Financial Data from 2017**

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	15.0%	\$10,192,642	\$7,897,786	\$2,581,017	\$4,135,746	\$12,236,488	154.9%
0861	10686	Medical Liability Alliance	14.6%	\$9,923,360	\$9,713,888	\$1,493,341	\$2,275,000	\$2,453,236	25.3%
1282	33200	Norcal Mutual Insurance Company	14.1%	\$9,587,391	\$9,584,178	\$3,337,734	\$2,013,500	\$16,103,374	168.0%
0831	34495	Doctors Company An Interins Exchange	11.8%	\$7,992,515	\$8,073,911	\$1,230,145	\$4,529,478	\$7,284,129	90.2%
2698	33391	Proassurance Indemnity Company Inc	11.5%	\$7,793,278	\$7,767,580	\$1,910,089	\$2,659,806	\$2,720,039	35.0%
4782	11582	Missouri Professionals Mutual-Physicians Prof	10.9%	\$7,383,269	\$8,726,991	\$3,912,104	\$4,264,557	\$1,591,135	18.2%
0000	11964	Missouri Doctors Mutual Insurance Company	5.1%	\$3,456,568	\$3,487,566	\$893,356	\$1,508,689	\$856,202	24.6%
4790	16942	MMIC Insurance Inc	4.0%	\$2,686,562	\$2,802,577	\$379,763	\$125,000	(\$191,707)	-6.8%
0000	13073	Keystone Mutual Insurance Company	3.6%	\$2,422,026	\$2,184,214	\$730,308	\$270,000	\$255,524	11.7%
1282	44083	Preferred Physicians Medical Risk Retention	2.6%	\$1,745,888	\$1,742,086	\$885,572	\$0	\$625,286	35.9%
0000	13194	Physicians Insurance Mutual	1.5%	\$1,010,145	\$947,199	\$266,748	\$475,000	\$550,000	58.1%
0111	19917	Liberty Insurance Underwriters Inc	1.3%	\$880,826	\$888,316	\$444,551	\$0	(\$41,804)	-4.7%
0000	19348	Capson Physicians Insurance Company	1.3%	\$870,217	\$916,495	\$161,458	\$332,500	(\$726,852)	-79.3%
0501	35157	Fair American Insurance And Reinsurance	0.9%	\$593,811	\$632,518	\$71,560	\$0	\$30,356	4.8%
4837	34703	Kansas Medical Mutual Insurance Company	0.6%	\$386,192	\$386,192	\$337,806	\$350,000	\$41,125	10.6%
0158	22730	Allied World Insurance Company	0.4%	\$284,382	\$291,411	\$66,184	\$0	\$60,533	20.8%
1154	36234	Preferred Professional Insurance Company	0.3%	\$204,371	\$193,841	\$147,185	\$0	\$368,349	190.0%
4782	13816	Physicians Standard Insurance Company	0.2%	\$150,636	\$159,302	\$448,925	\$50,000	\$55,000	34.5%
0000	13793	Medmal Direct Insurance Company	0.2%	\$116,547	\$111,069	\$0	\$0	\$5	0.0%
0218	35289	Continental Insurance Company The	0.1%	\$83,526	\$41,040	\$1,820	\$0	\$19,165	46.7%
0218	20443	Continental Casualty Company	0.1%	\$76,902	\$46,859	\$0	\$126,590	\$98,114	209.4%
0000	12843	Doctors Direct Insurance Inc	0.1%	\$63,323	\$36,640	\$10,067	\$0	\$16,164	44.1%
4698	43460	Aspen American Insurance Company	0.0%	\$21,771	\$2,143	\$0	\$0	\$15,031	701.4%
0000	37540	Beazley Insurance Company Inc	0.0%	\$5,339	\$5,624	\$3,283	\$0	\$31,510	560.3%
0244	10677	Cincinnati Insurance Company The	0.0%	\$3,560	\$2,909	\$480	\$0	\$770	26.5%
2358	32921	Ismie Mutual Insurance Company	0.0%	\$3,220	\$14,491	(\$21,046)	\$0	(\$30,133)	-207.9%

**Physicians and Surgeons Coverage
Financial Data from 2017**

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
0111	24732	General Insurance Company Of America	0.0%	\$2,219	\$2,219	\$2	\$0	\$853	38.4%
3098	18058	Philadelphia Indemnity Insurance Company	0.0%	\$3	\$0	(\$5)	\$0	(\$4)	
Total			100.0%	\$67,940,489	\$66,659,045	\$19,292,447	\$23,115,866	\$44,421,888	66.6%

Hospitals Financial Data from 2017									
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	90.6%	\$26,314,239	\$25,840,140	\$3,862,799	\$20,430,000	\$21,578,416	83.5%
0000	35904	Health Care Indemnity Inc	7.4%	\$2,139,667	\$2,139,667	-\$197,443	\$0	\$4,194,911	196.1%
0218	20443	Continental Casualty Company	0.6%	\$178,938	\$178,938	\$90,487	\$36,000	-\$397,911	-222.4%
4790	16942	MMIC Insurance Inc	0.4%	\$117,337	\$60,929	-\$1,189	\$0	\$16,700	27.4%
0861	10686	Medical Liability Alliance	0.4%	\$102,946	\$51,324	\$0	\$0	\$0	0.0%
0361	19720	American Alternative Insurance	0.3%	\$85,744	\$93,961	\$4,866	\$0	\$9,915	10.6%
2698	33391	Proassurance Indemnity Company	0.2%	\$51,331	\$52,478	-\$95,206	\$1,000	\$15,689	29.9%
0012	19445	National Union Fire Insurance	0.1%	\$38,776	\$36,952	-\$41,591	\$0	-\$270,756	-732.7%
0626	22667	Ace American Insurance Company	0.0%	\$854	\$586,744	\$114,178	\$0	\$371,689	63.3%
0212	16535	Zurich American Insurance Company	0.0%	\$104	\$104	\$5	\$0	\$53	51.0%
Total			100.0%	\$29,029,936	\$29,041,237	\$3,736,906	\$20,467,000	\$25,518,706	87.9%

**Dentists
Financial Data from 2017**

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	71.9%	\$2,751,205	\$2,355,045	\$973,360	\$225,000	\$1,661,889	70.6%
0218	20443	Continental Casualty Company	7.9%	\$300,937	\$328,589	\$23,720	\$1,757	\$16,777	5.1%
2698	33391	Proassurance Indemnity Company Inc	7.8%	\$296,816	\$370,302	\$89,455	\$263,844	\$153,003	41.3%
0012	19445	National Union Fire Insurance Company	5.7%	\$217,190	\$255,294	-\$232,954	\$2,500	-\$2,571,929	-1007.4%
0244	10677	Cincinnati Insurance Company The	2.6%	\$97,730	\$93,651	\$6,964	\$0	\$12,086	12.9%
0012	19380	American Home Assurance Company	1.6%	\$62,363	\$63,817	\$110	\$0	-\$55,360	-86.7%
0508	10801	Fortress Insurance Company	1.6%	\$60,484	\$89,029	\$34,422	\$0	\$17,417	19.6%
0244	28665	Cincinnati Casualty Company The	0.3%	\$11,741	\$7,710	\$1,401	\$0	\$772	10.0%
0244	23280	Cincinnati Indemnity Company Inc	0.2%	\$8,909	\$11,881	\$1,562	\$0	-\$260	-2.2%
0012	23809	Granite State Insurance Company	0.2%	\$8,572	\$8,127	-\$2,628	\$0	-\$15,709	-193.3%
0000	13714	Pharmacists Mutual Insurance Company	0.2%	\$6,102	\$5,690	\$0	\$0	\$0	0.0%
0176	25143	State Farm Fire And Casualty Company	0.1%	\$2,157	\$2,151	-\$2,129	\$0	-\$2,137	-99.3%
Total			100.0%	\$3,824,206	\$3,591,286	\$893,283	\$493,101	-\$783,451	-21.8%

**Nurses
Financial Data from 2017**

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
0218	20427	American Casualty Company Of Reading	62.6%	\$1,306,577	\$1,356,444	\$240,299	\$319,730	\$518,736	38.2%
0031	11843	Medical Protective Company	17.1%	\$355,789	\$330,971	-\$120,075	\$0	-\$203,100	-61.4%
2698	33391	Proassurance Indemnity Company Inc	16.5%	\$344,108	\$355,541	\$81,211	\$0	\$63,997	18.0%
0176	25143	State Farm Fire And Casualty Company	1.9%	\$39,964	\$41,930	\$0	\$0	\$0	0.0%
0244	10677	Cincinnati Insurance Company The	1.4%	\$30,143	\$26,197	\$1,108	\$0	-\$1,017	-3.9%
0158	25054	Hudson Insurance Company	0.3%	\$6,828	\$7,309	\$0	\$0	\$4,694	64.2%
0244	23280	Cincinnati Indemnity Company Inc	0.1%	\$2,615	\$2,707	\$94	\$0	-\$43	-1.6%
0244	28665	Cincinnati Casualty Company The	0.0%	\$390	\$16	\$0	\$0	\$0	0.0%
Total			100.0%	\$2,086,414	\$2,121,115	\$202,637	\$319,730	\$383,267	18.1%

All Other Providers Financial Data from 2017									
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
2638	15865	NCMIC Insurance Company	22.3%	\$1,717,189	\$1,713,709	\$470,144	\$459,500	\$804,578	46.9%
0000	13714	Pharmacists Mutual Insurance Company	17.0%	\$1,309,848	\$1,365,682	\$139,930	\$27,687	\$298,177	21.8%
0218	20427	American Casualty Company Of Reading	14.7%	\$1,129,449	\$1,148,555	\$8,532	\$100,447	\$239,061	20.8%
2638	11127	Professional Solutions Insurance	8.4%	\$645,569	\$670,090	\$97,043	\$520,000	-\$138,374	-20.7%
0861	10686	Medical Liability Alliance	6.6%	\$508,950	\$481,916	\$0	\$515,000	\$1,977,665	410.4%
0626	22667	Ace American Insurance Company	6.6%	\$507,260	\$580,414	\$125,631	\$480,000	\$408,968	70.5%
0031	11843	Medical Protective Company	5.9%	\$454,793	\$441,821	\$98,064	\$0	\$222,769	50.4%
2698	14460	Podiatry Insurance Company Of America	4.7%	\$364,518	\$425,570	\$883	\$80,000	-\$14,434	-3.4%
0244	10677	Cincinnati Insurance Company The	3.7%	\$285,928	\$246,658	\$62,571	\$350,000	-\$43,948	-17.8%
1154	36234	Preferred Professional Insurance	3.0%	\$234,354	\$222,278	\$168,778	\$0	\$422,389	190.0%
4851	18767	Church Mutual Insurance Company	2.4%	\$183,935	\$158,149	-\$10,124	\$0	-\$36,182	-22.9%
0031	22276	Berkshire Hathaway Specialty Insurance	1.4%	\$110,324	\$58,906	\$13,874	\$0	\$31,660	53.7%
0098	25224	Great Divide Insurance Company	1.4%	\$109,787	\$99,867	-\$12,145	\$0	\$39,675	39.7%
2698	10222	Paco Assurance Company Inc	1.0%	\$77,759	\$81,405	\$20,454	\$103,677	\$55,191	67.8%
4837	34703	Kansas Medical Mutual Insurance	0.5%	\$40,177	\$40,177	\$0	\$0	\$0	0.0%
0244	23280	Cincinnati Indemnity Company Inc	0.1%	\$9,807	\$11,135	\$385	\$0	-\$1,016	-9.1%
3548	25674	Travelers Property Casualty Company Of	0.0%	\$3,837	\$3,837	\$0	\$0	\$0	0.0%
0244	28665	Cincinnati Casualty Company The	0.0%	\$2,543	\$1,635	\$345	\$0	\$341	20.9%
0111	24732	General Insurance Company Of America	0.0%	\$2,525	\$2,525	\$2	\$0	\$971	38.5%
0084	26344	Great American Assurance Company	0.0%	\$2,313	\$4,909	\$918	\$0	-\$1,845	-37.6%
Total			100.0%	\$7,700,865	\$7,759,238	\$1,185,285	\$2,636,311	\$4,265,646	55.0%

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