

2019

MEDICAL MALPRACTICE REPORT

MISSOURI DEPARTMENT OF COMMERCE & INSURANCE



DCI

Missouri Department of Commerce & Insurance

Executive Summary

Data Sources

This report is based upon data provided by insurers and self-insured hospitals to the Missouri Department of Commerce and Insurance (DCI). These data include open and closed claims that insurance companies and self-insured hospitals are required to report under Section 383.105 RSMo. The DCI 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 DCI 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

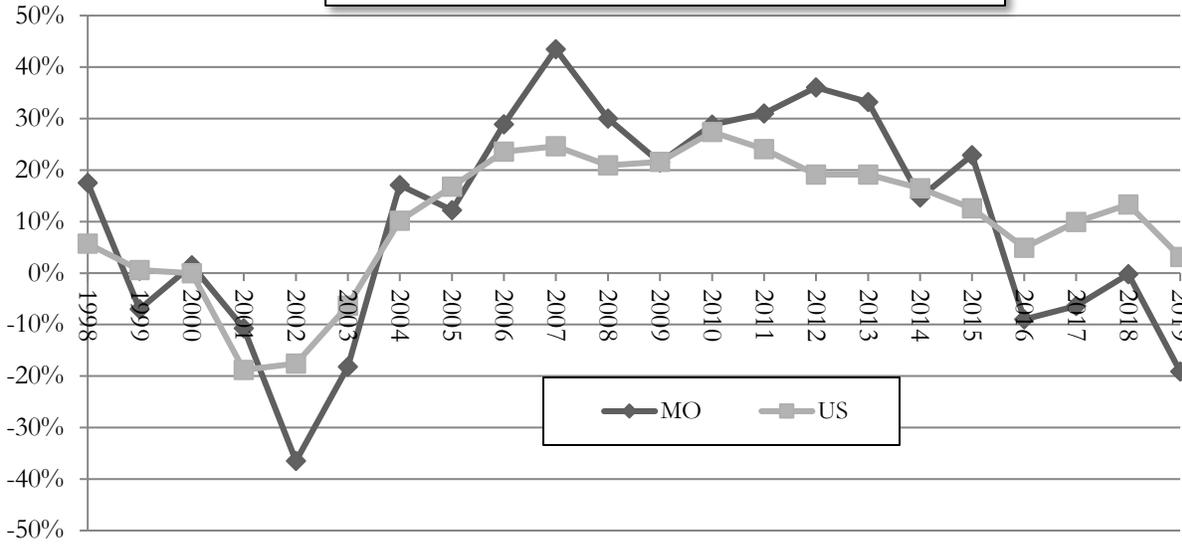
Data for physicians and surgeons, hospitals and other medical care providers are summarized in this report. The category of “other medical care providers” includes, but is not limited to, dentists, nurses, nursing homes, chiropractors, pharmacies, optometrists, podiatrists/chiropractists, clinics, and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

Among the findings of the report are:

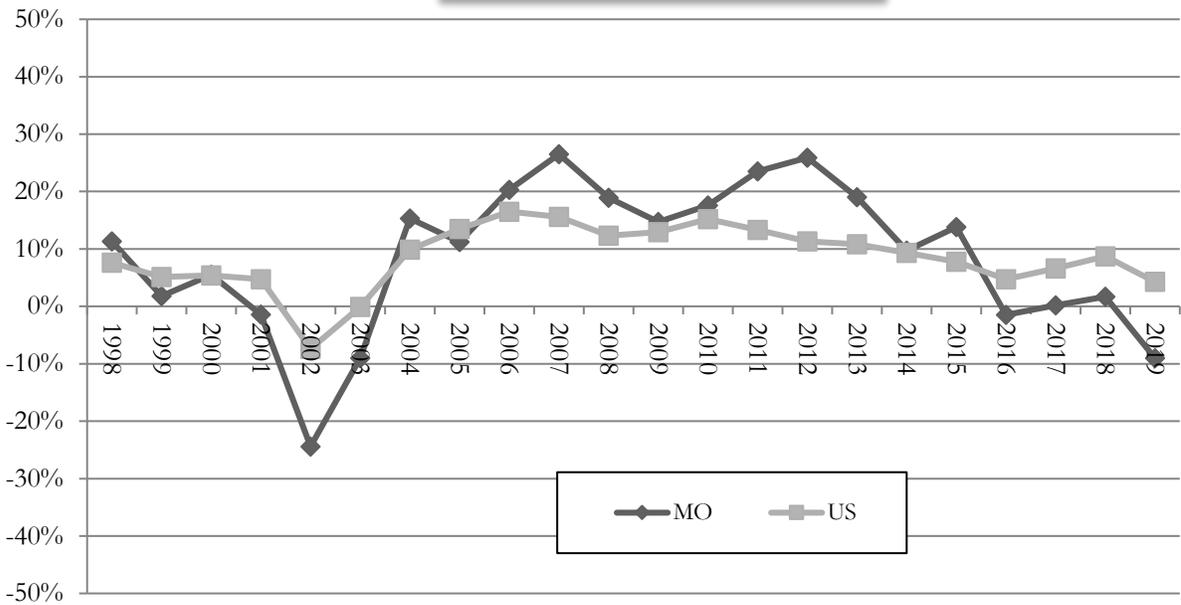
■ **Profitability** In 2016, medical professional liability insurers returned a loss in Missouri for the first time since 2003. In both 2017 and 2018, underwriting results were still negative, though when factoring in additional revenue such as investment income, insurers managed a positive return in both years, earning a 0.2 and 1.7 percent return. However, in 2019, both results were negative again. Profit on insurance transactions (claim costs plus expenses) reached 119 percent of premium. Nationally, profitability has also been trending downward in recent years.

Incurred claims increased slightly between 2017 and 2018, rising from \$79.7 to \$86.1 million, and reached \$119 million in 2019. 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

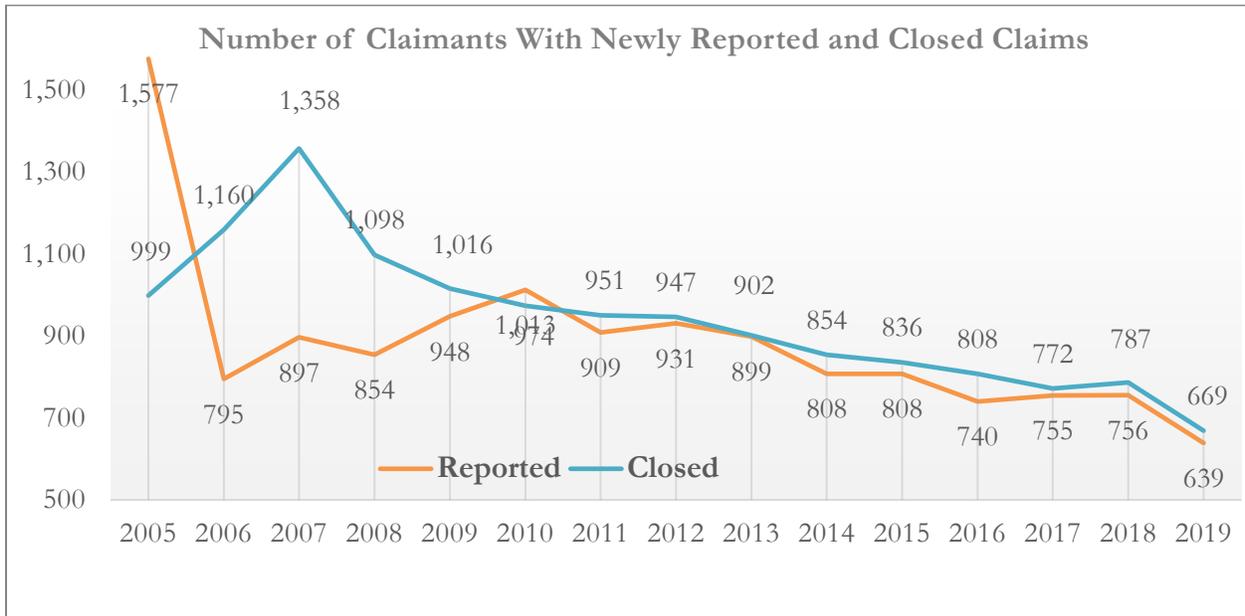


Return on Net Worth



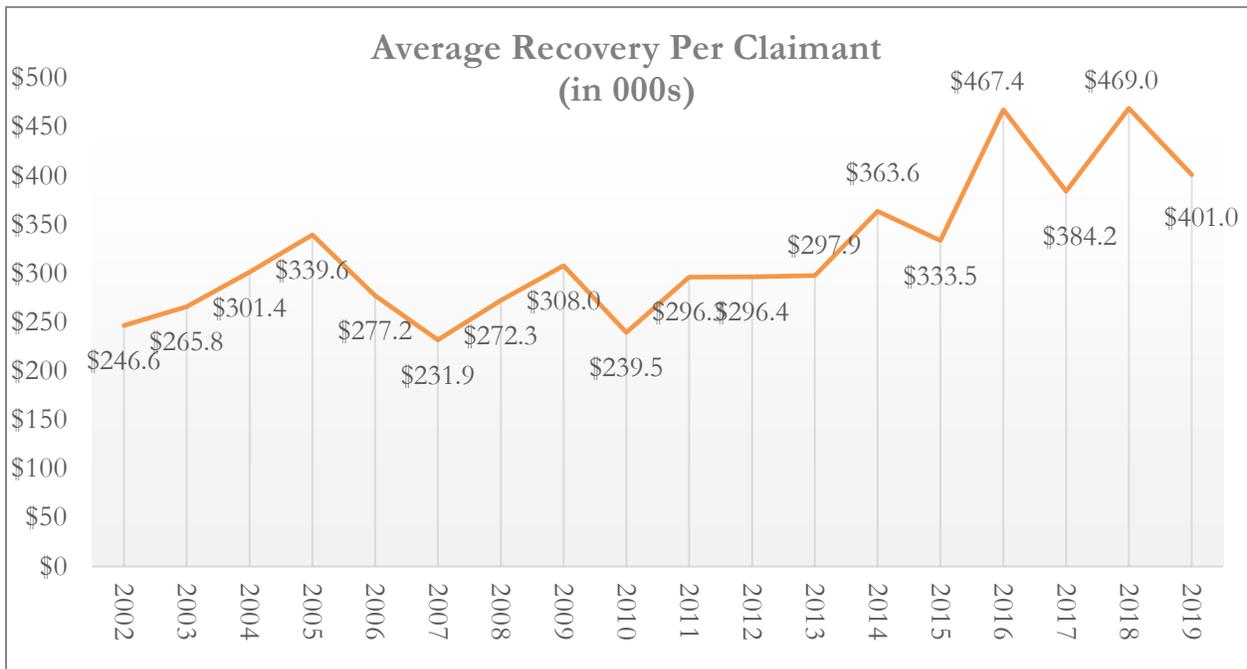
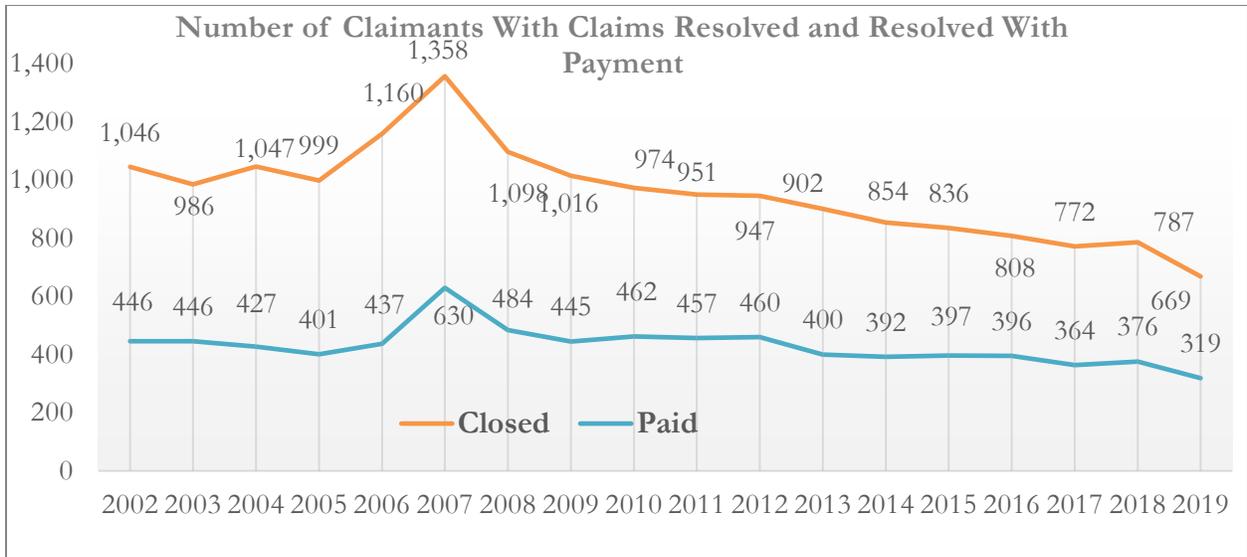
New Incidents Reported and Claims Closed

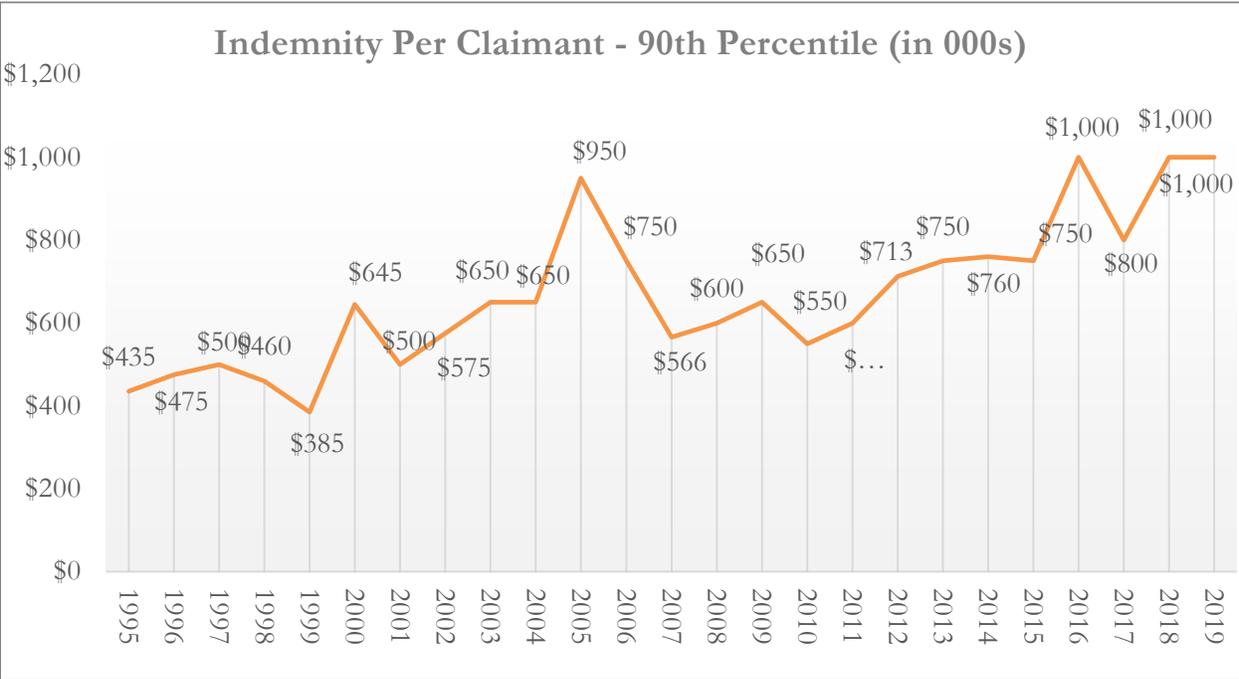
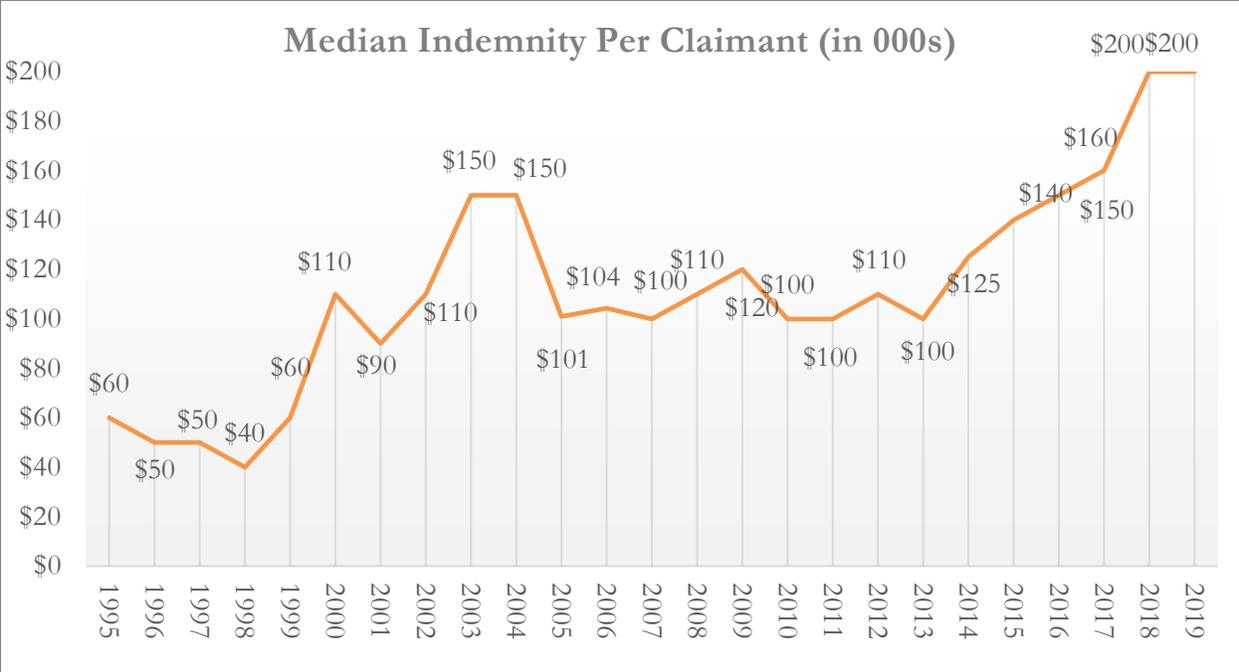
■ After new claims spiked sharply in 2005, newly-opened claims declined substantially in subsequent years. Aside from the anomalous 2005 spike in new claims (a direct result of legal changes implemented in that year), the number of claims reported has declined substantially in recent years, and by 2019 stood at 639.

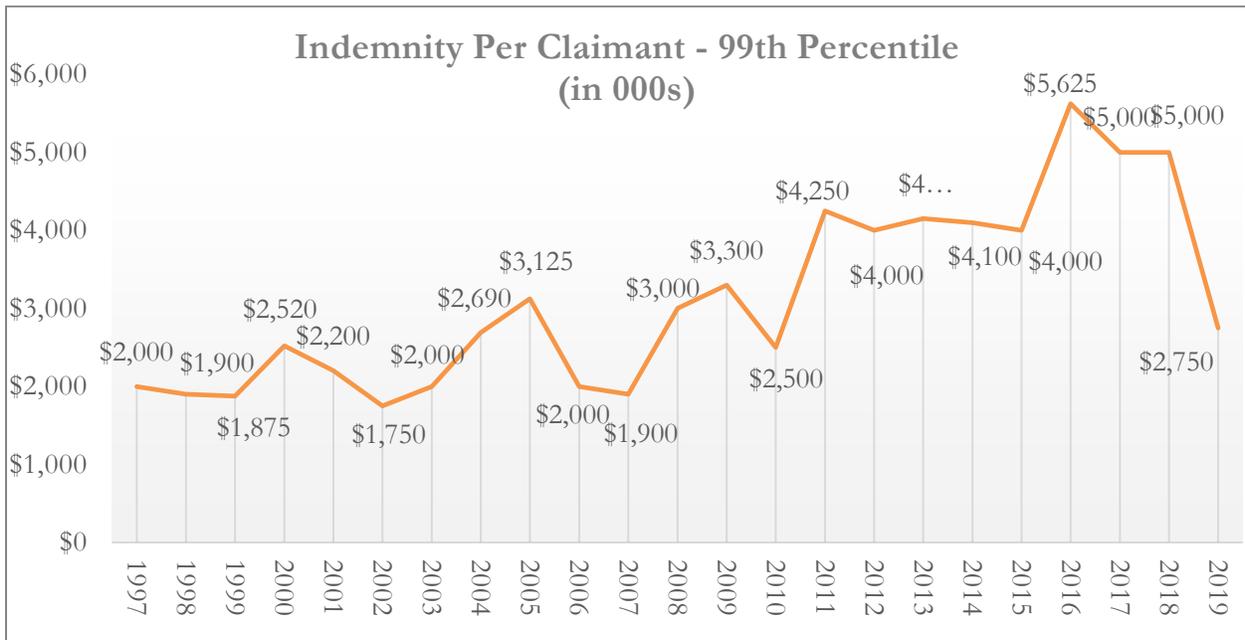


■ After a significant increase in 2007, the number of claimants receiving a recovery subsequently declined. However, the average award per claimant increased significantly in 2018, rising to \$494,874, a new high, though declined in 2019.

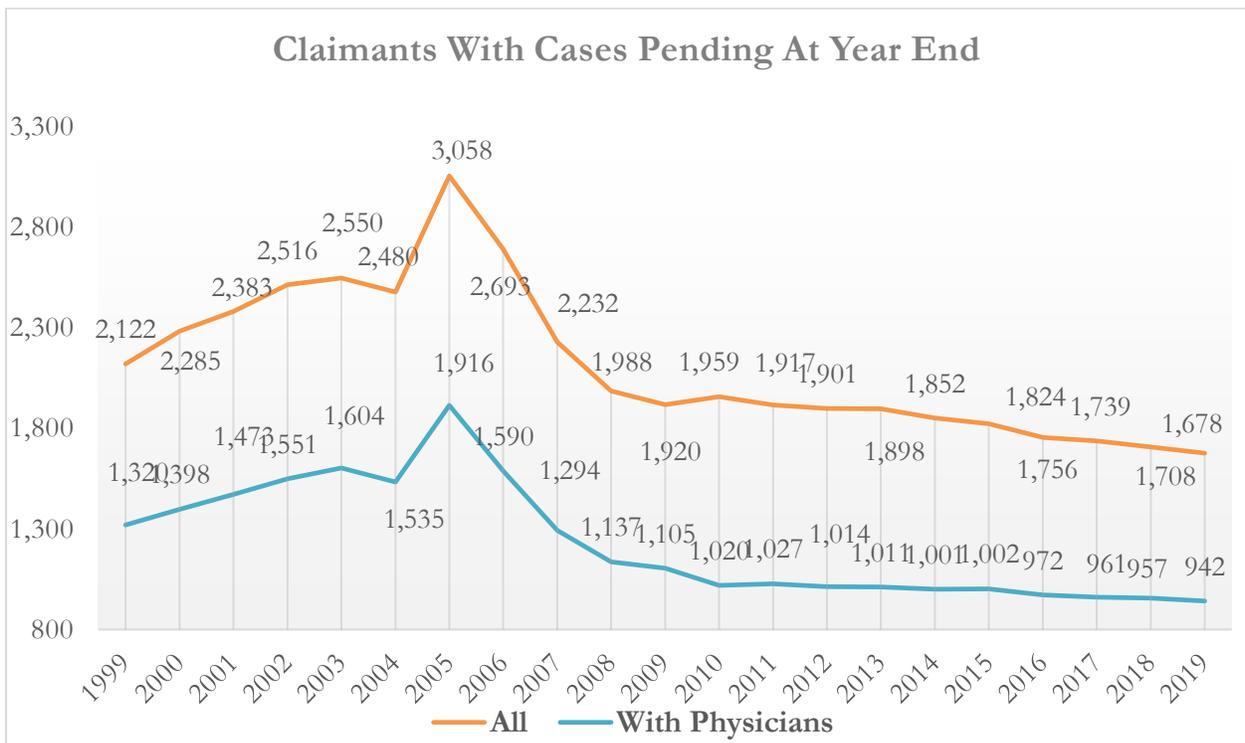
The median amount received by each claimant in both 2018 and 2019 stood at \$200,000, up significantly from prior years. In 2019, recoveries at the 90th and 99th percentiles were \$1 million and \$2.8 million respectively,







■ 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. 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 2020, the caps stood at \$435,176 and \$761,558.

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 DCI. 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 DCI has coded nearly 15,000 medical professional liability actions extending back to 2005. Data included in this report are through 2018.

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, 2005-2018 Percent			
Category of Alleged Medical Error	Occurrences	Paid Occurrences	% Total Payments
Surgery	31.0%	29.7%	29.2%
Non-surgical treatment	18.0%	18.3%	13.7%
Diagnosis	17.9%	18.2%	25.9%
Patient Safety / Ethics / Legal	15.2%	15.2%	6.5%
Medication	8.4%	8.6%	5.3%
Pregnancy & childbirth	6.1%	6.5%	16.8%
Anesthesia	1.9%	1.6%	1.7%
IV & Blood Products	1.5%	1.8%	0.9%
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 nearly 1,900 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 2005-2018, insurers paid out nearly \$147 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, tear or burn* during the procedure (1,625 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 (730 cases), and an assortment of other types of less-defined injuries (667, classed as “Other injury during or as a result of procedure”).

This category excludes other specific types of injuries, such as retained surgical materials (364 cases), and surgeries or other procedures performed on the wrong patient or the wrong body part (159 cases). Claims involving misdiagnoses and other diagnostic issues (excluding physical injuries incurred during a diagnostic test) accounted for 2,892 cases and \$593 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, 2005-2018				
Allegation Type	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Diagnostic Errors	2,581	1,230	\$452,723	6.4
Non-treatment injuries (falls, etc)	1,716	998	\$143,898	4.9
Cut, puncture or tear during procedure	1,486	764	\$280,431	5.3
Post-treatment infection	1,154	499	\$275,022	6.0
Pregnancy & Childbirth	877	446	\$847,780	7.0
Inefficacious treatment	781	274	\$229,018	4.8
Adverse reaction to correct medication and dose	720	199	\$299,432	5.1
Medication Error (incorrect med or dose)	681	480	\$196,940	4.5
Cardiovascular / respiratory complication of	659	332	\$521,622	7.2
Improper use of equipment / equipment failure	645	284	\$253,817	4.8
Other physical trauma from treatment	600	228	\$302,747	4.4
Denial of care / patient abandonment	444	54	\$323,982	3.6
Foreign body retained	344	195	\$118,980	3.9
Ethical / legal misconduct	305	121	\$88,034	1.2
Non-administration of necessary care	212	100	\$332,010	6.3
Informed consent / unnecessary procedure	204	68	\$241,751	4.2
Other problem with surgical site	155	65	\$460,467	4.7
Wrong patient / body part	147	109	\$307,094	4.4
Delay in treatment	65	29	\$417,070	6.6
Communication failure	61	15	\$239,167	6.0
Subtotal	13,837	6,490	\$329,936	5.4
Total	1,186	427	\$248,520	4.9
% Top 25	92.1%	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 commonly misdiagnoses or failure to diagnose), most involved cancers of various forms (680 cases), of which the most common was breast cancer (139 cases). This category was followed by heart conditions (258 cases), fractures (212 cases), digestive disorder (203 cases) and strokes (194 cases) comprising the top 5. Diagnosing a healthy patient with a condition was the 7th most common diagnostic error, with 85 cases during the period.

Diagnostic-Related Claims, 2005-2018					
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	625	293	\$417,101	7.0
NI	Heart Condition	238	135	\$422,673	7.9
NI	Fracture	193	58	\$127,906	3.8
NI	Digestive disorders	185	91	\$398,247	5.8
NI	Stroke	170	84	\$562,310	6.6
NI	Embolism/ thrombosis	102	59	\$387,352	7.3
NI	Healthy patient misdiagnosed with	80	34	\$155,421	3.5
NI	Traumatic injury to internal organs	66	32	\$376,469	7.2
NI	Hematoma / aneurysm	59	35	\$526,475	8.1
NI	Spine / spinal cord disorder	54	22	\$948,697	5.9
I	Respiratory infections	50	23	\$281,674	6.8
I	Meningitis, encephalitis, and	46	31	\$1,031,868	7.7
NI	Traumatic injury to spine	45	20	\$1,020,092	5.8
NI	Injury to tendons or muscle	40	10	\$86,433	6.2
NI	Diseases of the genitourinary system	35	18	\$485,139	5.9
NI	Diseases of the reproductive system	30	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	23	13	\$535,084	5.9
NI	Musculoskeletal disorder order-	22	8	\$1,511,250	4.2
I	Infection of spine / spinal cord	18	6	\$928,056	6.3
I	Musculoskeletal infection excluding	16	11	\$769,091	5.5
I	Development of septic condition during	16	12	\$664,125	7.5
NI	Blood and immune disorders	15	10	\$579,417	6.9
NI	Diabetes	14	8	\$344,388	6.4
Top 25		2,197	1,054	\$462,055	6.4
All Diagnostic-related Claims		2,342	1,095	\$456,748	6.2
% Top 25		93.8%	96.3%		

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, 2005-2018 With Average Payment > \$500,000			
Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment
Cerebral palsy	73	49	\$1,994,038
Quadriplegia	53	34	\$1,885,203
Progression - meningitis	14	8	\$1,866,000
Paraplegia	138	77	\$1,522,666
other cognitive or neurological deficit	639	311	\$1,176,435
Hemiplegia	22	11	\$1,127,273
Full - loss of hearing	2	2	\$1,037,500
Progression - encephalitis	3	1	\$1,025,000
Wrong site surgery	1	1	\$1,000,000
Coma	12	5	\$930,000
Contraction - meningitis	15	2	\$840,000
Full - loss of vision	48	26	\$770,217
Stroke	164	72	\$710,611
Perm - full loss of organ	32	18	\$702,326
Perm - partial loss of organ	306	92	\$633,096
Contraction - sepsis	81	34	\$599,756
Cauda equine syndrome	19	11	\$562,047
Amputation of two or more limbs	15	7	\$559,769
Amputation / loss of other body part	218	92	\$533,568
Amputation of hands/feet	38	14	\$511,372
Amputation of one limb	196	97	\$504,842

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 DCI 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 DCI 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 DCI 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									
		Never events that include assessment of injury severity where applicable				Never event type occurrence without reference to injury severity			
Event description	Definition includes 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	138	99	\$23,998,926	\$242,413	138	99	\$23,998,926	\$242,413
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	373	208	\$25,527,631	\$122,729	377	210	\$25,742,631	\$122,584
Injuries from Improper Use of Devices / Device Malfunction									
Contaminated drugs, devices or Device misuse/malfunction	Y	5	4	\$2,775,000	\$693,750	15	7	\$2,905,000	\$415,000
Air embolism	Y	78	64	\$27,760,085	\$433,751	122	93	\$30,792,194	\$331,099
	Y	21	18	\$9,401,844	\$522,325	21	18	\$9,401,844	\$522,325
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	55	29	\$8,489,167	\$292,730	57	29	\$8,489,167	\$292,730
Care Management Events									
Medication error	Y	269	188	\$60,984,519	\$324,386	593	390	\$63,600,215	\$163,077
Administration of blood products	Y	13	10	\$7,112,000	\$711,200	13	10	\$7,112,000	\$711,200
Maternal death of healthy patient	Y	2	1	\$1,050,000	\$1,050,000	3	2	\$1,058,000	\$529,000
Death of neonate in low risk pregnancy	Y					602	305	\$307,097,144	\$1,006,876
Wrong donor sperm or egg	N	1		\$0		1		\$0	
Falls	Y	667	402	\$65,215,816	\$162,228	1,020	566	\$74,123,140	\$130,960
Pressure ulcers	Y	327	188	\$44,162,272	\$234,906	396	216	\$46,168,272	\$213,742
Loss of biological specimen	Y					11	8	\$297,748	\$37,219

Never Event Type Occurrences, Claims Closed 2005-2017									
		Never events that include assessment of injury severity where applicable				Never event type occurrence without reference to injury severity			
Event description	Definition includes 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 oxygen or other 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	72	54	\$2,966,176	\$54,929
Injury from restraints / 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	75	28	\$3,231,994	\$115,428	75	28	\$3,231,994	\$115,428
Assault	Y	4	3	\$587,499	\$195,833	18	13	\$2,174,499	\$167,269

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 DCI 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, 2003-2017					
Year	Market Segment	Premium Written	Market Share	Premium Earned	Market Share
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%
2018	Licensed	\$110,447,806	76.06%	\$111,473,769	77.81%
	Non-Admitted	\$34,757,355	23.94%	\$31,787,993	22.19%
	Total	\$145,205,161	100.0%	\$143,261,762	100.0%
2019	Licensed	\$116,288,335	75.0%	\$111,015,274	74.0%
	Non-Admitted	\$38,873,062	25.1%	\$38,947,721	26.0%
	Total	\$155,161,397	100.0%	\$149,962,995	100.0%

2019 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	\$28,931,584	18.6%	National Fire & Marine Insurance	\$6,649,855	4.3%
Medical Protective Company	\$14,439,714	9.3%	Columbia Casualty Company	\$5,909,424	3.8%
Medical Liability Alliance	\$12,525,890	8.1%	Illinois Union Insurance Company	\$2,664,920	1.7%
Norcal Mutual Insurance Company	\$10,864,416	7.0%	Caring Communities, A Reciprocal Risk	\$2,258,619	1.5%
Proassurance Indemnity Company Inc	\$8,249,521	5.3%	Saint Lukes Health System Risk Retention	\$2,201,717	1.4%
Doctors Company An Interins Exchange	\$6,953,063	4.5%	Health Care Industry Liability Reciprocal	\$1,827,956	1.2%
Missouri Doctors Mutual Insurance	\$3,665,615	2.4%	Admiral Insurance Company	\$1,616,374	1.0%
Mmic Insurance Inc	\$3,497,514	2.3%	Endurance American Specialty Insurance	\$1,487,399	1.0%
Keystone Mutual Insurance Company	\$2,811,635	1.8%	Ophthalmic Mutual Insurance Company	\$1,065,743	0.7%
Continental Casualty Company	\$2,513,622	1.6%	Coverys Specialty Insurance Company	\$1,001,105	0.6%
American Casualty Company Of Reading	\$2,493,353	1.6%	Evanston Insurance Company	\$999,734	0.6%
Ismie Mutual Insurance Company	\$1,865,616	1.2%	Ironshore Specialty Insurance Company	\$995,221	0.6%
Health Care Indemnity Inc	\$1,819,011	1.2%	Oms National Insurance Company, Risk	\$922,301	0.6%
Ncmic Insurance Company	\$1,662,168	1.1%	The Mutual Risk Retention Group, Inc.	\$892,565	0.6%
Preferred Physicians Medical Risk	\$1,601,006	1.0%	Tdc Specialty Insurance Company	\$768,188	0.5%
Mag Mutual Insurance Company	\$1,355,901	0.9%	Hallmark Specialty Insurance Company	\$692,288	0.4%
Professional Solutions Insurance Company	\$1,306,814	0.8%	Hudson Specialty Insurance Company	\$595,701	0.4%
Physicians Insurance Mutual	\$1,205,037	0.8%	Landmark American Insurance Company	\$508,380	0.3%
Pharmacists Mutual Insurance Company	\$1,107,214	0.7%	General Star Indemnity Company	\$493,149	0.3%
Preferred Professional Insurance Company	\$1,019,644	0.7%	Proassurance Specialty Insurance	\$471,070	0.3%
Liberty Insurance Underwriters Inc	\$786,638	0.5%	James River Insurance Company	\$452,824	0.3%
Zurich American Insurance Company	\$619,554	0.4%	Capitol Specialty Insurance Corporation	\$377,205	0.2%
Fair American Insurance And Reinsurance	\$605,941	0.4%	Arch Specialty Insurance Company	\$318,635	0.2%
Church Mutual Insurance Company	\$545,322	0.4%	Allied World Surplus Lines Insurance	\$314,777	0.2%
Ace American Insurance Company	\$494,223	0.3%	Applied Medico-Legal Solutions Risk	\$282,643	0.2%
Doctors Direct Insurance Inc	\$469,415	0.3%	Medchoice Risk Retention Group Inc	\$251,810	0.2%
Kansas Medical Mutual Insurance	\$388,959	0.3%	Lone Star Alliance, Inc., A Risk Retention	\$251,224	0.2%
Podiatry Insurance Company Of America	\$388,456	0.3%	Homeland Insurance Company Of New	\$246,797	0.2%
Cincinnati Insurance Company The	\$381,078	0.2%	Liberty Surplus Insurance Corporation	\$204,860	0.1%
Aspen American Insurance Company	\$324,039	0.2%	Steadfast Insurance Company	\$196,339	0.1%
Allied World Insurance Company	\$316,519	0.2%	Aspen Specialty Insurance Company	\$187,931	0.1%
Kammco Casualty Company Inc	\$294,665	0.2%	Norcal Specialty Insurance Company	\$165,097	0.1%
Continental Insurance Company The	\$275,138	0.2%	Axis Surplus Insurance Company	\$164,236	0.1%

2019 Market Share – Physicians & Surgeons Coverage
(Companies with greater than 0.1% market share)

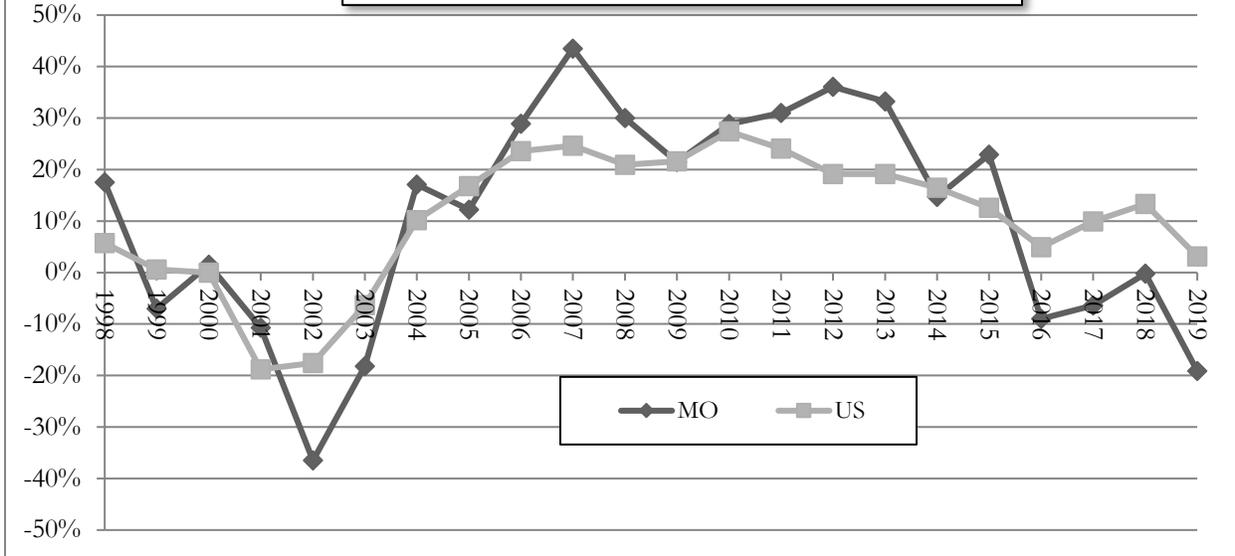
Company	Premium Written, 2019	Market Share
Medical Liability Alliance	\$11,539,490	16.8%
Norcal Mutual Insurance Company	\$10,864,416	15.9%
Medical Protective Company	\$10,630,150	15.5%
Proassurance Indemnity Company Inc	\$7,590,470	11.1%
Doctors Company An Interins Exchange	\$6,953,063	10.1%
Missouri Doctors Mutual Insurance Company	\$3,665,615	5.3%
Keystone Mutual Insurance Company	\$2,811,635	4.1%
Mmic Insurance Inc	\$2,805,071	4.1%
Ismie Mutual Insurance Company	\$1,865,616	2.7%
Preferred Physicians Medical Risk Retention G	\$1,601,006	2.3%
Mag Mutual Insurance Company	\$1,355,901	2.0%
Physicians Insurance Mutual	\$1,205,037	1.8%
Professional Solutions Insurance Company	\$1,045,602	1.5%
Liberty Insurance Underwriters Inc	\$786,638	1.1%
Preferred Professional Insurance Company	\$776,206	1.1%
Zurich American Insurance Company	\$615,489	0.9%
Fair American Insurance And Reinsurance Compa	\$605,941	0.9%
Doctors Direct Insurance Inc	\$469,415	0.7%
Kansas Medical Mutual Insurance Company	\$355,322	0.5%
Aspen American Insurance Company	\$324,039	0.5%
Allied World Insurance Company	\$316,519	0.5%
Kammco Casualty Company Inc	\$126,514	0.2%
Continental Insurance Company The	\$86,189	0.1%

Medical Professional Liability Profitability in Missouri, 1993-2019
All Writers, Including Excess and Surplus Lines Companies

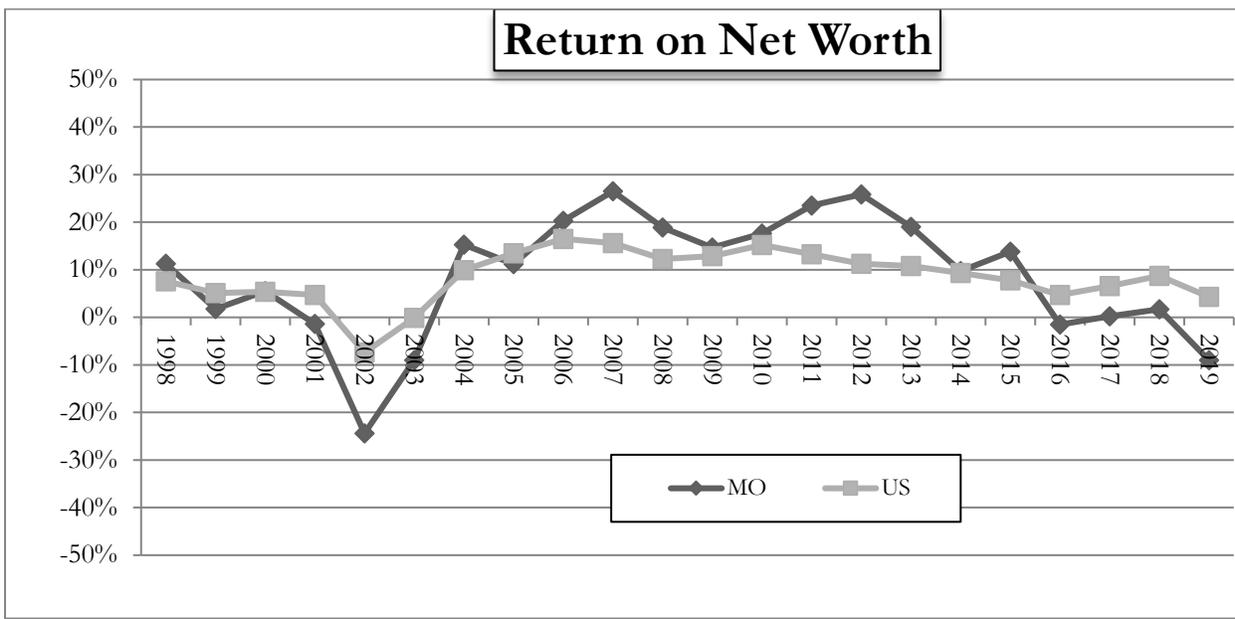
Year	Premium Earned	Direct Losses Incurred	Defense and Cost Containment Expenses	Other Expenses	Claims + Expenses	Profit on Insurance Transactions	Return on Net Worth
1993	\$115,261,205	54.6%	18.0%	17.2%	89.8%	28.1%	20.3%
1994	\$125,358,976	54.7%	25.6%	18.2%	98.5%	15.4%	12.9%
1995	\$128,910,099	50.9%	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%
2018	\$143,256,625	60.1%	20.7%	35.3%	116.1%	-1.8%	1.7%
2019	\$150,052,207	79.3%	29.7%	33.5%	142.5%	-19.1%	-9.0%

*Source: NAIC, *Profitability by Line by State, 2019* produced by DCI based on the NAIC profitability formula.

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
2018	\$110,447,806	\$58,635,151	\$111,473,769	\$53,257,813	\$13,615,485	\$15,169,324	\$8,719,723	\$1,847,287
2019	\$116,288,335	\$49,161,519	\$111,015,502	\$89,934,883	\$23,635,587	\$14,880,025	\$8,772,128	\$1,673,268

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

Year	% or Written Premium	% of Earned Premium			
	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%
2018	53.1%	47.8%	12.2%	23.1%	83.1%
2019	42.3%	81.0%	21.3%	22.8%	125.1%

**Surplus Lines 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	\$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
2018	\$34,757,355	\$31,564,269	\$31,815,905	\$32,877,443	\$4,215,241	\$573,256	\$5,411,507	\$381,899
2019	\$38,873,062	\$22,738,319	\$39,036,705	\$29,080,800	\$6,511,067	\$452,957	\$5,284,120	\$227,190

**Surplus Lines Market
Medical Professional Liability
Data form the Financial Annual Statement**

Year	% of Written Premium	% of Earned Premium			
	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%
2018	90.8%	103.3%	13.2%	20.0%	136.6%
2019	58.5%	74.5%	16.7%	15.3%	106.5%

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%
2018	\$65,596,340	\$35,664,803	54.37%	\$66,811,659	\$30,431,804	45.5%	-3.5%
2019	\$68,522,104	\$36,817,108	53.73%	\$64,227,345	\$63,677,079	99.14%	4.5%

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%
2018	\$4,089,319	\$193,303	4.7%	\$5,061,792	-\$153,116	-3.0%	6.9%
2019	\$3,683,589	\$832,951	22.6%	\$3,682,915	\$3,920,035	106.4%	-9.9%

Licensed Medical Professional Liability Market - Nurses

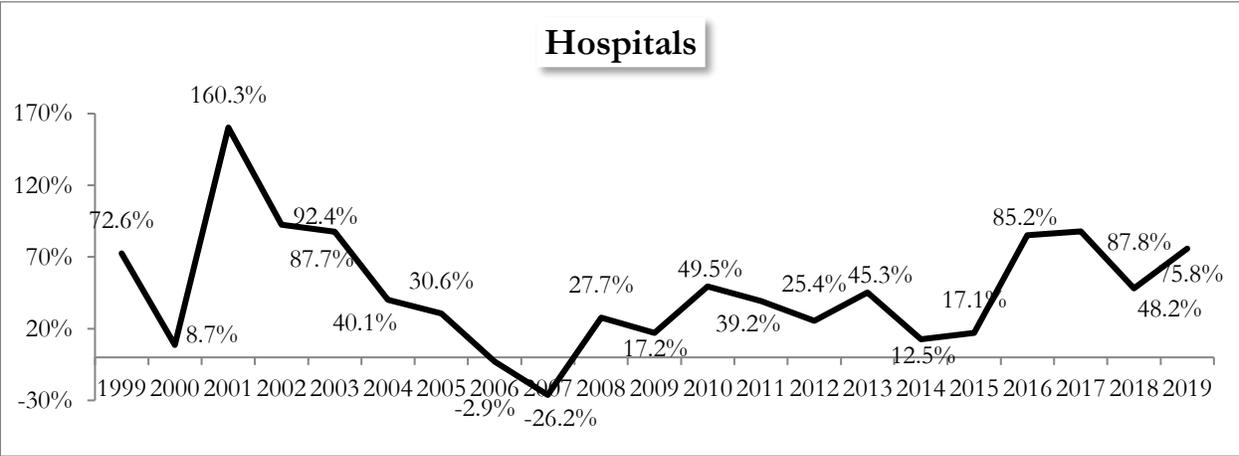
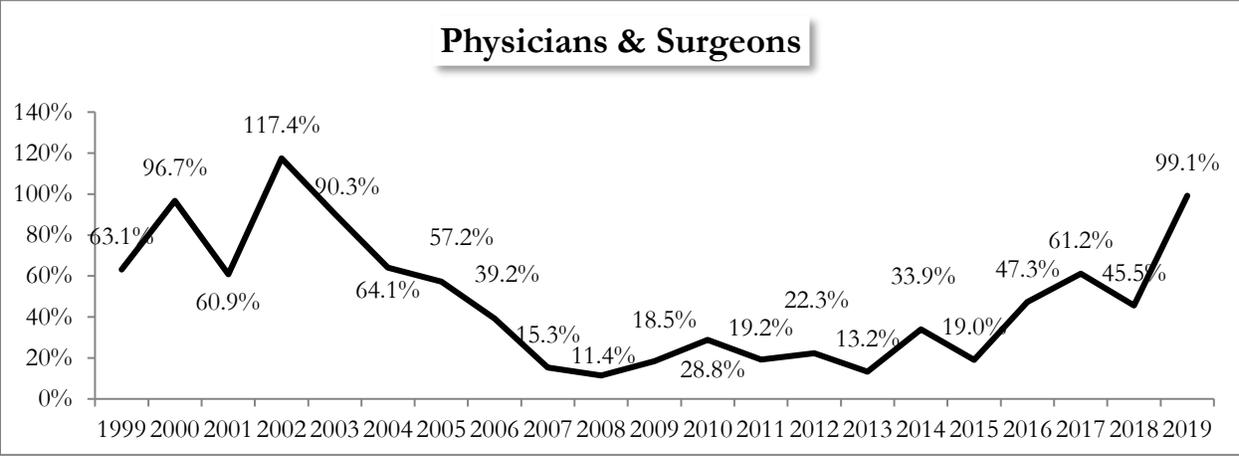
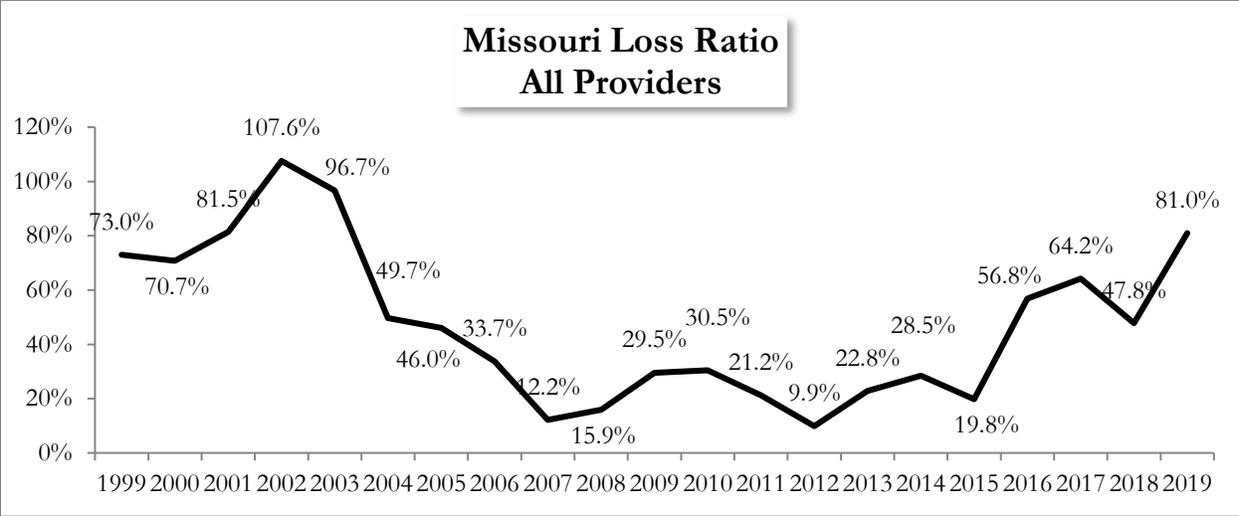
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$1,430,588	\$29,794	2.1%	\$1,073,768	-\$580,638	-54.1%	
1998	\$518,436	\$15,750	3.0%	\$685,261	\$145,484	21.2%	-63.8%
1999	\$701,196	\$277,500	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%
2018	\$1,602,926	\$1,860,303	116.1%	\$909,867	\$1,105,821	121.5%	-23.2%
2019	\$2,076,136	\$465,000	22.4%	\$1,998,640	\$345,983	17.3%	29.5%

Licensed Medical Professional Liability Market - Hospitals

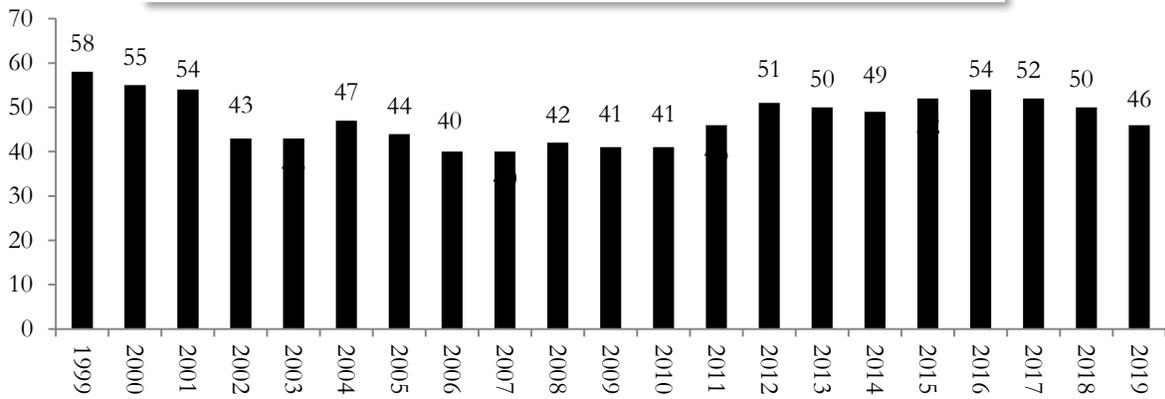
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$15,248,580	\$3,143,280	20.6%	\$13,199,320	\$1,974,721	15.0%	
1998	\$12,555,794	\$8,428,222	67.1%	\$14,604,144	\$2,875,637	19.7%	-17.7%
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%
2018	\$30,861,668	\$16,676,086	54.0%	\$29,762,374	\$14,331,535	48.2%	6.3%
2019	\$34,492,860	\$10,543,909	30.6%	\$33,501,499	\$25,383,878	75.8%	11.8%

Licensed Medical Professional Liability Market - Other

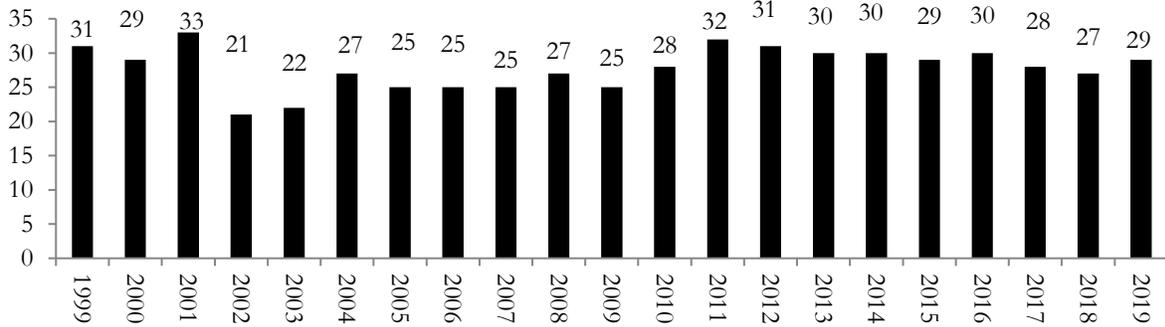
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$18,770,001	\$5,714,900	30.4%	\$20,016,056	\$11,955,336	59.7%	
1998	\$9,437,033	\$10,145,048	107.5%	\$12,744,574	-\$904,059	-7.1%	-49.7%
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%
2018	\$8,297,553	\$4,240,657	51.1%	\$8,928,073	\$7,541,770	84.5%	7.7%
2019	\$7,513,645	\$502,552	6.7%	\$7,605,101	-\$3,392,090	-44.6%	-9.4%



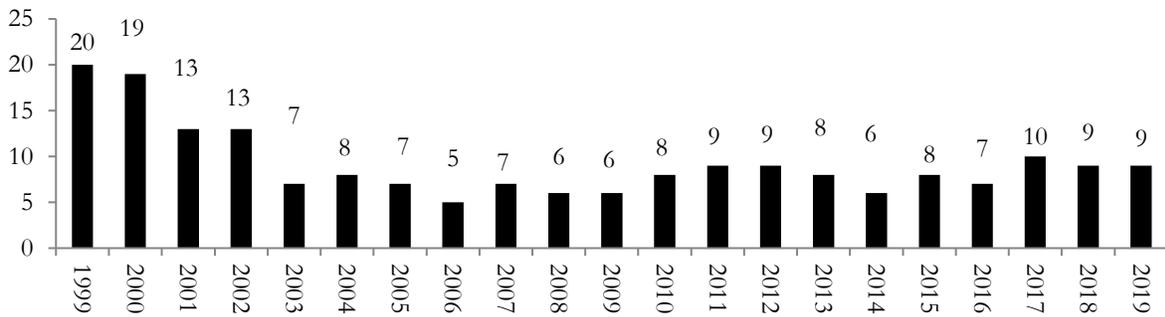
**Companies Writing Medical Professional Liability Coverage in Missouri
Total Licensed Market**



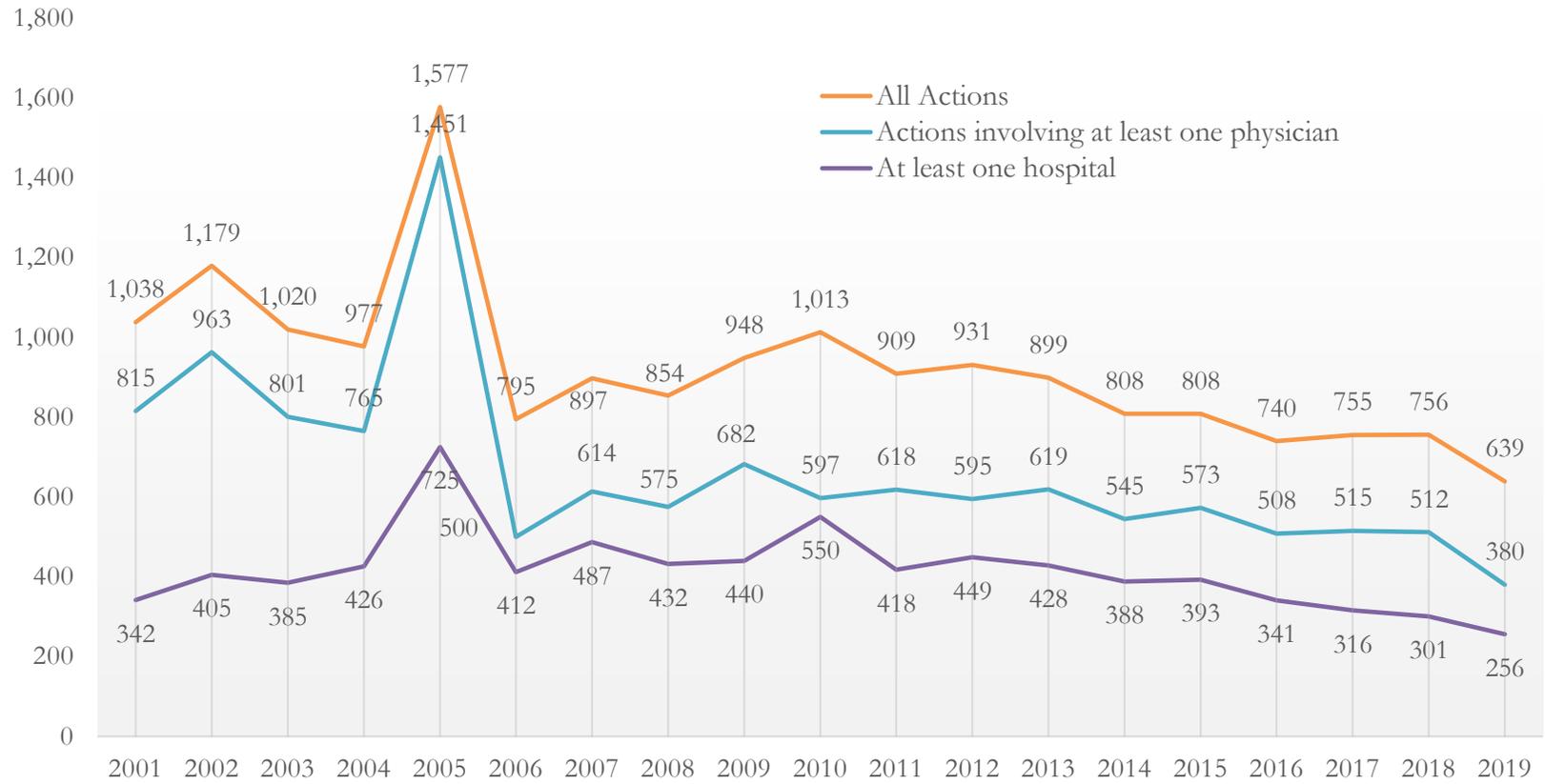
Physicians & Surgeons



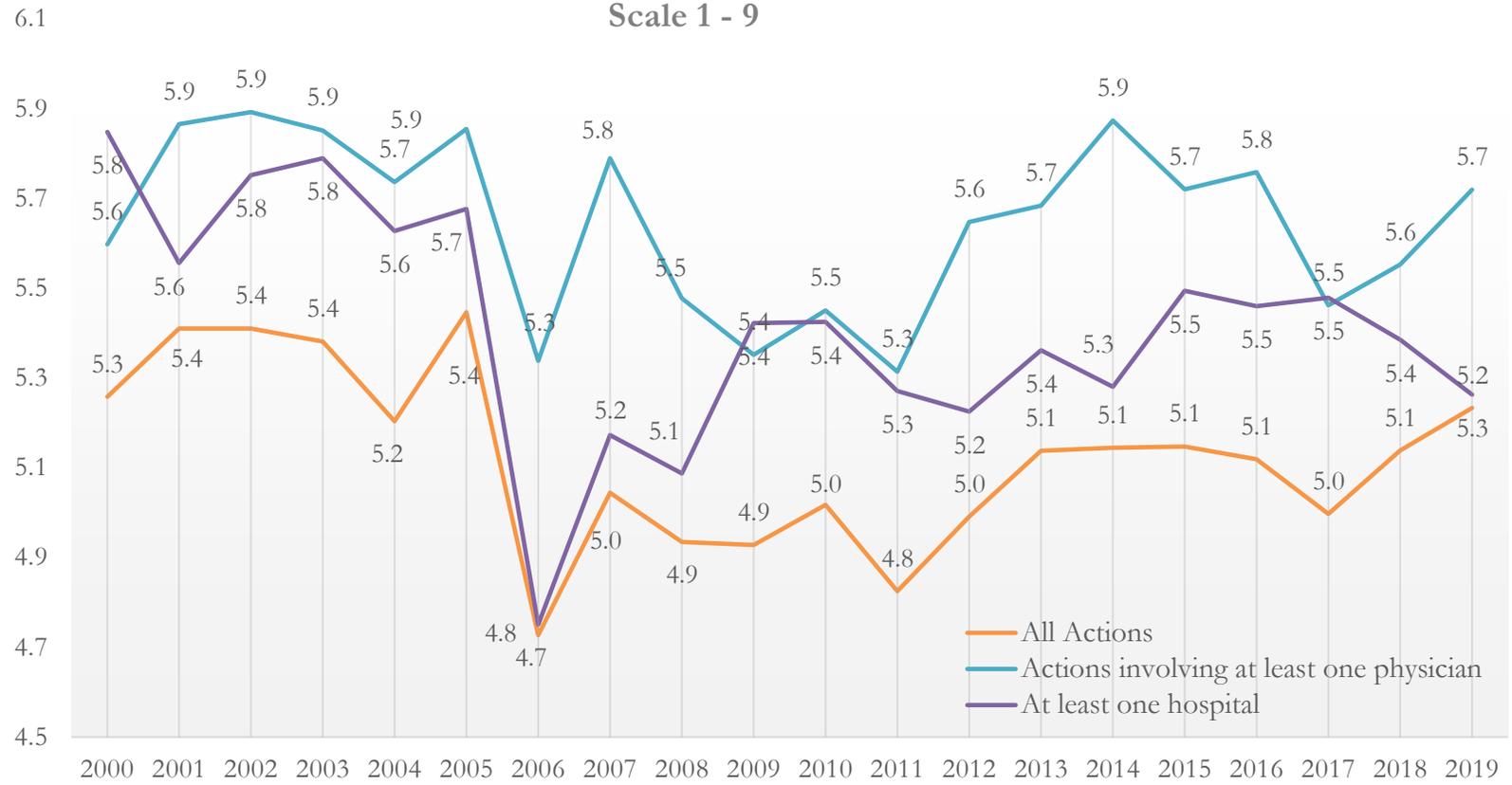
Hospitals



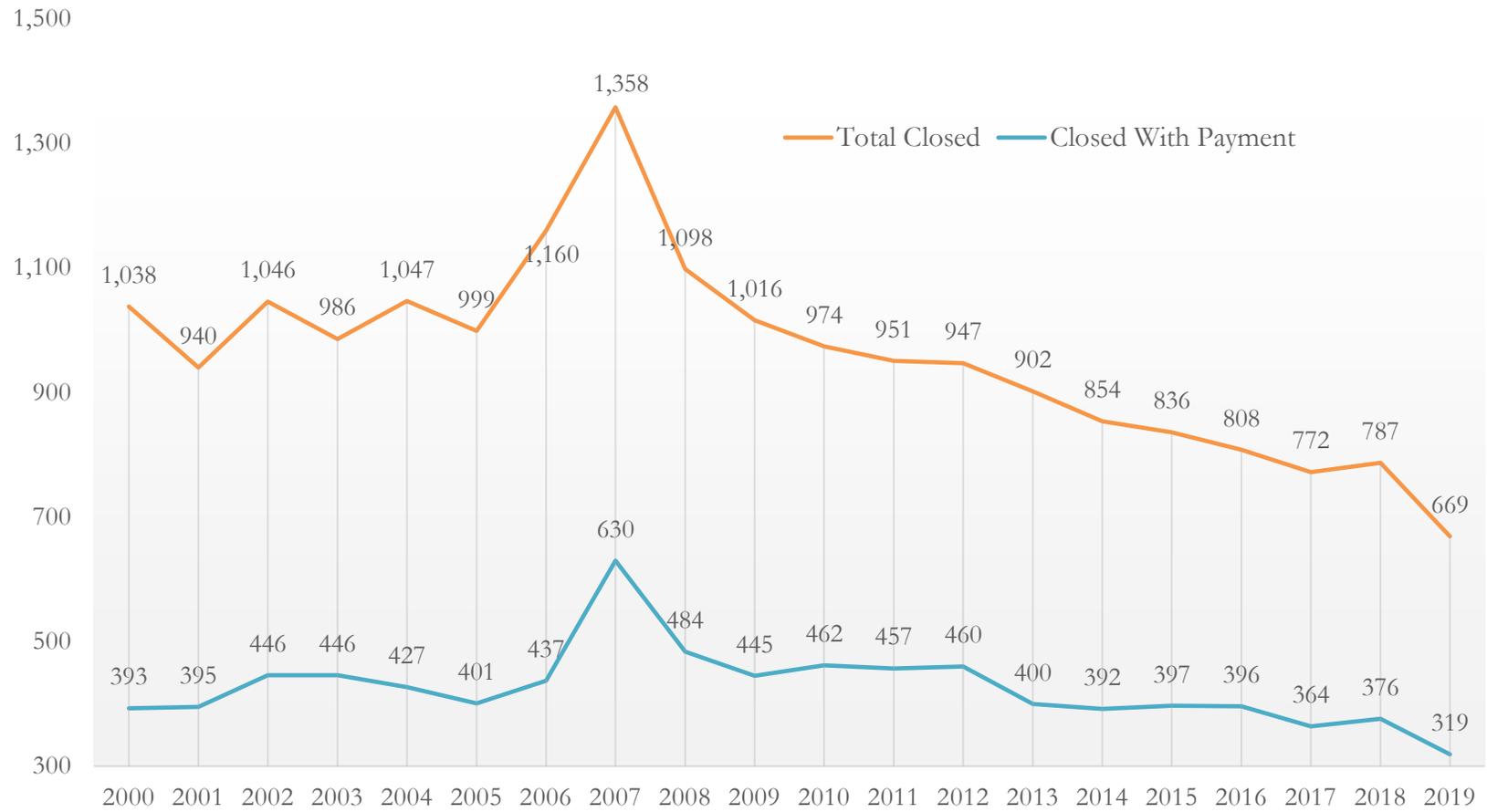
Number of Individuals Bringing Actions During Year



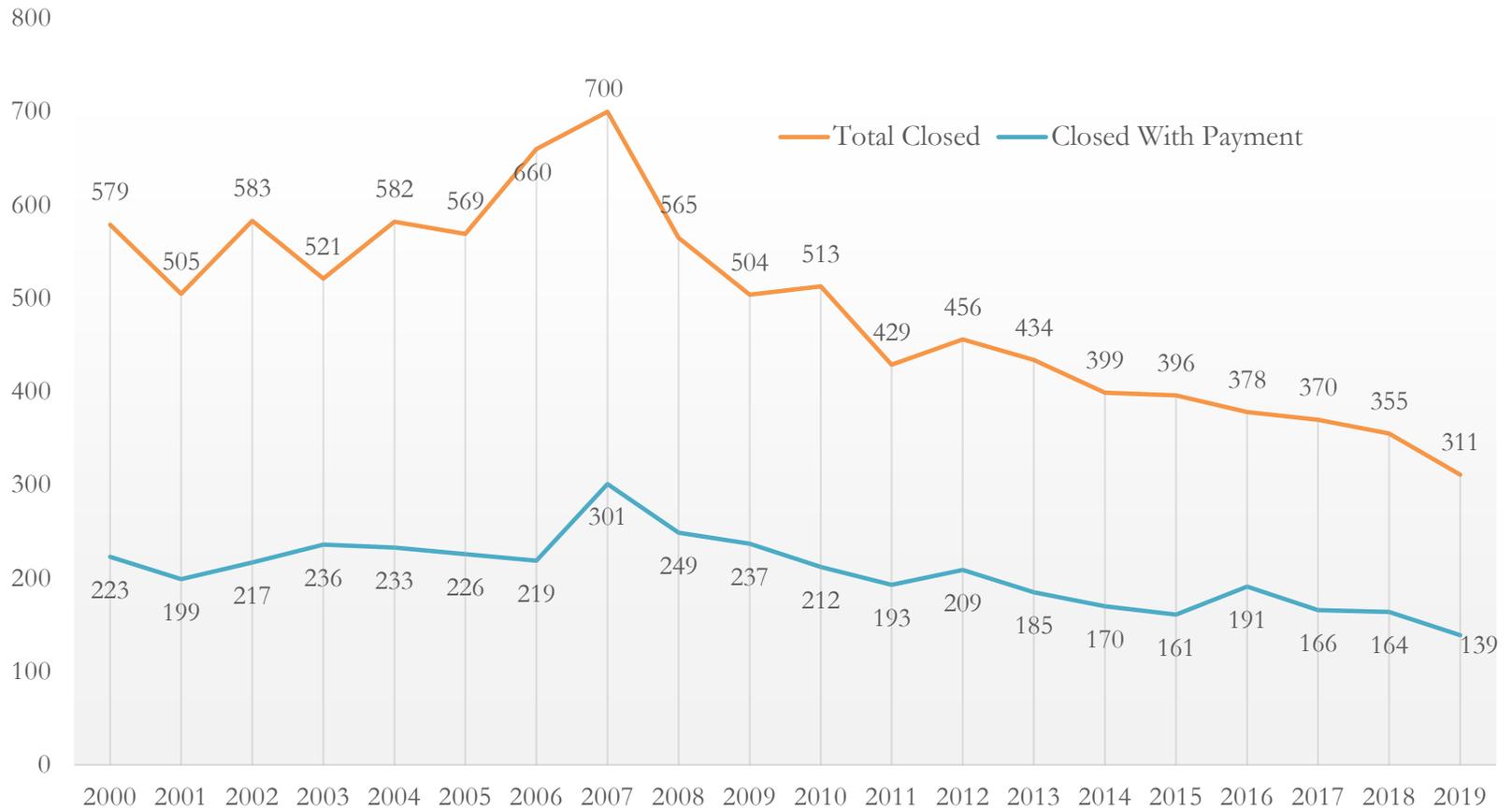
Average Injury Severity
Scale 1 - 9



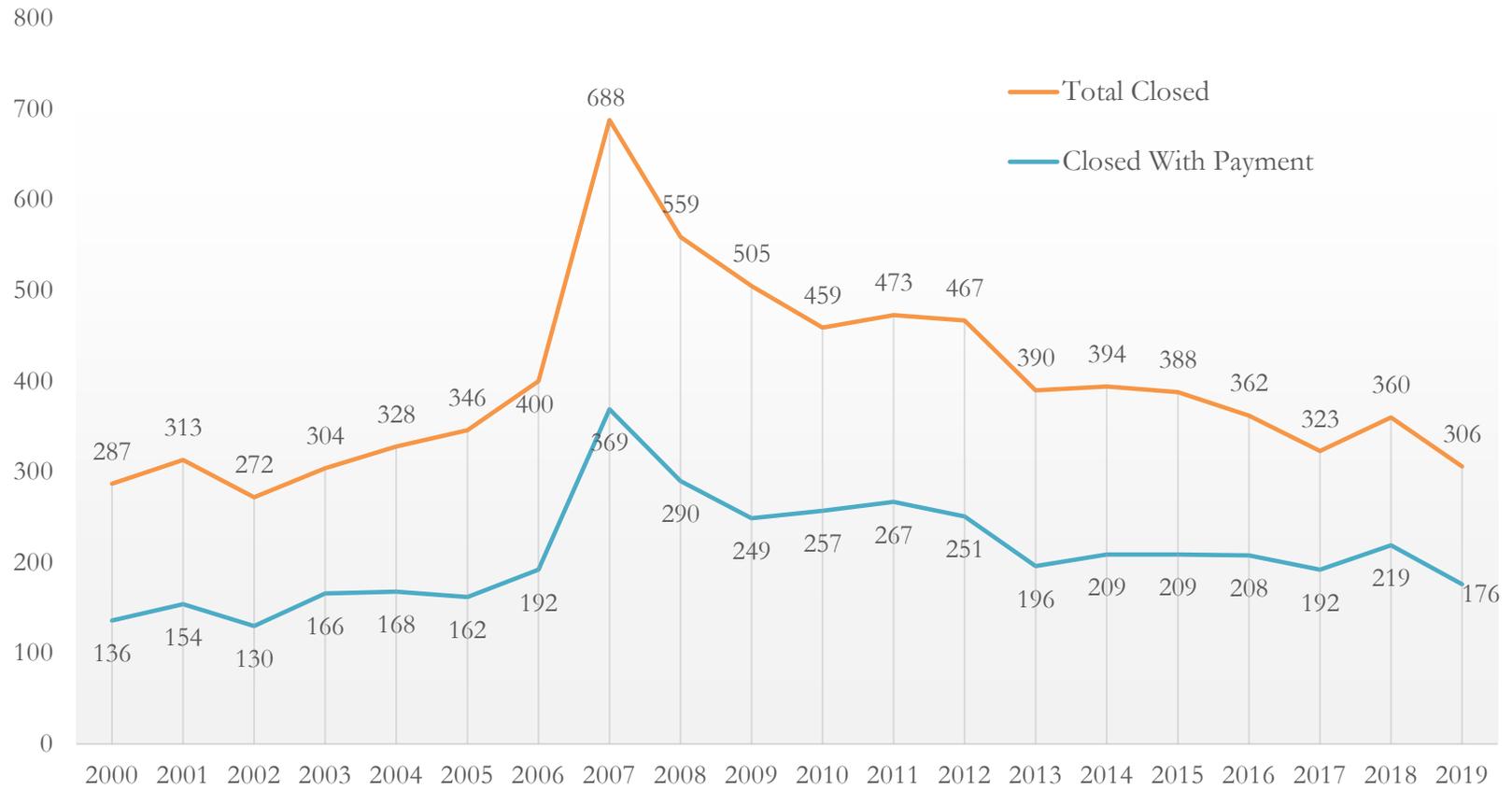
Closed Medical Liability Actions

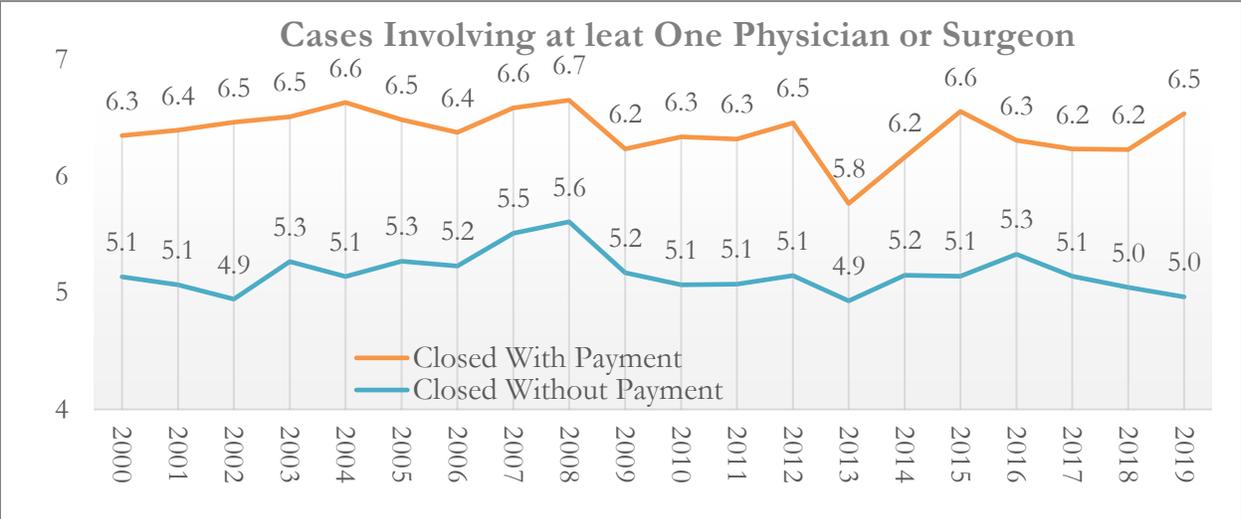
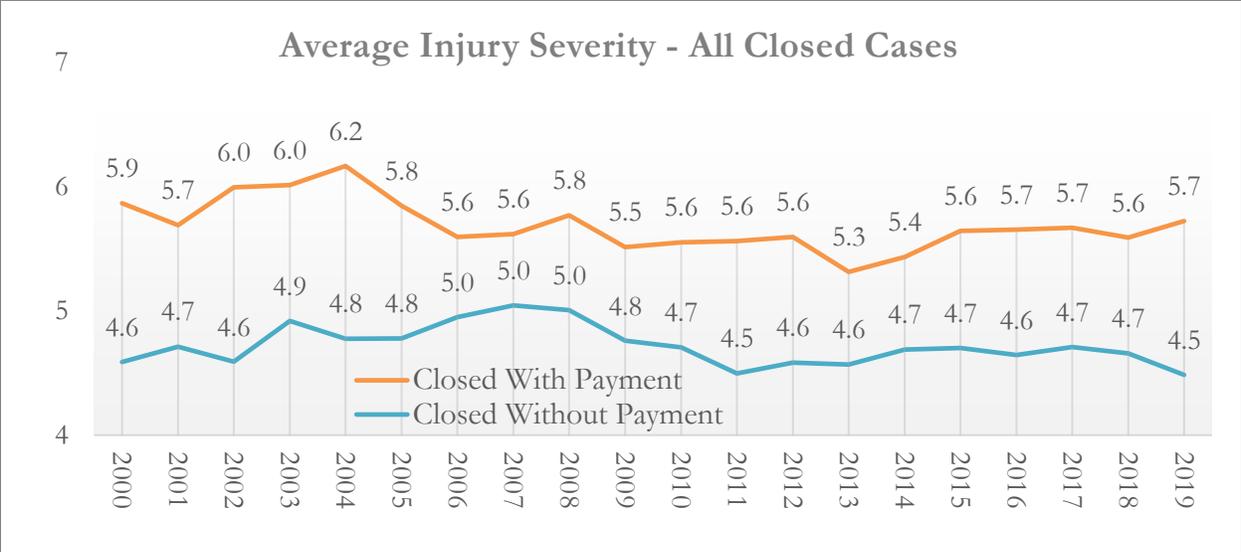


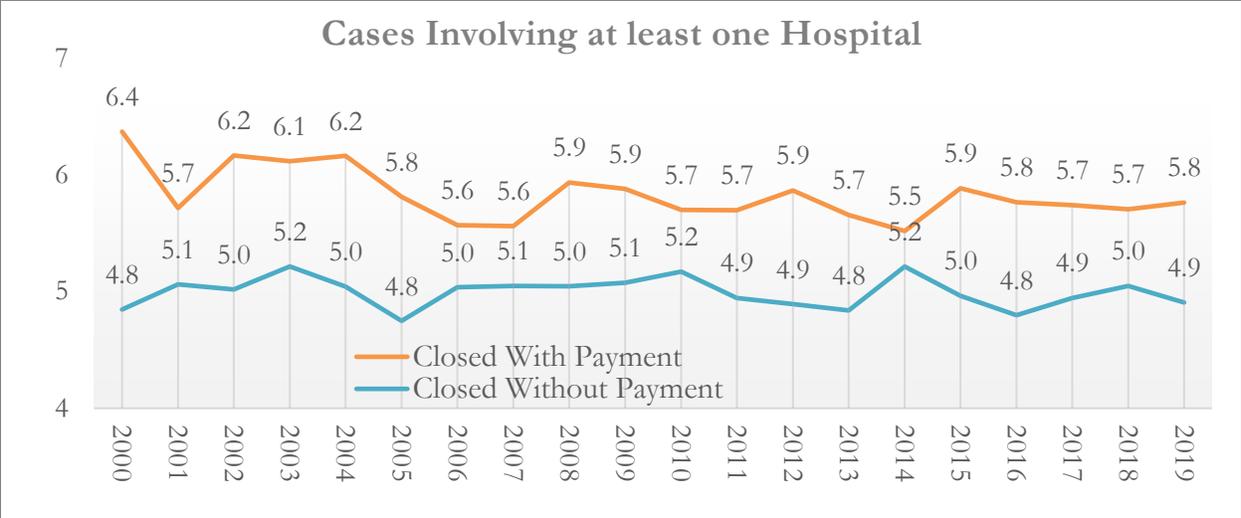
Closed Cases Involving at least one Physician



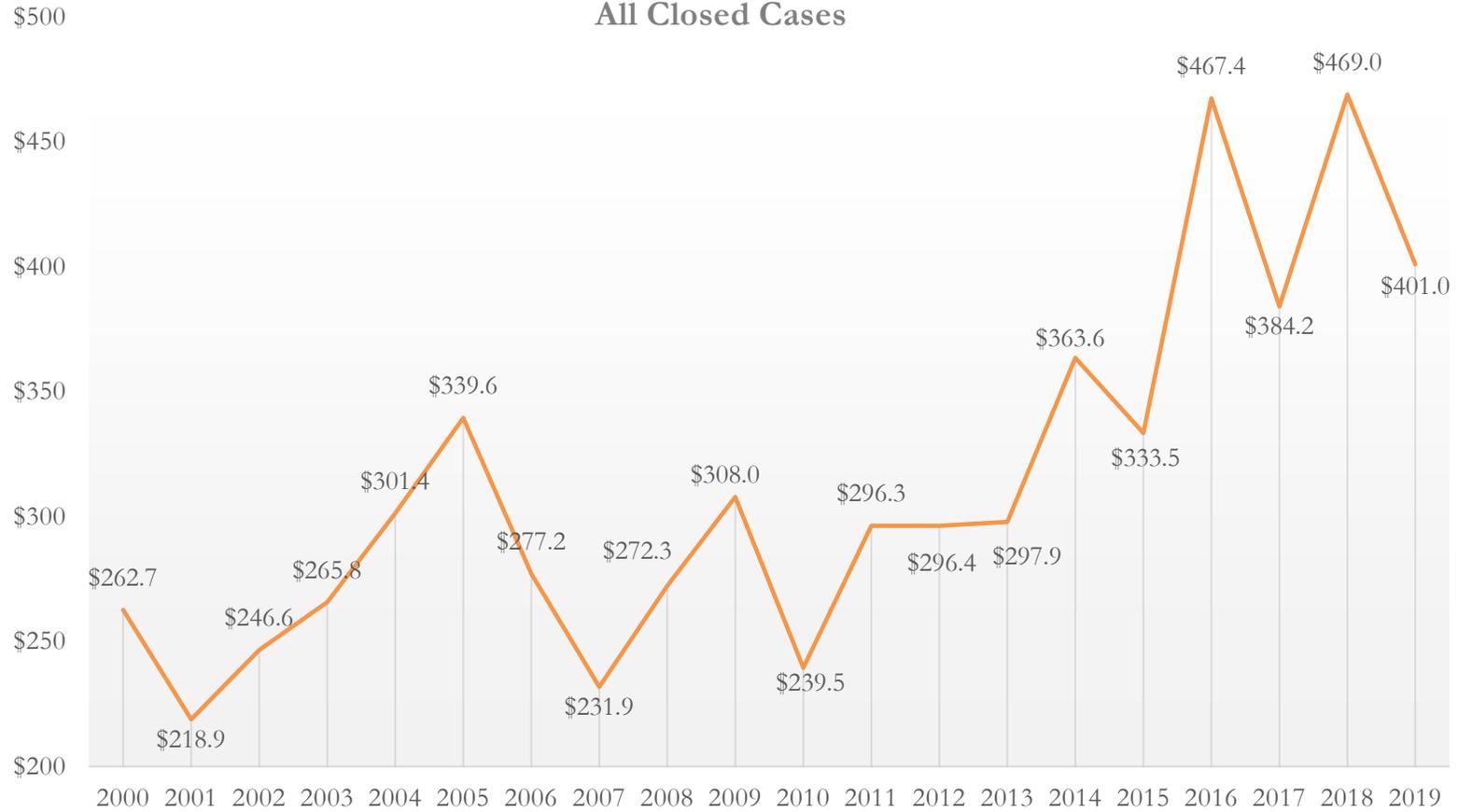
Closed Cases Involving at least One Hospital



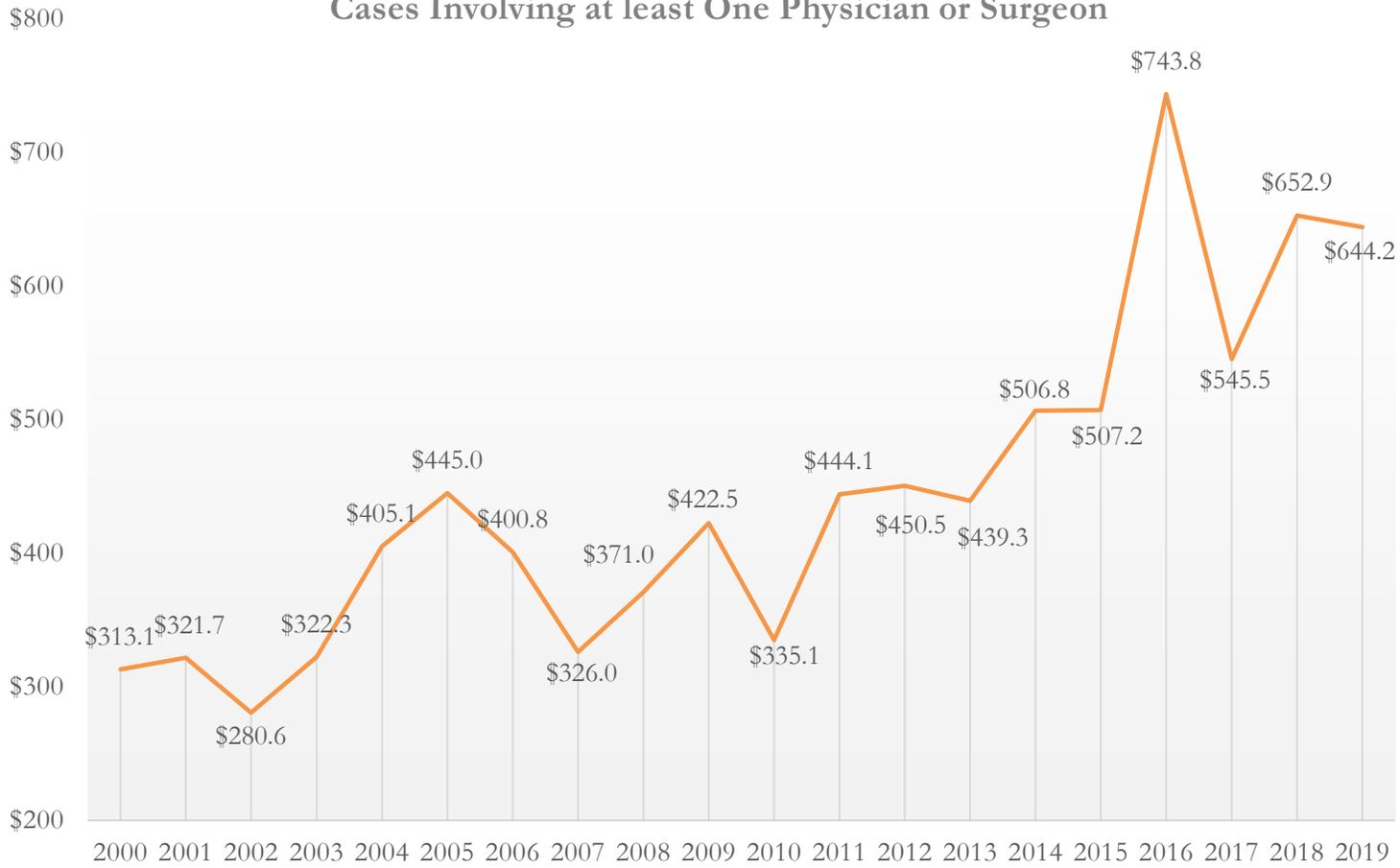




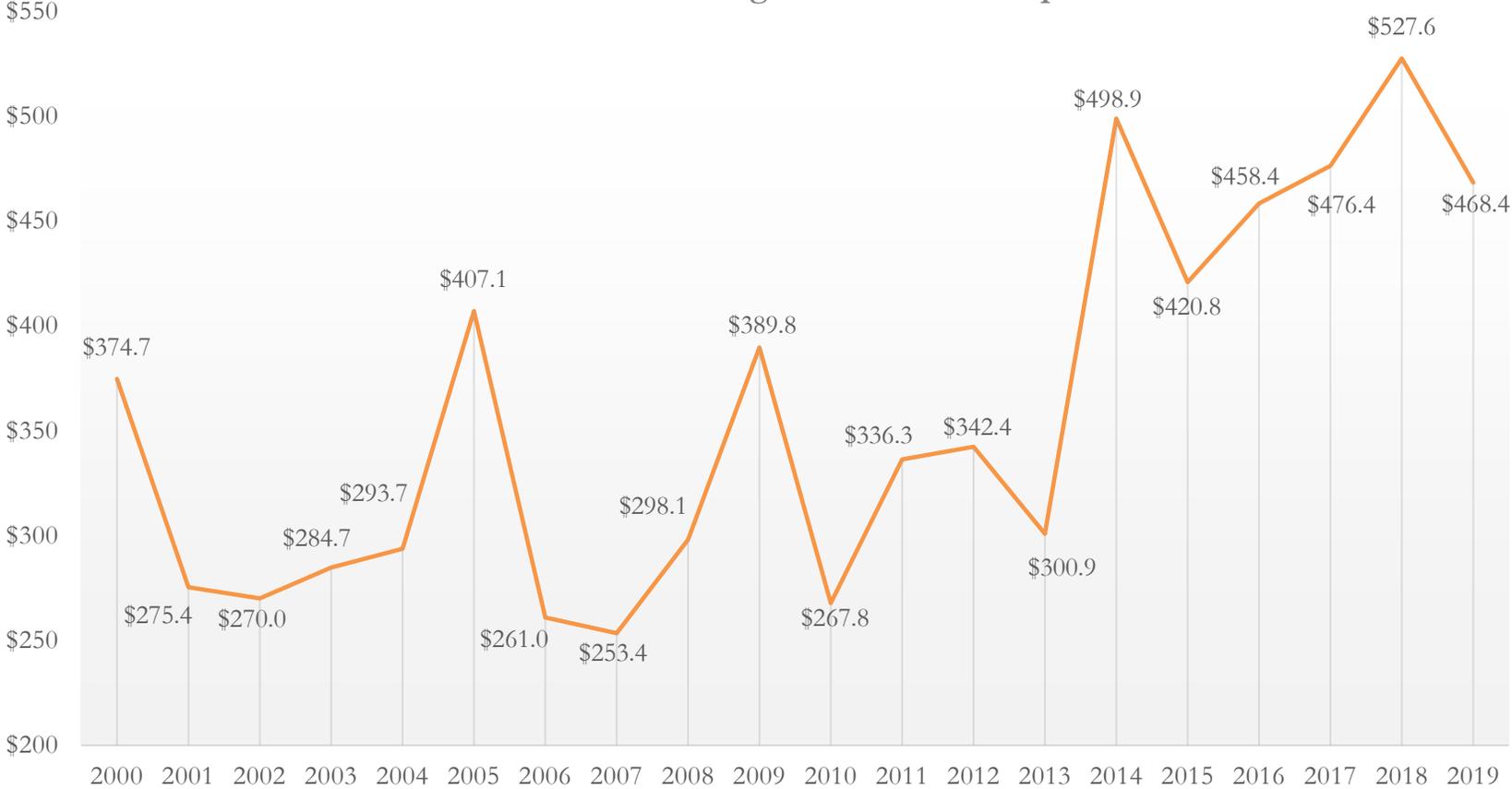
Average Indemnity Paid (in 000s) All Closed Cases



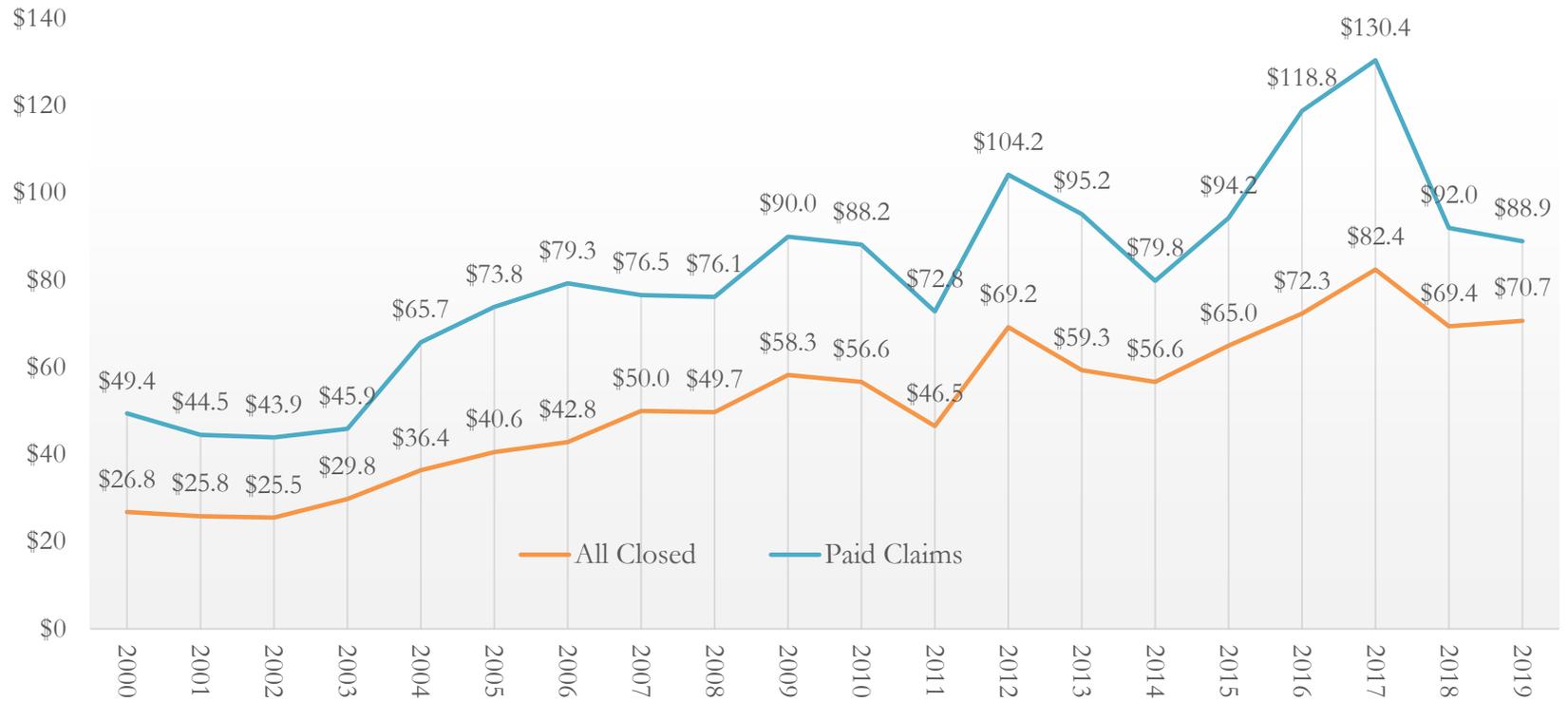
**Average Indemnity Paid (in 000's)
Cases Involving at least One Physician or Surgeon**



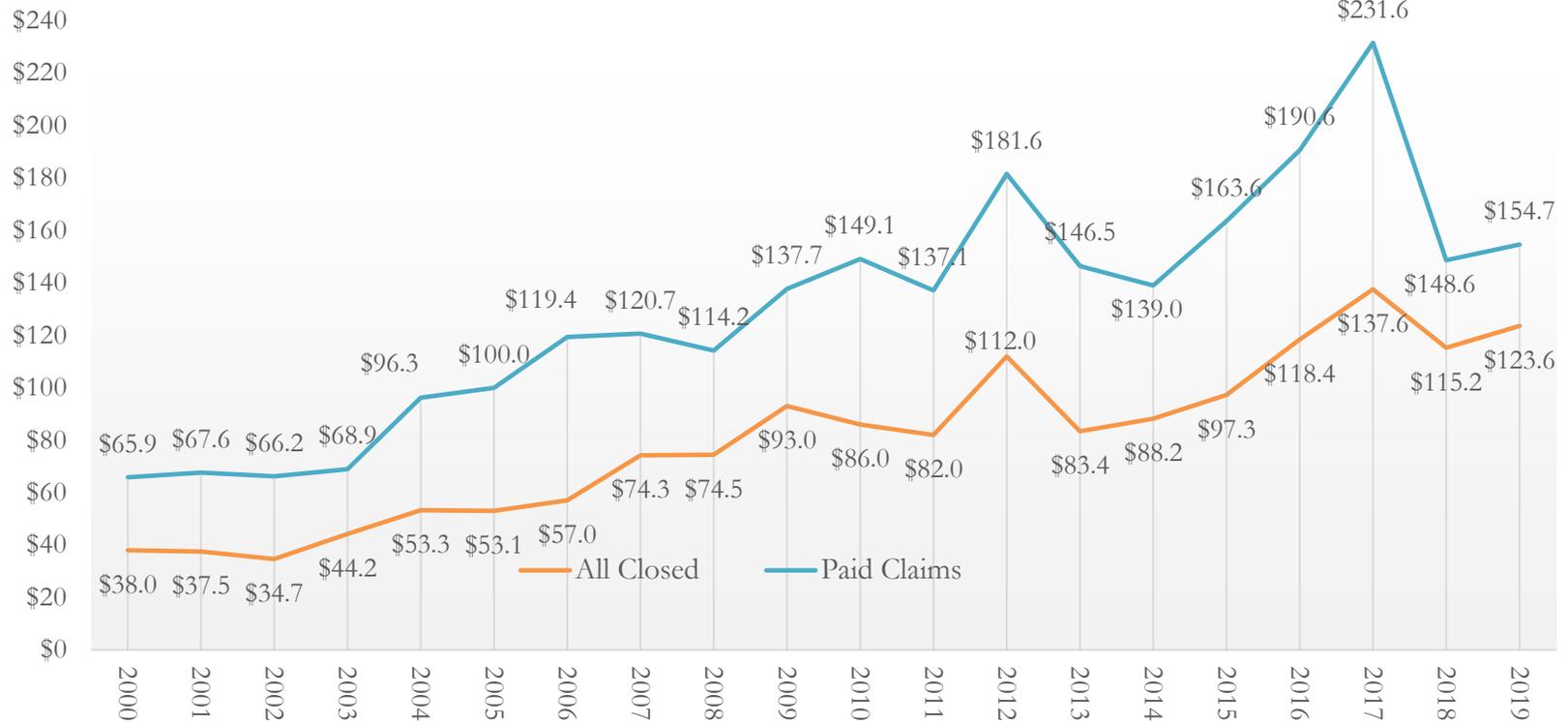
**Average Indemnity Paid (in 000's)
Cases Involving at Least One Hospital**



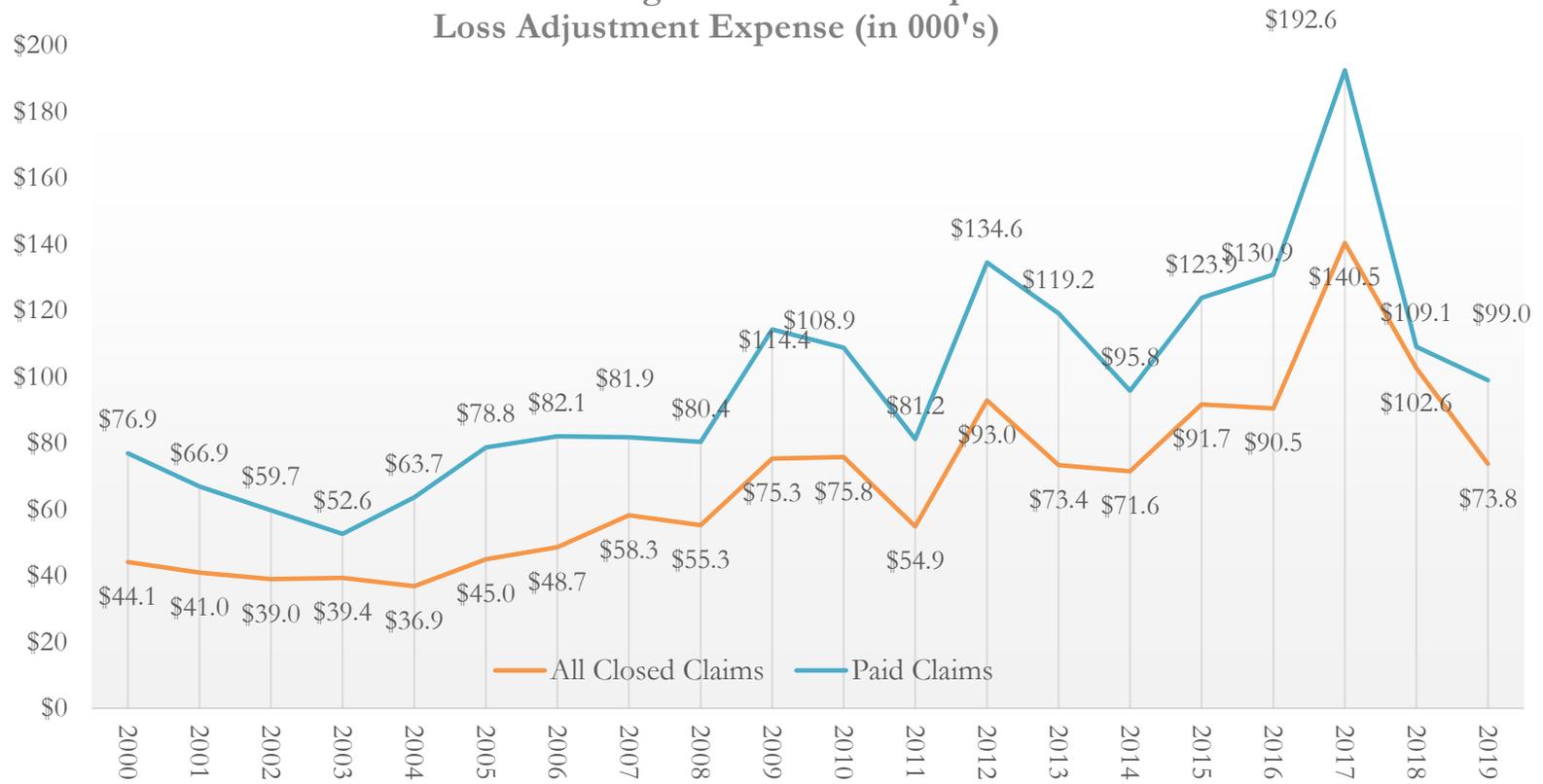
All Cases - Loss Adjustment Expense (in \$000's)



Cases With A Least One Physician or Surgeon
Loss Adjustment Expense (in 000's)



**Cases Involving at Least One Hospital
Loss Adjustment Expense (in 000's)**



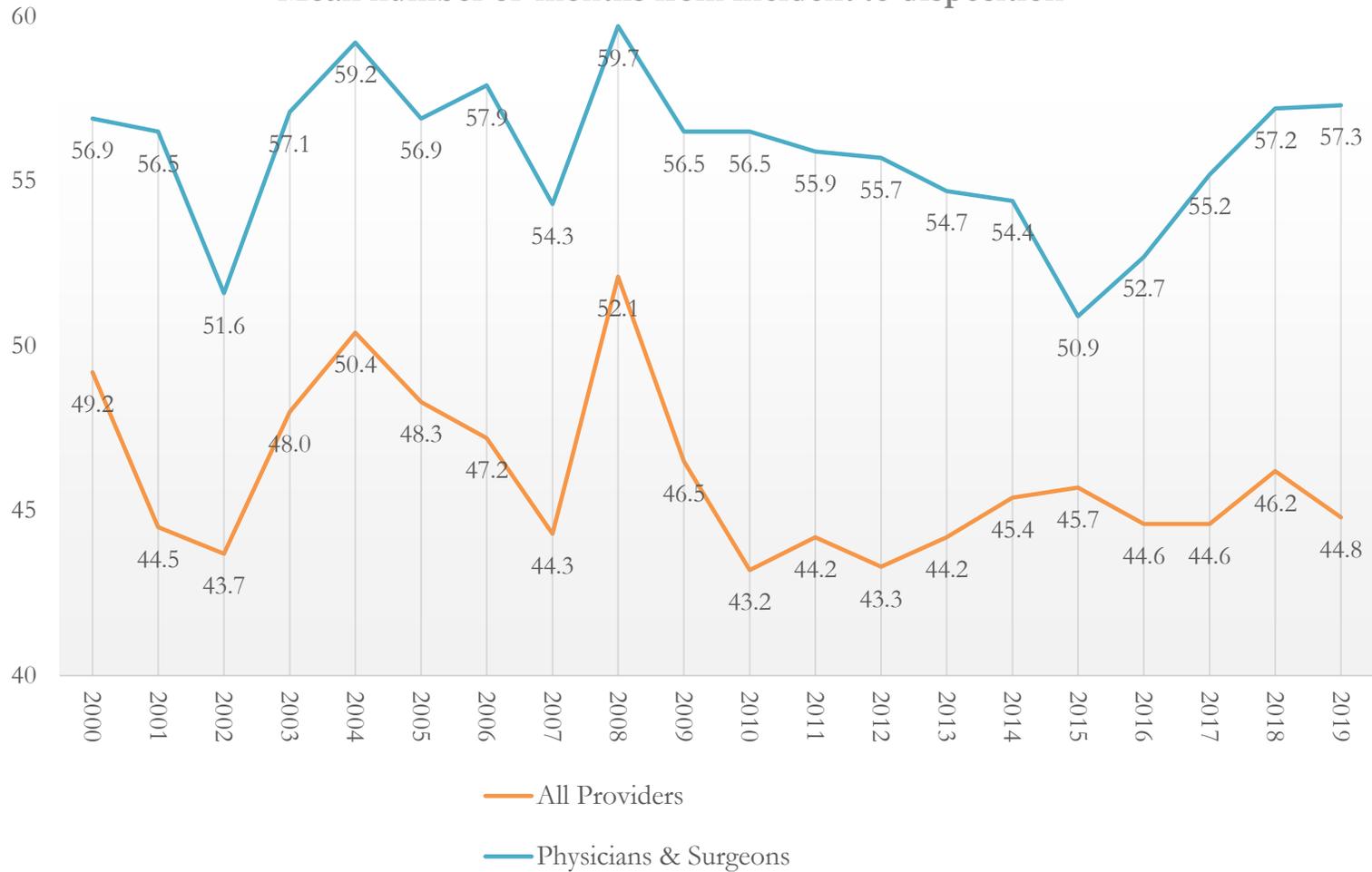
Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Adair	28	17	\$5,713,625	\$336,096
Andrew	1	1	\$250,000	\$250,000
Atchison	5	4	\$1,045,742	\$261,436
Audrain	27	12	\$2,705,613	\$225,468
Barry	8	5	\$1,839,203	\$367,841
Barton	3	2	\$225,000	\$112,500
Bates	3	3	\$1,400,000	\$466,667
Benton	3	1	\$25,000	\$25,000
Bollinger	1	0	\$0	\$0
Boone	198	110	\$89,770,457	\$816,095
Buchanan	120	70	\$36,339,018	\$519,129
Butler	44	25	\$8,629,300	\$345,172
Caldwell	0	0	\$0	\$0
Callaway	11	4	\$930,000	\$232,500
Camden	58	31	\$8,968,754	\$289,315
Cape Girardeau	88	41	\$15,952,991	\$389,097
Carroll	6	4	\$1,410,000	\$352,500
Carter	1	0	\$0	\$0
Cass	47	27	\$7,172,662	\$265,654
Cedar	4	1	\$250,000	\$250,000
Chariton	1	0	\$0	\$0
Christian	3	2	\$245,000	\$122,500
Clark	0	0	\$0	\$0
Clay	231	109	\$35,606,666	\$326,667
Clinton	19	10	\$3,502,500	\$350,250
Cole	133	46	\$16,480,558	\$358,273
Cooper	2	1	\$105,000	\$105,000
Crawford	13	6	\$367,500	\$61,250
Dade	1	0	\$0	\$0
Dallas	2	1	\$200,000	\$200,000
Daviess	1	1	\$251,410	\$251,410
DeKalb	2	2	\$150,000	\$75,000
Dent	4	2	\$250,000	\$125,000
Douglas	1	0	\$0	\$0
Dunklin	25	13	\$10,396,755	\$799,750
Franklin	30	9	\$5,376,011	\$597,335
Gasconade	2	0	\$0	\$0
Gentry	6	3	\$753,815	\$251,272
Greene	405	244	\$114,978,300	\$471,223

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	17	9	\$3,504,498	\$389,389
Hickory	2	1	\$125,000	\$125,000
Holt	1	1	\$135,000	\$135,000
Howard	1	0	\$0	\$0
Howell	28	18	\$10,509,360	\$583,853
Iron	2	1	\$300,000	\$300,000
Jackson	901	526	\$262,252,616	\$498,579
Jasper	198	131	\$75,569,463	\$576,866
Jefferson	71	28	\$3,335,000	\$119,107
Johnson	29	18	\$5,349,500	\$297,194
Knox	3	2	\$70,000	\$35,000
Laclede	14	7	\$2,476,495	\$353,785
Lafayette	16	11	\$2,217,500	\$201,591
Lawrence	11	7	\$1,927,500	\$275,357
Lewis	2	1	\$142,000	\$142,000
Lincoln	4	1	\$67,500	\$67,500
Linn	7	4	\$840,000	\$210,000
Livingston	8	5	\$1,855,000	\$371,000
McDonald	1	0	\$0	\$0
Macon	3	0	\$0	\$0
Madison	6	4	\$2,046,689	\$511,672
Maries	1	0	\$0	\$0
Marion	23	11	\$9,974,500	\$906,773
Mercer	0	0	\$0	\$0
Miller	3	0	\$0	\$0
Mississippi	4	2	\$110,000	\$55,000
Moniteau	3	1	\$10,000	\$10,000
Monroe	0	0	\$0	\$0
Montgomery	1	0	\$0	\$0
Morgan	2	1	\$110,000	\$110,000
New Madrid	2	0	\$0	\$0
Newton	26	14	\$5,857,000	\$418,357
Nodaway	13	6	\$3,920,600	\$653,433
Oregon	1	1	\$75,000	\$75,000
Osage	1	0	\$0	\$0
Ozark	0	0	\$0	\$0
Pemiscot	9	4	\$667,500	\$166,875

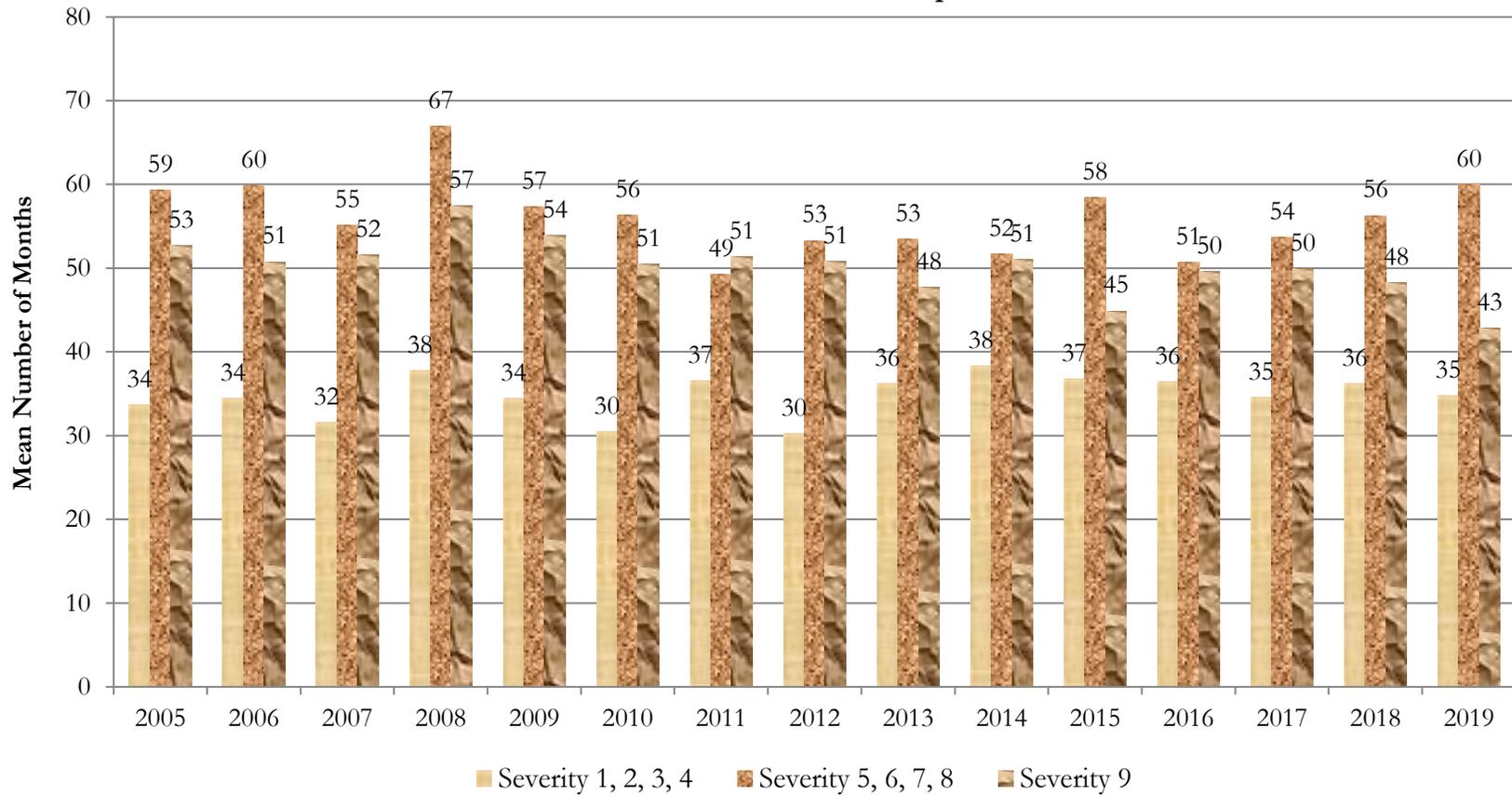
Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Perry	5	1	\$525,000	\$525,000
Pettis	18	13	\$3,902,000	\$300,154
Phelps	47	22	\$3,825,850	\$173,902
Pike	10	2	\$2,230,000	\$1,115,000
Platte	39	21	\$7,620,749	\$362,893
Polk	23	11	\$3,801,152	\$345,559
Pulaski	6	4	\$1,303,750	\$325,938
Putnam	1	0	\$0	\$0
Ralls	2	1	\$50,000	\$50,000
Randolph	12	8	\$2,955,000	\$369,375
Ray	5	4	\$829,500	\$207,375
Reynolds	1	1	\$300,000	\$300,000
Ripley	6	2	\$362,500	\$181,250
Saint Charles	149	65	\$15,284,863	\$235,152
Saint Clair	11	6	\$1,610,000	\$268,333
Sainte Genevieve	7	3	\$2,300,000	\$766,667
Saint Francois	40	21	\$9,759,873	\$464,756
Saint Louis	1,179	528	\$192,643,050	\$364,854
Saline	22	12	\$5,693,099	\$474,425
Schuyler	0	0	\$0	\$0
Scotland	3	1	\$500,000	\$500,000
Scott	43	25	\$10,304,089	\$412,164
Shannon	1	1	\$80,000	\$80,000
Shelby	0	0	\$0	\$0
Stoddard	4	4	\$467,500	\$116,875
Stone	4	2	\$275,000	\$137,500
Sullivan	1	0	\$0	\$0
Taney	38	16	\$4,294,265	\$268,392
Texas	15	5	\$2,500,000	\$500,000
Vernon	10	10	\$5,287,500	\$528,750
Warren	1	1	\$70,000	\$70,000
Washington	7	2	\$700,000	\$350,000
Wayne	3	2	\$370,002	\$185,001
Webster	4	1	\$450,000	\$450,000
Worth	1	0	\$0	\$0
Wright	1	0	\$0	\$0
Saint Louis City	591	298	\$180,117,735	\$604,422
Appellate Court	3	0	\$0	\$0
Federal Court	255	42	\$16,990,257	\$404,530

Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Guaranty Fund	1	1	\$47,500	\$47,500
Out Of State	99	44	\$10,898,773	\$247,699

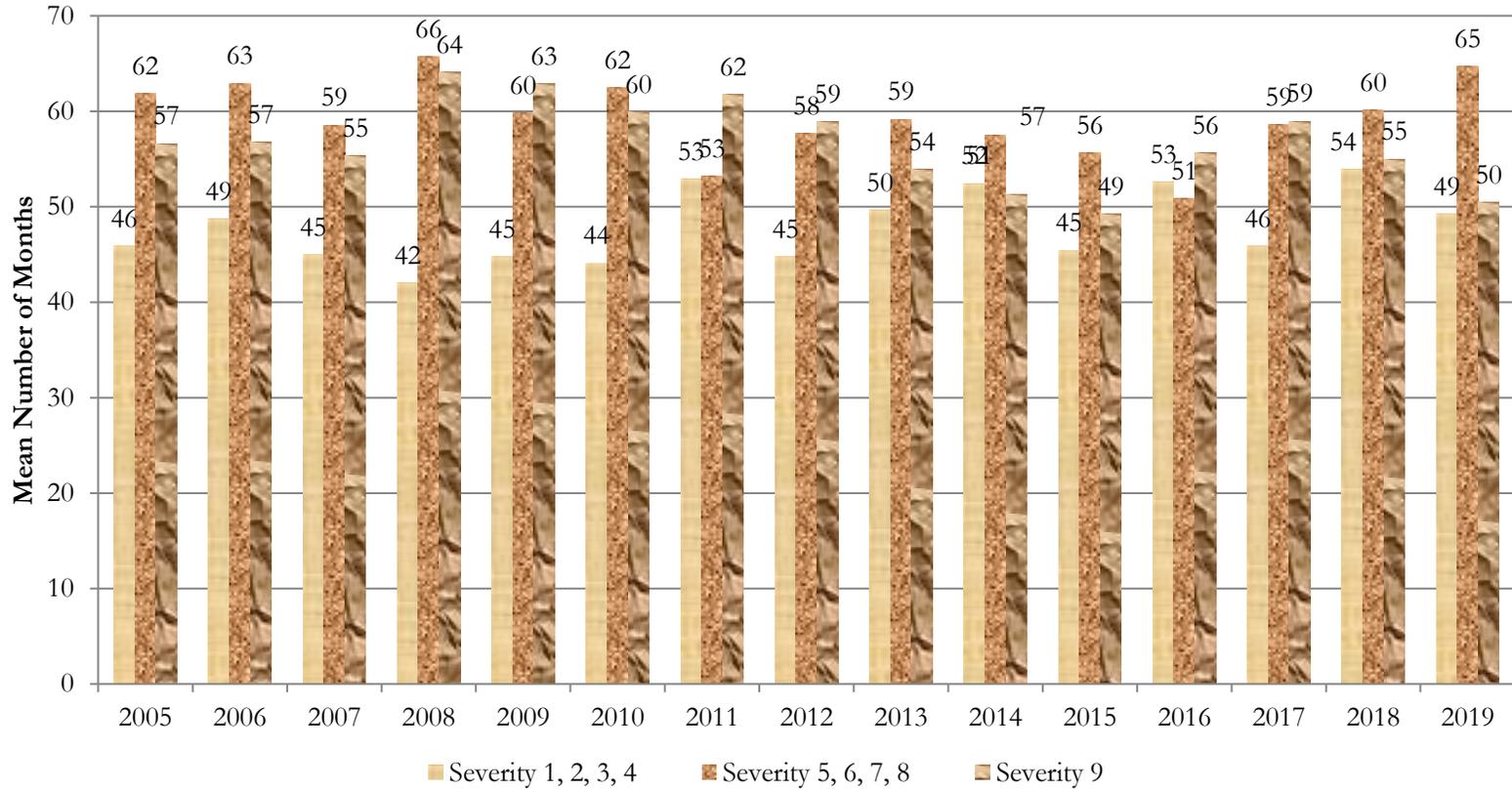
Closed With Payment
Mean number of months from incident to disposition



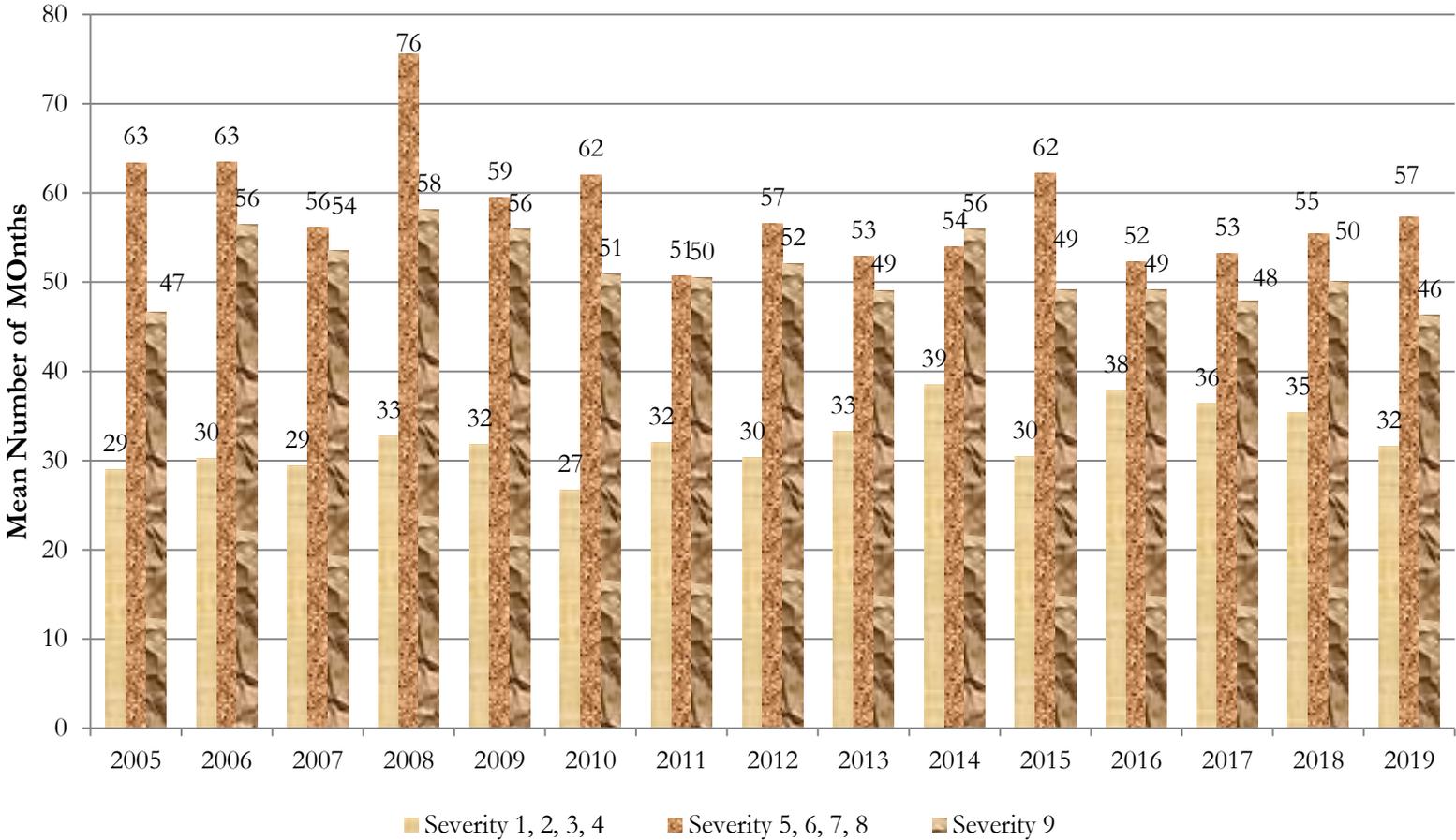
Bodily Injury Severity of Paid Claims - All Providers
Mean Number of Months from Incident to Disposition



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 2019

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	44	350	52.3%	\$0	0.0%	\$0	\$0	\$0	\$54,070
1,000 - 1,999	13	8	53.5%	\$9,078	0.0%	\$524	\$610	\$1,135	\$606
2,000 - 2,999	31	5	54.3%	\$11,543	0.0%	\$653	\$1,656	\$2,309	\$59,381
3,000 - 3,999	19	2	54.6%	\$6,500	0.0%	\$1,775	\$1,475	\$3,250	\$433
5,000 - 5,999	35	7	55.6%	\$35,500	0.1%	\$1,636	\$3,436	\$5,071	\$4,979
7,000 - 7,999	31	3	56.1%	\$22,000	0.1%	\$2,500	\$4,833	\$7,333	\$4,562
8,000 - 8,999	13	2	56.4%	\$16,500	0.1%	\$2,280	\$5,970	\$8,250	\$3,936
9,000 - 9,999	5	2	56.7%	\$18,488	0.1%	\$9,244	\$0	\$9,244	\$0
10,000 - 19,999	28	8	57.9%	\$100,500	0.2%	\$5,692	\$6,870	\$12,563	\$8,045
20,000 - 29,999	40	11	59.5%	\$257,500	0.4%	\$5,609	\$17,800	\$23,409	\$16,635
30,000 - 39,999	48	10	61.0%	\$327,500	0.6%	\$10,892	\$21,858	\$32,750	\$105,917
40,000 - 49,999	23	2	61.3%	\$80,000	0.7%	\$20,000	\$20,000	\$40,000	\$0
50,000 - 59,999	37	8	62.5%	\$400,000	1.0%	\$13,318	\$36,682	\$50,000	\$103,732
60,000 - 69,999	47	8	63.7%	\$495,000	1.4%	\$16,825	\$45,050	\$61,875	\$28,874
70,000 - 79,999	39	13	65.6%	\$962,500	2.1%	\$17,035	\$51,235	\$74,038	\$61,345
80,000 - 89,999	47	3	66.1%	\$252,500	2.3%	\$40,000	\$44,167	\$84,167	\$25,398
90,000 - 99,999	39	6	67.0%	\$559,999	2.8%	\$47,133	\$46,201	\$93,333	\$95,445
100,000 -199,999	46	50	74.4%	\$6,780,000	8.1%	\$62,448	\$73,152	\$135,600	\$58,542
200,000 - 299,999	46	50	81.9%	\$11,386,250	17.0%	\$83,725	\$144,000	\$227,725	\$59,510
300,000 - 399,999	51	35	87.1%	\$11,526,250	26.0%	\$131,260	\$197,490	\$329,321	\$86,117
400,000 - 499,999	37	21	90.3%	\$9,007,008	33.0%	\$161,763	\$267,142	\$428,905	\$63,970
500,000 - 999,999	57	32	95.1%	\$22,314,000	50.5%	\$265,438	\$431,875	\$697,313	\$180,696
1,000,000 - 1,999,999	51	25	98.8%	\$32,214,749	75.7%	\$539,213	\$749,377	\$1,288,590	\$257,224
2,000,000 - 2,999,999	59	6	99.7%	\$14,150,000	86.7%	\$996,270	\$1,212,063	\$2,358,333	\$203,001
Over 4,000,000	103	2	100.0%	\$17,000,000	100.0%	\$4,057,873	\$4,442,128	\$8,500,000	\$245,434
Total	45	669	.	\$127,933,365	.	\$78,538	\$111,205	\$191,231	\$70,671
Total (Paid Only)	45	319	.	\$127,933,365	.	\$164,709	\$233,217	\$401,045	\$88,886

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2019, 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	51	172	55.3%	\$0	0.0%	\$0	\$0	\$0	\$98,449
2,000 - 2,999	67	1	55.6%	\$2,000	0.0%	\$0	\$2,000	\$2,000	\$293,320
5,000 - 5,999	51	1	56.0%	\$5,000	0.0%	\$650	\$4,350	\$5,000	\$25,788
7,000 - 7,999	35	2	56.6%	\$15,000	0.0%	\$3,750	\$3,750	\$7,500	\$6,568
8,000 - 8,999	15	1	56.9%	\$8,000	0.0%	\$4,000	\$4,000	\$8,000	\$0
10,000 - 19,999	32	1	57.2%	\$10,000	0.0%	\$10,000	\$0	\$10,000	\$1,666
20,000 - 29,999	48	3	58.2%	\$75,000	0.1%	\$4,667	\$20,333	\$25,000	\$34,481
30,000 - 39,999	61	3	59.2%	\$97,500	0.2%	\$840	\$31,660	\$32,500	\$331,546
50,000 - 59,999	54	4	60.5%	\$200,000	0.5%	\$12,500	\$37,500	\$50,000	\$206,631
60,000 - 69,999	68	2	61.1%	\$120,000	0.6%	\$31,800	\$28,200	\$60,000	\$87,358
70,000 - 79,999	67	3	62.1%	\$217,500	0.8%	\$36,167	\$36,333	\$72,500	\$210,469
90,000 - 99,999	71	2	62.7%	\$185,000	1.0%	\$14,000	\$78,500	\$92,500	\$274,667
100,000 -199,999	60	14	67.2%	\$1,917,500	3.2%	\$69,675	\$67,290	\$136,964	\$115,363
200,000 - 299,999	59	21	74.0%	\$4,898,750	8.7%	\$70,766	\$162,507	\$233,274	\$101,729
300,000 - 399,999	65	19	80.1%	\$6,280,000	15.7%	\$130,461	\$199,013	\$330,526	\$129,616
400,000 - 499,999	40	12	83.9%	\$5,172,500	21.5%	\$194,293	\$236,748	\$431,042	\$60,489
500,000 - 999,999	59	24	91.6%	\$17,479,000	41.0%	\$302,209	\$426,083	\$728,292	\$219,523
1,000,000 - 1,999,999	51	19	97.8%	\$24,214,749	68.0%	\$683,193	\$591,267	\$1,274,460	\$221,728
2,000,000 - 2,999,999	64	5	99.4%	\$11,650,000	81.0%	\$1,095,524	\$1,054,476	\$2,330,000	\$194,134
Over 4,000,000	103	2	100.0%	\$17,000,000	100.0%	\$4,057,873	\$4,442,128	\$8,500,000	\$245,434
Total	54	311	.	\$89,547,499	.	\$133,079	\$151,897	\$287,934	\$123,569
Total (Paid Only)	57	139	.	\$89,547,499	.	\$297,753	\$339,855	\$644,227	\$154,654

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2019, 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	51	130	42.5%	\$0	0.0%	\$0	\$0	\$0	\$39,609
1,000 - 1,999	13	7	44.8%	\$8,286	0.0%	\$486	\$698	\$1,184	\$179
2,000 - 2,999	22	4	46.1%	\$9,543	0.0%	\$816	\$1,570	\$2,386	\$897
3,000 - ,3999	14	1	46.4%	\$3,000	0.0%	\$1,800	\$1,200	\$3,000	\$98
5,000 - 5,999	41	3	47.4%	\$15,000	0.0%	\$1,933	\$3,067	\$5,000	\$3,021
9,000 - 9,999	5	2	48.0%	\$18,488	0.1%	\$9,244	\$0	\$9,244	\$0
10,000 - 19,999	34	3	49.0%	\$44,000	0.1%	\$3,267	\$11,400	\$14,667	\$14,154
20,000 - 29,999	42	9	52.0%	\$207,500	0.4%	\$5,300	\$17,756	\$23,056	\$16,185
30,000 - 39,999	62	4	53.3%	\$130,000	0.5%	\$11,600	\$20,900	\$32,500	\$14,978
40,000 - 49,999	23	2	53.9%	\$80,000	0.6%	\$20,000	\$20,000	\$40,000	\$0
50,000 - 59,999	37	5	55.6%	\$250,000	0.9%	\$10,000	\$40,000	\$50,000	\$106,431
60,000 - 69,999	47	5	57.2%	\$310,000	1.3%	\$14,920	\$47,080	\$62,000	\$21,871
70,000 - 79,999	40	9	60.1%	\$667,500	2.1%	\$19,000	\$55,167	\$74,167	\$82,931
80,000 - 89,999	55	2	60.8%	\$165,000	2.3%	\$60,000	\$22,500	\$82,500	\$23,746
90,000 - 99,999	23	4	62.1%	\$374,999	2.8%	\$63,699	\$30,051	\$93,750	\$5,834
100,000 -199,999	43	23	69.6%	\$3,002,500	6.4%	\$66,093	\$64,450	\$130,543	\$62,049
200,000 - 299,999	49	19	75.8%	\$4,495,000	11.9%	\$71,839	\$164,739	\$236,579	\$73,684
300,000 - 399,999	44	23	83.3%	\$7,666,250	21.2%	\$137,954	\$195,361	\$333,315	\$95,054
400,000 - 499,999	32	10	86.6%	\$4,344,508	26.4%	\$109,351	\$325,100	\$434,451	\$66,339
500,000 - 999,999	58	18	92.5%	\$12,505,000	41.6%	\$214,185	\$480,537	\$694,722	\$219,355
1,000,000 - 1,999,999	56	18	98.4%	\$22,990,000	69.5%	\$541,009	\$736,214	\$1,277,222	\$268,758
2,000,000 - 2,999,999	34	3	99.4%	\$8,150,000	79.4%	\$1,252,902	\$1,463,765	\$2,716,667	\$248,628
Over 4,000,000	103	2	100.0%	\$17,000,000	100.0%	\$4,057,873	\$4,442,128	\$8,500,000	\$245,434
Total	47	306	.	\$82,436,574	.	\$109,368	\$160,033	\$269,401	\$73,756
Total (Paid Only)	44	176	.	\$82,436,574	.	\$190,151	\$278,239	\$468,390	\$98,979

Summary by Indemnity Range Awarded to Each Injured Party, All Cases Closed in 2018

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	411	52.2%	\$0	0.0%	\$0	\$0	\$0	\$48,818
1,000 - 1,999	9	7	53.1%	\$4,927	0.0%	\$332	\$371	\$704	\$106
2,000 - 2,999	13	3	53.5%	\$7,500	0.0%	\$917	\$1,583	\$2,500	\$116
3,000 - ,3999	5	1	53.6%	\$3,500	0.0%	\$0	\$3,500	\$3,500	\$0
4,000 - 4,999	63	2	53.9%	\$8,250	0.0%	\$1,063	\$1,063	\$4,125	\$9,249
5,000 - 5,999	28	5	54.5%	\$26,317	0.0%	\$1,600	\$3,663	\$5,263	\$38,043
6,000 - 6,999	12	3	54.9%	\$19,200	0.0%	\$4,647	\$1,753	\$6,400	\$1,590
7,000 - 7,999	33	4	55.4%	\$29,500	0.1%	\$5,198	\$2,178	\$7,375	\$3,729
8,000 - 8,999	13	2	55.7%	\$16,000	0.1%	\$2,240	\$5,760	\$8,000	\$127
10,000 - 19,999	30	15	57.6%	\$202,576	0.2%	\$4,356	\$8,871	\$13,505	\$14,442
20,000 - 29,999	34	22	60.4%	\$524,900	0.5%	\$8,550	\$14,173	\$23,859	\$11,573
30,000 - 39,999	66	8	61.4%	\$248,133	0.6%	\$18,166	\$12,851	\$31,017	\$44,092
40,000 - 49,999	28	7	62.3%	\$299,500	0.8%	\$17,679	\$25,107	\$42,786	\$21,205
50,000 - 59,999	43	13	63.9%	\$664,500	1.2%	\$20,519	\$30,596	\$51,115	\$47,765
60,000 - 69,999	30	9	65.1%	\$558,500	1.5%	\$27,607	\$34,448	\$62,056	\$65,098
70,000 - 79,999	36	15	67.0%	\$1,115,349	2.1%	\$19,219	\$55,137	\$74,357	\$63,860
80,000 - 89,999	46	4	67.5%	\$333,833	2.3%	\$20,750	\$62,708	\$83,458	\$12,366
90,000 - 99,999	50	8	68.5%	\$735,000	2.7%	\$40,675	\$51,200	\$91,875	\$60,263
100,000 -199,999	46	56	75.6%	\$7,781,897	7.1%	\$57,625	\$75,806	\$138,962	\$84,511
200,000 - 299,999	50	55	82.6%	\$13,207,000	14.6%	\$99,222	\$140,906	\$240,127	\$88,913
300,000 - 399,999	42	39	87.6%	\$12,941,440	22.0%	\$104,571	\$216,150	\$331,832	\$66,518
400,000 - 499,999	53	18	89.8%	\$7,642,000	26.3%	\$162,781	\$261,775	\$424,556	\$95,031
500,000 - 999,999	69	41	95.0%	\$27,916,314	42.1%	\$287,580	\$390,867	\$680,886	\$155,135
1,000,000 - 1,999,999	54	21	97.7%	\$28,997,491	58.6%	\$802,925	\$577,908	\$1,380,833	\$216,845
2,000,000 - 2,999,999	60	9	98.9%	\$21,100,000	70.5%	\$1,091,527	\$1,252,917	\$2,344,444	\$202,019
3,000,000 - 3,999,999	56	4	99.4%	\$14,175,000	78.6%	\$2,313,215	\$1,230,535	\$3,543,750	\$447,852
Over 4,000,000	49	5	100.0%	\$37,773,768	100.0%	\$3,540,754	\$3,014,000	\$7,554,754	\$445,231
Total	45	787		\$176,332,395		\$105,354	\$111,235	\$224,056	\$69,429
Total (Paid Only)	46	376		\$176,332,395		\$220,516	\$232,825	\$468,969	\$91,957

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2017, 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	48	191	53.8%	\$0	0.0%	\$0	\$0	\$0	\$86,609
5,000 - 5,999	55	2	54.4%	\$10,000	0.0%	\$2,500	\$2,500	\$5,000	\$89,797
7,000 - 7,999	40	1	54.7%	\$7,500	0.0%	\$7,500	\$0	\$7,500	\$12,902
10,000 - 19,999	48	4	55.8%	\$51,000	0.1%	\$5,150	\$7,600	\$12,750	\$42,443
20,000 - 29,999	47	5	57.2%	\$122,500	0.2%	\$7,600	\$16,900	\$24,500	\$22,948
30,000 - 39,999	55	3	58.0%	\$95,000	0.3%	\$18,267	\$13,400	\$31,667	\$106,314
40,000 - 49,999	47	2	58.6%	\$82,500	0.3%	\$30,625	\$10,625	\$41,250	\$59,054
50,000 - 59,999	56	4	59.7%	\$205,000	0.5%	\$13,063	\$38,188	\$51,250	\$90,492
60,000 - 69,999	42	2	60.3%	\$122,500	0.7%	\$15,000	\$46,250	\$61,250	\$273,221
70,000 - 79,999	56	7	62.3%	\$512,849	1.1%	\$17,143	\$56,121	\$73,264	\$127,805
90,000 - 99,999	71	3	63.1%	\$275,000	1.4%	\$61,667	\$30,000	\$91,667	\$54,674
100,000 - 199,999	53	24	69.9%	\$3,425,327	4.6%	\$62,031	\$67,786	\$142,722	\$153,425
200,000 - 299,999	56	26	77.2%	\$6,352,500	10.5%	\$123,929	\$120,398	\$244,327	\$103,932
300,000 - 399,999	46	22	83.4%	\$7,630,864	17.6%	\$112,259	\$214,902	\$346,857	\$86,632
400,000 - 499,999	61	10	86.2%	\$4,210,000	21.6%	\$192,319	\$228,681	\$421,000	\$114,618
500,000 - 999,999	74	24	93.0%	\$15,420,458	36.0%	\$256,720	\$381,632	\$642,519	\$165,526
1,000,000 - 1,999,999	61	14	96.9%	\$17,952,500	52.7%	\$617,625	\$664,696	\$1,282,321	\$254,081
2,000,000 - 2,999,999	62	5	98.3%	\$10,650,000	62.7%	\$1,076,900	\$1,053,100	\$2,130,000	\$164,454
3,000,000 - 3,999,999	52	3	99.2%	\$11,175,000	73.1%	\$2,417,620	\$1,307,380	\$3,725,000	\$493,692
Over 4,000,000	50	3	100.0%	\$28,773,768	100.0%	\$3,567,923	\$4,356,667	\$9,591,256	\$739,334
Total	52	355		\$107,074,26		\$134,725	\$150,433	\$301,618	\$115,242
Total (Paid Only)	57	164		\$107,074,266		\$291,630	\$325,633	\$652,892	\$148,590

Summary by Indemnity Range Awarded to Each Injured Party - Cases Involving at least Hospital Closed in 2018

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	53	141	39.2%	\$0	0.0%	\$0	\$0	\$0	\$92,639
1,000 - 1,999	6	5	40.6%	\$2,675	0.0%	\$75	\$460	\$535	\$149
2,000 - 2,999	17	2	41.1%	\$5,000	0.0%	\$750	\$1,750	\$2,500	\$0
3,000 - ,3999	5	1	41.4%	\$3,500	0.0%	\$0	\$3,500	\$3,500	\$0
5,000 - 5,999	34	3	42.2%	\$15,720	0.0%	\$1,000	\$4,240	\$5,240	\$59,735
6,000 - 6,999	12	3	43.1%	\$19,200	0.0%	\$4,647	\$1,753	\$6,400	\$1,590
7,000 - 7,999	16	1	43.3%	\$7,500	0.1%	\$4,500	\$3,000	\$7,500	\$2,012
8,000 - 8,999	13	2	43.9%	\$16,000	0.1%	\$2,240	\$5,760	\$8,000	\$127
10,000 - 19,999	26	8	46.1%	\$114,052	0.2%	\$5,601	\$8,655	\$14,257	\$6,842
20,000 - 29,999	41	12	49.4%	\$284,900	0.4%	\$7,717	\$16,025	\$23,742	\$16,741
30,000 - 39,999	35	2	50.0%	\$60,000	0.5%	\$8,400	\$21,600	\$30,000	\$134,719
40,000 - 49,999	26	2	50.6%	\$85,000	0.5%	\$0	\$42,500	\$42,500	\$4,579
50,000 - 59,999	36	7	52.5%	\$359,500	0.8%	\$16,393	\$34,964	\$51,357	\$39,838
60,000 - 69,999	25	4	53.6%	\$247,500	1.1%	\$21,250	\$40,625	\$61,875	\$9,873
70,000 - 79,999	37	9	56.1%	\$667,849	1.6%	\$22,500	\$51,705	\$74,205	\$78,013
80,000 - 89,999	40	1	56.4%	\$83,000	1.7%	\$3,000	\$80,000	\$83,000	\$17,887
90,000 - 99,999	46	5	57.8%	\$460,000	2.1%	\$46,080	\$45,920	\$92,000	\$75,982
100,000 -199,999	46	30	66.1%	\$4,208,763	5.8%	\$51,476	\$83,613	\$140,292	\$72,957
200,000 - 299,999	56	31	74.7%	\$7,370,000	12.1%	\$100,872	\$136,870	\$237,742	\$112,010
300,000 - 399,999	42	26	81.9%	\$8,500,576	19.5%	\$87,274	\$239,671	\$326,945	\$78,600
400,000 - 499,999	45	10	84.7%	\$4,295,000	23.2%	\$107,319	\$322,181	\$429,500	\$107,112
500,000 - 999,999	74	31	93.3%	\$21,037,022	41.4%	\$345,198	\$330,190	\$678,614	\$169,198
1,000,000 - 1,999,999	46	13	96.9%	\$18,844,991	57.7%	\$856,942	\$592,673	\$1,449,615	\$236,706
2,000,000 - 2,999,999	49	4	98.1%	\$9,900,000	66.3%	\$690,311	\$1,784,689	\$2,475,000	\$306,055
3,000,000 - 3,999,999	56	4	99.2%	\$14,175,000	78.6%	\$2,313,215	\$1,230,535	\$3,543,750	\$447,852
Over 4,000,000	55	3	100.00%	\$24,773,768	100.00%	\$4,507,923	\$2,083,333	\$8,257,923	\$545,941
Total	49	360	.	\$115,536,516	.	\$156,140	\$150,194	\$320,935	\$102,647
Total (Paid Only)	46	219	.	\$115,536,516	.	\$256,669	\$246,894	\$527,564	\$109,091

**Summary by Indemnity Range Awarded to Each Injured Party
Closed in 2017, 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	43	408	52.9%	\$0	0.0%	\$0	\$0	\$0	\$39,582
1,000 - 1,999	23	7	53.8%	\$5,869	0.0%	\$257	\$581	\$838	\$6,392
2,000 - 2,999	14	4	54.3%	\$10,375	0.0%	\$900	\$1,694	\$2,594	\$1,976
3,000 - ,3999	19	2	54.5%	\$7,150	0.0%	\$0	\$3,575	\$3,575	\$1,117
5,000 - 5,999	17	5	55.2%	\$26,540	0.0%	\$3,268	\$2,040	\$5,308	\$2,584
7,000 - 7,999	10	1	55.3%	\$7,000	0.0%	\$0	\$7,000	\$7,000	\$0
9,000 - 9,999	26	3	55.7%	\$27,870	0.1%	\$6,145	\$3,145	\$9,290	\$2,597
10,000 - 19,999	28	15	57.6%	\$188,866	0.2%	\$4,834	\$7,757	\$12,591	\$27,451
20,000 - 29,999	43	19	60.1%	\$437,500	0.5%	\$8,332	\$14,695	\$23,026	\$66,638
30,000 - 39,999	41	9	61.3%	\$292,500	0.7%	\$7,905	\$24,595	\$32,500	\$41,679
40,000 - 49,999	38	14	63.1%	\$588,602	1.1%	\$15,655	\$26,388	\$42,043	\$34,867
50,000 - 59,999	48	13	64.8%	\$665,002	1.6%	\$12,200	\$38,954	\$51,154	\$49,977
60,000 - 69,999	40	6	65.5%	\$372,831	1.9%	\$12,083	\$50,055	\$62,139	\$19,956
70,000 - 79,999	48	17	67.8%	\$1,269,500	2.8%	\$41,768	\$32,908	\$74,676	\$55,399
80,000 - 89,999	39	6	68.5%	\$502,000	3.2%	\$36,780	\$46,887	\$83,667	\$33,171
90,000 - 99,999	41	8	69.6%	\$750,499	3.7%	\$17,656	\$76,156	\$93,812	\$99,869
100,000 -199,999	42	83	80.3%	\$11,951,381	12.2%	\$41,697	\$97,898	\$143,993	\$55,219
200,000 - 299,999	51	53	87.2%	\$12,497,265	21.2%	\$67,091	\$165,861	\$235,797	\$99,873
300,000 - 399,999	45	26	90.5%	\$8,609,000	27.3%	\$100,286	\$230,829	\$331,115	\$99,823
400,000 - 499,999	42	15	92.5%	\$6,508,516	32.0%	\$131,353	\$302,548	\$433,901	\$84,467
500,000 - 999,999	62	31	96.5%	\$20,841,908	46.9%	\$332,592	\$322,169	\$672,320	\$218,523
1,000,000 - 1,999,999	51	14	98.3%	\$17,325,000	59.3%	\$453,906	\$783,594	\$1,237,500	\$258,728
2,000,000 - 2,999,999	54	4	98.8%	\$10,225,000	66.6%	\$1,182,500	\$1,373,750	\$2,556,250	\$182,556
3,000,000 - 3,999,999	59	2	99.1%	\$7,450,000	71.9%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	70	7	100.0%	\$39,300,020	100.0%	\$2,657,146	\$2,957,143	\$5,614,289	\$2,430,225
Total	44	772		\$139,860,194		\$74,357	\$105,435	\$181,166	\$82,407
Total (Paid Only)	45	364		\$139,860,194		\$157,703	\$223,616	\$384,231	\$130,409

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	204	55.1%	\$0	0.0%	\$0	\$0	\$0	\$61,081
2,000 - 2,999	26	1	55.4%	\$2,500	0.0%	\$1,400	\$1,100	\$2,500	\$7,830
10,000 - 19,999	42	5	56.8%	\$69,500	0.1%	\$9,355	\$4,545	\$13,900	\$79,332
20,000 - 29,999	48	7	58.7%	\$160,000	0.3%	\$10,271	\$12,586	\$22,857	\$111,207
30,000 - 39,999	40	3	59.5%	\$100,000	0.4%	\$382	\$32,951	\$33,333	\$93,628
40,000 - 49,999	56	5	60.8%	\$210,000	0.6%	\$21,560	\$20,440	\$42,000	\$73,574
50,000 - 59,999	69	5	62.2%	\$255,000	0.9%	\$0	\$51,000	\$51,000	\$94,082
60,000 - 69,999	23	1	62.4%	\$67,500	1.0%	\$7,500	\$60,000	\$67,500	\$0
70,000 - 79,999	60	8	64.6%	\$594,500	1.6%	\$46,503	\$27,810	\$74,313	\$81,755
80,000 - 89,999	51	2	65.1%	\$165,000	1.8%	\$0	\$82,500	\$82,500	\$38,000
90,000 - 99,999	55	4	66.2%	\$365,000	2.2%	\$11,250	\$80,000	\$91,250	\$78,453
100,000 -199,999	52	33	75.1%	\$4,833,606	7.5%	\$46,846	\$99,627	\$146,473	\$85,845
200,000 - 299,999	57	27	82.4%	\$6,300,598	14.5%	\$78,733	\$149,036	\$233,355	\$135,175
300,000 - 399,999	53	16	86.8%	\$5,317,500	20.4%	\$107,827	\$224,516	\$332,344	\$135,082
400,000 - 499,999	45	12	90.0%	\$5,258,516	26.2%	\$148,604	\$289,606	\$438,210	\$103,910
500,000 - 999,999	68	20	95.4%	\$13,583,908	41.2%	\$340,744	\$311,235	\$679,195	\$259,818
1,000,000 - 1,999,999	58	7	97.3%	\$8,290,000	50.3%	\$366,429	\$817,857	\$1,184,286	\$373,311
2,000,000 - 2,999,999	56	3	98.1%	\$7,725,000	58.9%	\$1,576,667	\$998,333	\$2,575,000	\$243,408
3,000,000 - 3,999,999	59	2	98.7%	\$7,450,000	67.1%	\$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	\$3,279,003
Total	52	370	.	\$90,548,148	.	\$101,334	\$141,512	\$244,725	\$137,562
Total (Paid Only)	55	166	.	\$90,548,148	.	\$225,865	\$315,418	\$545,471	\$231,551

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	49	131	40.6%	\$0	0.0%	\$0	\$0	\$0	\$64,158
1,000 - 1,999	23	7	42.7%	\$5,869	0.0%	\$257	\$581	\$838	\$6,392
2,000 - 2,999	17	2	43.3%	\$5,000	0.0%	\$700	\$1,800	\$2,500	\$3,915
5,000 - 5,999	18	2	44.0%	\$10,500	0.0%	\$4,040	\$1,210	\$5,250	\$4,994
7,000 - 7,999	10	1	44.3%	\$7,000	0.0%	\$0	\$7,000	\$7,000	\$0
10,000 - 19,999	26	10	47.4%	\$118,866	0.2%	\$3,173	\$8,713	\$11,887	\$23,246
20,000 - 29,999	48	15	52.0%	\$355,000	0.6%	\$8,220	\$15,447	\$23,667	\$72,418
30,000 - 39,999	47	6	53.9%	\$197,500	0.8%	\$11,667	\$21,250	\$32,917	\$50,318
40,000 - 49,999	44	3	54.8%	\$125,102	0.9%	\$7,600	\$34,101	\$41,701	\$88,872
50,000 - 59,999	47	5	56.4%	\$255,001	1.2%	\$30,309	\$20,691	\$51,000	\$32,842
60,000 - 69,999	47	3	57.3%	\$185,331	1.4%	\$11,667	\$50,110	\$61,777	\$17,466
70,000 - 79,999	51	6	59.1%	\$454,500	1.9%	\$51,920	\$23,830	\$75,750	\$55,517
80,000 - 89,999	45	5	60.7%	\$414,500	2.3%	\$35,386	\$47,514	\$82,900	\$39,805
90,000 - 99,999	44	5	62.2%	\$467,999	2.9%	\$0	\$93,600	\$93,600	\$139,748
100,000 - 199,999	40	30	71.5%	\$4,215,275	7.5%	\$31,974	\$108,535	\$140,509	\$73,436
200,000 - 299,999	47	28	80.2%	\$6,519,667	14.6%	\$53,100	\$179,745	\$232,845	\$91,119
300,000 - 399,999	41	16	85.1%	\$5,362,500	20.5%	\$119,082	\$216,075	\$335,156	\$109,183
400,000 - 499,999	42	10	88.2%	\$4,298,516	25.1%	\$108,405	\$321,447	\$429,852	\$109,917
500,000 - 999,999	60	19	94.1%	\$13,564,250	40.0%	\$317,651	\$394,064	\$713,908	\$296,261
1,000,000 - 1,999,999	50	8	96.6%	\$10,925,000	51.9%	\$685,000	\$680,625	\$1,365,625	\$352,610
2,000,000 - 2,999,999	54	4	97.8%	\$10,225,000	63.1%	\$1,182,500	\$1,373,750	\$2,556,250	\$182,556
3,000,000 - 3,999,999	59	2	98.5%	\$7,450,000	71.2%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	83	5	100.0%	\$26,300,020	100.0%	\$1,400,004	\$3,860,000	\$5,260,004	\$3,306,209
Total	46	323	.	\$91,462,396	.	\$103,916	\$179,120	\$283,165	\$140,494
Total (Paid Only)	45	192	.	\$91,462,396	.	\$174,817	\$301,333	\$476,367	\$192,577

Section III

Average Payments by Injury Severity And Lapsed Time to Disposition

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

Temporary Injuries (1 – 4)

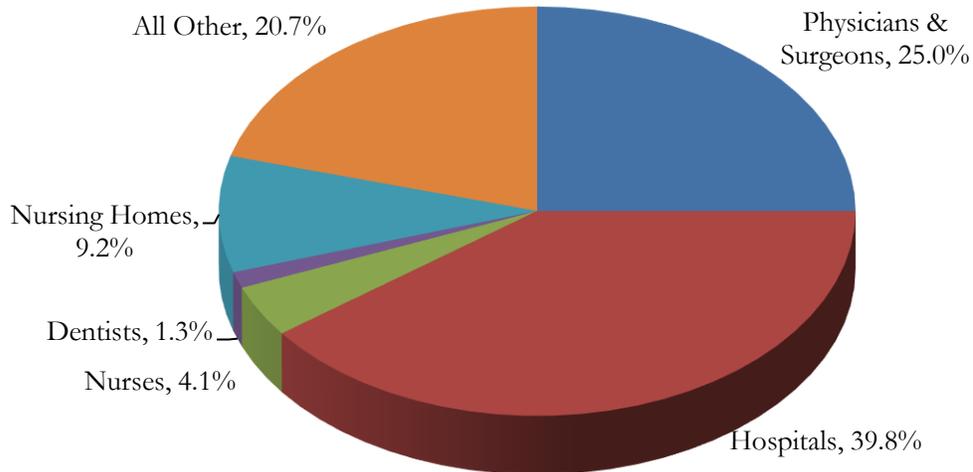
1. Emotional only - fright, no physical damage. Examples include breach of patient confidentiality, misdiagnosing a healthy patient with a condition, inappropriate legal or ethical behavior.
2. Insignificant – Lacerations, minor contusions, rash. No delay in recovery.
3. Minor – Infections, misset fracture,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

Permanent Non-Fatal Injuries (5 – 8)

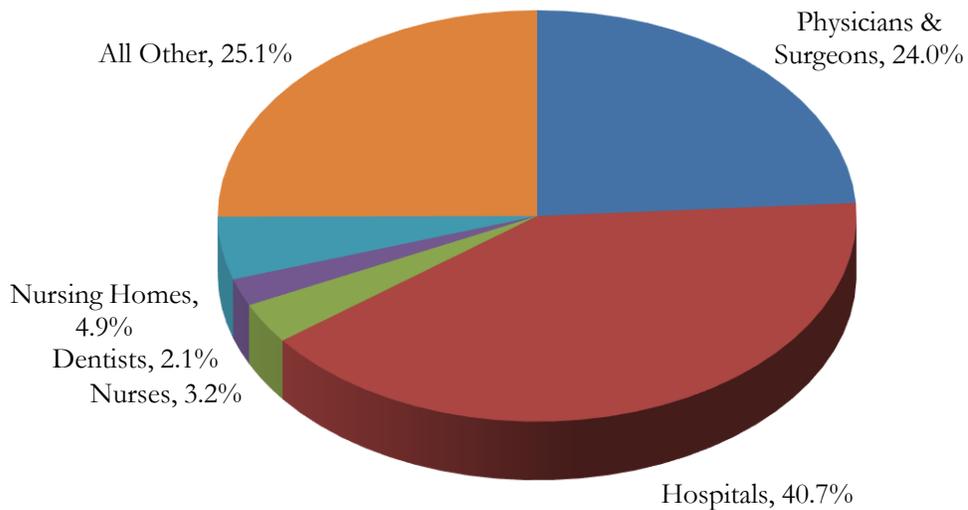
5. Minor – Loss of fingers, damage to internal organs. Injuries are non-disabling.
6. Significant – Deafness, loss of limb, loss of eye, one kidney or lung
7. Major – Paraplegia, blindness, loss of two limbs, significant brain damage
8. Grave – quadriplegia, severe brain damage, life-long care or fatal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

Fatalities – 9

**Malpractic Payments by Provider Type
2019**



**Malpractic Payments by Provider Type
2018**

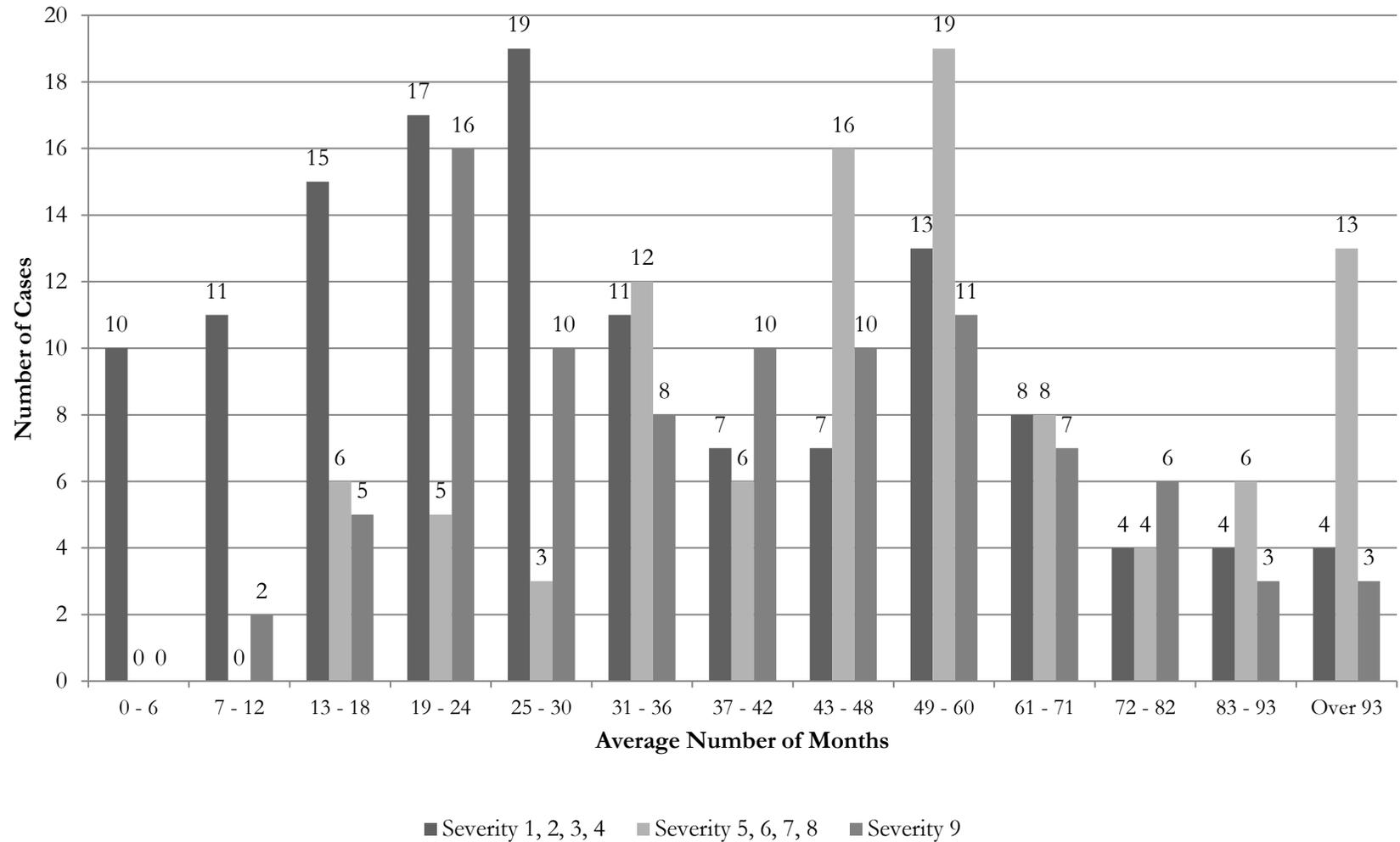


Claims by Provider Type												
Profession Type	2019		2018 – 2018		2018		2017 – 2018		2017		2016 - 2017	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4 (Temporary Injuries)												
Chiropractors	1	\$100,000	0.0%	3900.0%	1	\$2,500	-75.0%	-97.3%	4	\$93,000	0.0%	-6.6%
Clinics & Corporations	31	\$95,935	-11.4%	-63.5%	35	\$262,541	0.0%	111.4%	35	\$124,170	-7.9%	-6.4%
Dentists	4	\$34,500	-50.0%	11.6%	8	\$30,926	14.3%	-48.6%	7	\$60,146	-50.0%	-62.0%
Hospitals	68	\$156,725	-16.0%	5.8%	81	\$148,121	17.4%	10.6%	69	\$133,933	-8.0%	21.8%
Nurses	13	\$112,692	116.7%	18.7%	6	\$94,958	20.0%	-39.8%	5	\$157,608	-16.7%	-46.9%
Nursing Homes	9	\$152,255	50.0%	56.5%	6	\$97,292	-60.0%	-16.6%	15	\$116,633	275.0%	0.0%
Optometrists	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Pharmacies	1	\$7,000	-66.7%	-92.9%	3	\$98,333	-40.0%	1114.0%	5	\$8,100	-68.8%	-62.6%
Physicians & Surgeons	17	\$203,029	-34.6%	-63.6%	26	\$557,290	-10.3%	196.3%	29	\$188,103	7.4%	-13.1%
Podiatrist/Chiropodist	1	\$8,500	0.0%	-88.7%	1	\$75,000	0.0%	87.5%	1	\$40,000	-50.0%	-40.7%
Subtotal	145	\$139,115	-13.2%	-38.0%	167	\$224,250	-1.8%	69.8%	170	\$132,079	-8.6%	0.4%
Severity 5, 6, 7, 8 (Permanent Injuries)												
Chiropractors	0	\$0	-100.0%	-100.0%	3	\$366,667	200.0%	319.0%	1	\$87,500	-66.7%	-49.5%
Clinics & Corporations	33	\$450,223	-13.2%	-17.3%	38	\$544,537	40.7%	-0.8%	27	\$548,751	-34.1%	-33.4%
Dentists	0	\$0	-100.0%	-100.0%	2	\$22,500	.	.	0	\$0	-100.0%	-100.0%
Hospitals	45	\$700,456	-25.0%	-15.0%	60	\$823,875	7.1%	39.8%	56	\$589,500	14.3%	-8.9%
Nurses	2	\$237,500	-50.0%	-8.2%	4	\$258,750	-50.0%	26.3%	8	\$204,916	60.0%	-82.3%
Nursing Homes	3	\$208,333	.	.	0	\$0	-100.0%	-100.0%	4	\$194,375	0.0%	136.0%
Optometrists	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Pharmacies	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Physicians & Surgeons	54	\$539,215	-8.5%	16.2%	59	\$464,016	7.3%	-11.9%	55	\$526,427	-20.3%	-28.6%
Podiatrist/Chiropodist	0	\$0	-100.0%	-100.0%	4	\$241,987	300.0%	61.3%	1	\$150,000	.	.
Subtotal	137	\$559,091	-19.4%	-5.6%	170	\$592,058	11.8%	13.3%	152	\$522,606	-12.1%	-26.5%
Severity 9 (Fatality)												
Chiropractors	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Claims by Provider Type

Profession Type	2019		2018 – 2018		2018		2017 – 2018		2017		2016 - 2017	
	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	14	\$237,857	-54.8%	-13.0%	31	\$273,395	40.9%	34.8%	22	\$202,864	-4.3%	-6.5%
Dentists	1	\$300,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Hospitals	43	\$311,977	-12.2%	-6.4%	49	\$333,237	-2.0%	-8.6%	50	\$364,668	-2.0%	86.0%
Nurses	1	\$375,000	-80.0%	207.4%	5	\$122,000	25.0%	-62.9%	4	\$329,277	-55.6%	314.5%
Nursing Homes	24	\$187,865	41.2%	-23.4%	17	\$245,294	-19.0%	-2.0%	21	\$250,310	23.5%	62.2%
Pharmacies	0	\$0	-100.0%	-100.0%	1	\$25,000	.	.	0	\$0	.	.
Physicians & Surgeons	27	\$342,130	0.0%	7.1%	27	\$319,409	-20.6%	24.8%	34	\$255,903	-19.0%	-38.6%
Podiatrist/Chiropracist	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	110	\$283,330	-15.4%	-3.7%	130	\$294,099	-0.8%	1.5%	131	\$289,853	-9.0%	11.1%

Lapsed Months from Incident to Disposition 2019 Paid Incidents - All Cases



Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
Months from Injury to Disposition	2019		2018 – 2019		2018		2017 – 2018		2017		2016 - 2017	
	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	10	\$21,323	-16.7%	224.2%	12	\$6,578	300.0%	-83.7%	3	\$40,277	-72.7%	195.6%
7 - 12	11	\$61,343	-31.3%	0.9%	16	\$60,822	23.1%	55.5%	13	\$39,126	-13.3%	60.9%
13 - 18	15	\$120,649	25.0%	211.3%	12	\$38,752	-33.3%	-49.6%	18	\$76,816	-5.3%	-18.0%
19 - 24	17	\$120,058	-5.6%	19.9%	18	\$100,128	-21.7%	31.0%	23	\$76,451	-20.7%	-34.1%
25 - 30	19	\$115,500	-20.8%	-44.0%	24	\$206,219	41.2%	8.4%	17	\$190,265	6.3%	40.8%
31 - 36	11	\$260,410	57.1%	-81.9%	7	\$1,442,143	-56.3%	917.4%	16	\$141,751	77.8%	-38.2%
37 - 42	7	\$425,643	-22.2%	94.8%	9	\$218,487	-47.1%	-10.4%	17	\$243,912	88.9%	-12.0%
43 - 48	7	\$147,483	-46.2%	41.1%	13	\$104,531	0.0%	-45.2%	13	\$190,641	18.2%	-22.4%
48 - 60	13	\$202,308	-31.6%	-40.2%	19	\$338,381	11.8%	105.5%	17	\$164,677	-5.6%	-18.7%
61 - 71	8	\$134,625	14.3%	-83.0%	7	\$792,143	-22.2%	268.8%	9	\$214,778	-10.0%	-42.1%
72 - 82	4	\$175,000	0.0%	-31.7%	4	\$256,250	100.0%	192.9%	2	\$87,500	-77.8%	-20.9%
83 - 93	4	\$275,000	0.0%	48.8%	4	\$184,750	300.0%	361.9%	1	\$40,000	0.0%	33.3%
94 - 104	1	\$510,000	0.0%	284.9%	1	\$132,500	-50.0%	17.8%	2	\$112,500	100.0%	1025.0%
105 - 115	3	\$115,000	200.0%	130.0%	1	\$50,000	0.0%	-94.3%	1	\$883,000	.	.
116 - 126	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
149 - 159	0	\$0	-100.0%	-100.0%	2	\$637,500	100.0%	27.5%	1	\$500,000	.	.
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	\$565,000	.	.	0	\$0	-100.0%	-100.0%

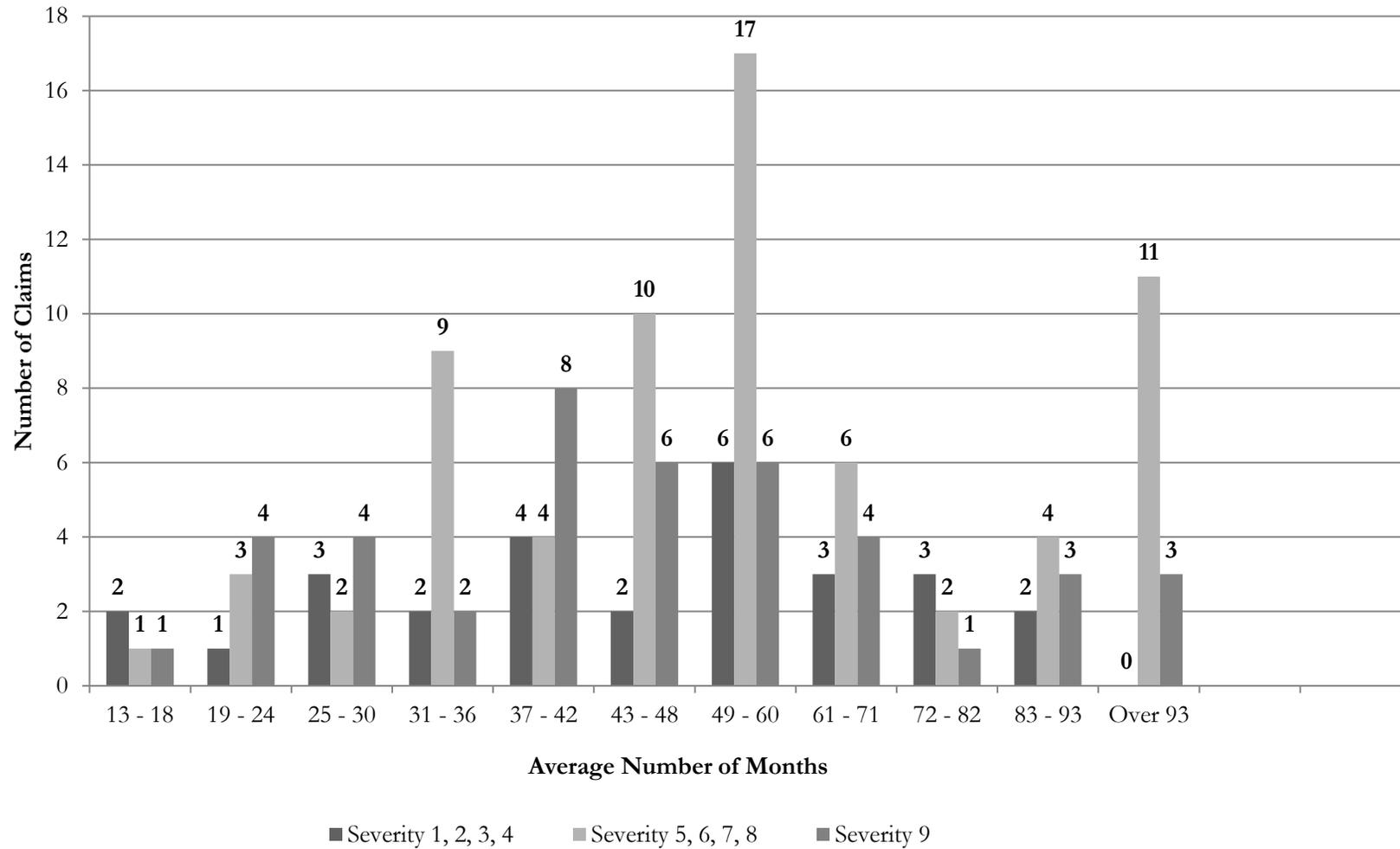
Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
Months from Injury to Disposition	2019		2018 – 2019		2018		2017 – 2018		2017		2016 - 2017	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Subtotal	130	\$155,166	-13.3%	-37.9%	150	\$249,665	-2.0%	70.1%	153	\$146,754	-5.6%	-2.9%
Severity 5, 6, 7 & 8 (Permanent Injuries)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	0	\$0	-100.0%	-100.0%	1	\$600,000	-50.0%	1094.0%	2	\$50,250	0.0%	-98.0%
13 - 18	6	\$129,667	-25.0%	-28.5%	8	\$181,250	300.0%	98.6%	2	\$91,250	-50.0%	-71.7%
19 - 24	5	\$570,000	-16.7%	69.3%	6	\$336,667	20.0%	120.8%	5	\$152,500	-50.0%	-83.9%
25 - 30	3	\$783,333	-25.0%	354.1%	4	\$172,500	-42.9%	-76.9%	7	\$748,059	-12.5%	-7.0%
31 - 36	12	\$1,282,083	9.1%	63.6%	11	\$783,636	0.0%	-41.3%	11	\$1,335,227	-8.3%	201.4%
37 - 42	6	\$582,292	-62.5%	60.6%	16	\$362,500	33.3%	-30.6%	12	\$522,292	-25.0%	-58.2%
43 - 48	16	\$742,109	0.0%	-32.6%	16	\$1,101,031	-11.1%	28.5%	18	\$856,806	12.5%	115.0%
48 - 60	19	\$386,711	-9.5%	-74.0%	21	\$1,485,712	-4.5%	187.5%	22	\$516,712	-18.5%	11.5%
61 - 71	8	\$295,000	-60.0%	-64.9%	20	\$839,943	150.0%	49.0%	8	\$563,750	-33.3%	-64.2%
72 - 82	4	\$1,975,000	-50.0%	313.9%	8	\$477,125	100.0%	119.6%	4	\$217,261	-33.3%	-64.6%
83 - 93	6	\$233,333	0.0%	-70.1%	6	\$780,833	20.0%	-64.2%	5	\$2,182,000	150.0%	-67.9%
94 - 104	2	\$170,000	.	.	0	\$0	-100.0%	-100.0%	5	\$669,000	.	.
105 - 115	2	\$742,500	0.0%	160.5%	2	\$285,000	0.0%	128.0%	2	\$125,000	.	.
116 - 126	2	\$163,750	-33.3%	-84.4%	3	\$1,050,000	200.0%	-76.7%	1	\$4,500,000	-50.0%	129.3%
127 - 137	1	\$12,500,000	-50.0%	1624.1%	2	\$725,000	100.0%	190.0%	1	\$250,000	-50.0%	-91.1%
138 - 148	2	\$550,000	100.0%	-45.0%	1	\$1,000,000	-50.0%	281.0%	2	\$262,500	100.0%	-95.4%
149 - 159	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$250,000	0.0%	-95.2%
160 - 170	1	\$1,900,000	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	-100.0%	-100.0%	2	\$575,000	.	.	0	\$0	.	.
182 - 192	2	\$1,415,000	.	.	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	2019		2018 – 2019		2018		2017 – 2018		2017		2016 - 2017	
	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
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	1	\$375,000	0.0%	1053.8%	1	\$32,500	.	.	0	\$0	-100.0%	-100.0%
Subtotal	98	\$781,587	-23.4%	-0.6%	128	\$786,327	18.5%	6.9%	108	\$735,520	-11.5%	-27.1%
Severity 9 (Fatal)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
7 - 12	2	\$137,500	100.0%	9.1%	1	\$126,000	0.0%	129.1%	1	\$55,001	.	.
13 - 18	5	\$548,500	-16.7%	-14.8%	6	\$643,750	500.0%	543.8%	1	\$100,000	-75.0%	-72.7%
19 - 24	16	\$428,438	166.7%	-8.5%	6	\$468,333	-25.0%	80.0%	8	\$260,208	60.0%	-34.6%
25 - 30	10	\$450,000	0.0%	39.1%	10	\$323,500	-9.1%	8.2%	11	\$299,016	0.0%	-57.4%
31 - 36	8	\$347,031	-33.3%	-13.4%	12	\$400,729	9.1%	67.7%	11	\$239,000	-31.3%	-33.3%
37 - 42	10	\$360,000	0.0%	37.0%	10	\$262,800	-9.1%	34.8%	11	\$195,000	-26.7%	-28.2%
43 - 48	10	\$285,250	-33.3%	-26.5%	15	\$388,167	66.7%	21.5%	9	\$319,389	-47.1%	-14.8%
48 - 60	11	\$155,227	-21.4%	-13.6%	14	\$179,709	-39.1%	-41.9%	23	\$309,519	64.3%	162.7%
61 - 71	7	\$172,143	-30.0%	-79.3%	10	\$830,877	-23.1%	79.7%	13	\$462,427	8.3%	112.2%
72 - 82	6	\$312,083	20.0%	66.0%	5	\$188,000	-16.7%	-40.3%	6	\$314,792	100.0%	96.7%
83 - 93	3	\$495,000	50.0%	25.3%	2	\$395,000	-33.3%	15.6%	3	\$341,667	50.0%	217.8%
94 - 104	2	\$547,500	-50.0%	54.9%	4	\$353,359	100.0%	157.0%	2	\$137,500	-75.0%	-44.0%
105 - 115	0	\$0	-100.0%	-100.0%	1	\$250,000	0.0%	104.7%	1	\$122,106	.	.
116 - 126	0	\$0	-100.0%	-100.0%	1	\$175,000	-50.0%	-95.7%	2	\$4,027,510	0.0%	1202.3%
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$300,000	0.0%	300.0%
149 - 159	1	\$200,000	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	-100.0%	-100.0%	1	\$547,022	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	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	2019		2018 – 2019		2018		2017 – 2018		2017		2016 - 2017	
	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
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	\$342,486	-7.1%	-12.2%	98	\$390,132	-4.9%	5.8%	103	\$368,648	-8.0%	9.9%

Lapsed Months from Incident to Disposition 2019 Paid Claims Involving At Least One Physician or Surgeon



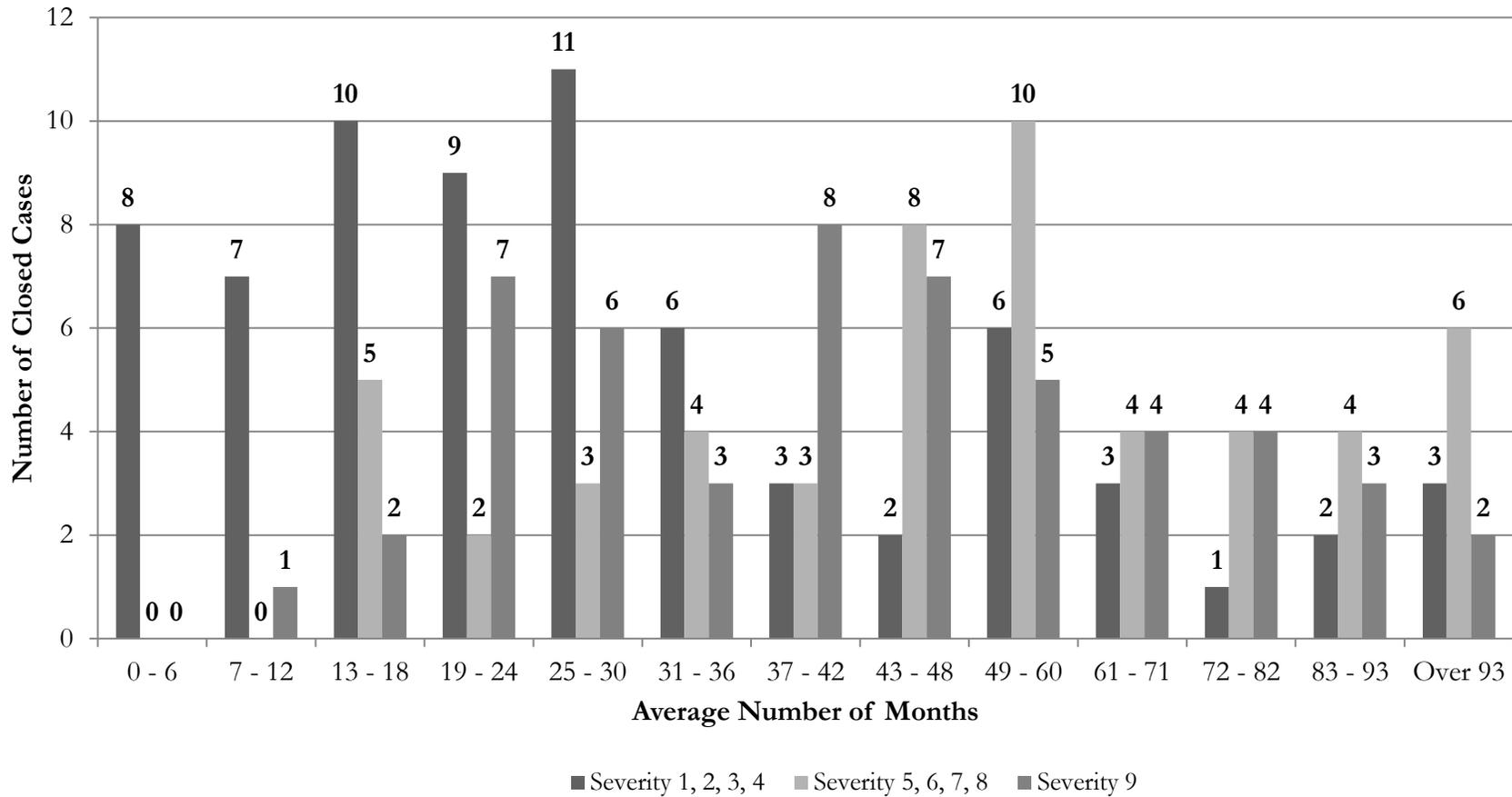
Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
Months from Injury to Disposition	2019		2018-2019		2018		2017-2018		2017		2016-2017	
	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	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	-100.0%	-100.0%	1	\$25,000	.	.	0	\$0	.	.
7 - 12	0	\$0	-100.0%	-100.0%	1	\$350,000	-50.0%	133.3%	2	\$150,000	0.0%	559.3%
13 - 18	2	\$7,750	100.0%	-92.3%	1	\$100,000	-50.0%	-57.9%	2	\$237,500	-33.3%	39.1%
19 - 24	1	\$225,000	-50.0%	847.4%	2	\$23,750	-33.3%	-53.3%	3	\$50,833	-40.0%	-65.7%
25 - 30	3	\$62,500	-50.0%	-90.1%	6	\$630,000	0.0%	351.3%	6	\$139,583	50.0%	-58.1%
31 - 36	2	\$375,000	0.0%	-91.8%	2	\$4,577,500	-50.0%	3507.9%	4	\$126,875	0.0%	-71.2%
37 - 42	4	\$281,875	33.3%	-45.0%	3	\$512,833	-40.0%	216.6%	5	\$162,000	25.0%	-68.5%
43 - 48	2	\$380,000	-66.7%	362.9%	6	\$82,083	0.0%	-75.5%	6	\$335,000	0.0%	33.3%
48 - 60	6	\$123,750	-25.0%	-48.8%	8	\$241,529	0.0%	13.8%	8	\$212,188	14.3%	63.9%
61 - 71	3	\$172,333	50.0%	4.4%	2	\$165,000	-60.0%	-48.8%	5	\$322,500	25.0%	-31.7%
72 - 82	3	\$200,000	200.0%	-66.7%	1	\$600,000	-50.0%	585.7%	2	\$87,500	0.0%	20.7%
83 - 93	2	\$330,000	-33.3%	34.7%	3	\$245,000	200.0%	512.5%	1	\$40,000	0.0%	33.3%
94 - 104	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$200,000	.	.
105 - 115	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
116 - 126	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
138 - 148	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
149 - 159	0	\$0	-100.0%	-100.0%	2	\$637,500	100.0%	27.5%	1	\$500,000	.	.
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 Physician or Surgeon												
Months from Injury to Disposition	2019		2018-2019		2018		2017-2018		2017		2016-2017	
	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	-100.0%	-100.0%	1	\$565,000	.	.	0	\$0	-100.0%	-100.0%
Subtotal	28	\$199,464	-28.2%	-62.8%	39	\$536,557	-15.2%	164.9%	46	\$202,554	2.2%	-23.4%
Severity 5, 6, 7, 8 (Permanent Injuries)												
7 - 12	0	\$0	-100.0%	-100.0%	1	\$600,000	.	.	0	\$0	.	.
13 - 18	1	\$500,000	-50.0%	90.5%	2	\$262,500	.	.	0	\$0	-100.0%	-100.0%
19 - 24	3	\$575,000	50.0%	-20.7%	2	\$725,000	0.0%	157.8%	2	\$281,250	-60.0%	-83.9%
25 - 30	2	\$975,000	100.0%	188.9%	1	\$337,500	-50.0%	-84.1%	2	\$2,125,705	-50.0%	41.3%
31 - 36	9	\$1,412,222	28.6%	83.9%	7	\$767,857	16.7%	-40.7%	6	\$1,295,833	-25.0%	174.3%
37 - 42	4	\$828,437	-66.7%	110.4%	12	\$393,750	71.4%	-44.9%	7	\$714,214	-50.0%	-44.8%
43 - 48	10	\$944,875	42.9%	3.8%	7	\$909,857	-46.2%	0.9%	13	\$901,731	-13.3%	124.4%
48 - 60	17	\$424,265	30.8%	-76.3%	13	\$1,791,154	-27.8%	205.1%	18	\$586,981	-18.2%	12.2%
61 - 71	6	\$319,167	-57.1%	-54.2%	14	\$697,355	100.0%	12.0%	7	\$622,857	-30.0%	-65.4%
72 - 82	2	\$2,750,000	-50.0%	383.5%	4	\$568,750	33.3%	158.9%	3	\$219,681	0.0%	-76.5%
83 - 93	4	\$206,250	-33.3%	-73.6%	6	\$780,833	50.0%	-70.8%	4	\$2,671,250	100.0%	-60.6%
94 - 104	2	\$170,000	.	.	0	\$0	-100.0%	-100.0%	5	\$669,000	.	.
105 - 115	2	\$742,500	0.0%	160.5%	2	\$285,000	100.0%	185.0%	1	\$100,000	.	.
116 - 126	1	\$307,500	-66.7%	-70.7%	3	\$1,050,000	.	.	0	\$0	-100.0%	-100.0%
127 - 137	1	\$12,500,000	.	.	0	\$0	-100.0%	-100.0%	1	\$250,000	.	.
138 - 148	1	\$110,000	0.0%	-89.0%	1	\$1,000,000	0.0%	100.0%	1	\$500,000	0.0%	-91.2%
149 - 159	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$250,000	0.0%	-95.2%
160 - 170	1	\$1,900,000	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	-100.0%	-100.0%	2	\$575,000	.	.	0	\$0	.	.
182 - 192	2	\$1,415,000	.	.	0	\$0	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
Months from Injury to Disposition	2019		2018-2019		2018		2017-2018		2017		2016-2017	
	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	.	.
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	1	\$375,000	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	69	\$941,268	-10.4%	11.1%	77	\$847,526	8.5%	0.2%	71	\$845,431	-20.2%	-28.1%
Severity 9 (Fatalities)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
13 - 18	1	\$450,000	-50.0%	-65.4%	2	\$1,300,000	.	.	0	\$0	-100.0%	-100.0%
19 - 24	4	\$906,250	100.0%	192.3%	2	\$310,000	.	.	0	\$0	-100.0%	-100.0%
25 - 30	4	\$756,250	33.3%	51.3%	3	\$500,000	-40.0%	82.5%	5	\$274,034	66.7%	-85.3%
31 - 36	2	\$487,500	-60.0%	53.9%	5	\$316,750	-16.7%	-7.0%	6	\$340,667	0.0%	-51.1%
37 - 42	8	\$384,375	60.0%	34.6%	5	\$285,600	66.7%	141.4%	3	\$118,333	-72.7%	-60.1%
43 - 48	6	\$350,417	-33.3%	33.8%	9	\$261,944	200.0%	74.8%	3	\$149,833	-66.7%	-68.0%
48 - 60	6	\$172,083	0.0%	2.7%	6	\$167,599	-50.0%	-26.6%	12	\$228,245	140.0%	58.6%
61 - 71	4	\$231,250	-33.3%	-80.3%	6	\$1,173,128	-33.3%	247.7%	9	\$337,394	12.5%	24.4%
72 - 82	1	\$1,025,000	-66.7%	469.4%	3	\$180,000	0.0%	-64.2%	3	\$502,917	200.0%	1576.4%
83 - 93	3	\$495,000	200.0%	9800.0%	1	\$5,000	-66.7%	-98.5%	3	\$341,667	50.0%	217.8%
94 - 104	2	\$547,500	-50.0%	54.9%	4	\$353,359	300.0%	76.7%	1	\$200,000	-83.3%	-33.3%
105 - 115	0	\$0	-100.0%	-100.0%	1	\$250,000	0.0%	104.7%	1	\$122,106	.	.
116 - 126	0	\$0	.	.	0	\$0	-100.0%	-100.0%	2	\$4,027,510	100.0%	1855.1%
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$300,000	0.0%	300.0%
149 - 159	1	\$200,000	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	-100.0%	-100.0%	1	\$547,022	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2019		2018-2019		2018		2017-2018		2017		2016-2017	
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	.	.
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	42	\$452,738	-12.5%	4.0%	48	\$435,189	-2.0%	0.6%	49	\$432,756	-14.0%	-3.2%

Lapsed Months from Incident to Disposition 2019 Paid Claims, Cases Involving At Least One Hospital



Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2019			2018 - 2019, % Change		2018		2017 - 2018, % Change		2017		2016 - 2017, % 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	8	\$24,529	0.0%	687.0%	8	\$3,117	300.0%	-73.3%	2	\$11,666	-66.7%	-48.9%
7 - 12	7	\$64,468	-22.2%	22.8%	9	\$52,506	80.0%	336.6%	5	\$12,027	-50.0%	-63.7%
13 - 18	10	\$158,845	25.0%	300.2%	8	\$39,688	-33.3%	-55.5%	12	\$89,109	-7.7%	-32.7%
19 - 24	9	\$123,109	-35.7%	21.8%	14	\$101,058	133.3%	-10.7%	6	\$113,222	-33.3%	-22.3%
25 - 30	11	\$136,091	10.0%	-45.4%	10	\$249,250	-16.7%	5.5%	12	\$236,208	33.3%	23.3%
31 - 36	6	\$267,835	200.0%	-2.6%	2	\$275,000	-60.0%	254.8%	5	\$77,500	66.7%	-81.3%
37 - 42	3	\$730,000	0.0%	348.8%	3	\$162,667	-62.5%	-27.4%	8	\$223,938	33.3%	-25.7%
43 - 48	2	\$33,441	-77.8%	-66.8%	9	\$100,711	125.0%	54.7%	4	\$65,083	-20.0%	-80.9%
48 - 60	6	\$235,833	-40.0%	-28.8%	10	\$331,110	-16.7%	107.0%	12	\$159,958	200.0%	1030.5%
61 - 71	3	\$193,333	0.0%	-87.9%	3	\$1,600,000	-40.0%	1059.4%	5	\$138,000	0.0%	-63.0%
72 - 82	1	\$150,000	-66.7%	-37.9%	3	\$241,667	200.0%	141.7%	1	\$100,000	-85.7%	41.2%
83 - 93	2	\$330,000	100.0%	65.0%	1	\$200,000	0.0%	400.0%	1	\$40,000	.	.
94 - 104	1	\$510,000	0.0%	284.9%	1	\$132,500	-50.0%	17.8%	2	\$112,500	.	.
105 - 115	2	\$72,500	.	.	0	\$0	-100.0%	-100.0%	1	\$883,000	.	.
116 - 126	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
149 - 159	0	\$0	-100.0%	-100.0%	1	\$25,000	.	.	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	-100.0%	-100.0%	1	\$565,000	.	.	0	\$0	-100.0%	-100.0%

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2019			2018 - 2019, % Change		2018		2017 - 2018, % Change		2017		2016 - 2017, % 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
Subtotal	71	\$171,336	-14.5%	-13.4%	83	\$197,895	9.2%	37.2%	76	\$144,256	-5.0%	-13.6%
Severity 5, 6, 7, 8 (Permanent)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
13 - 18	5	\$55,600	66.7%	-38.2%	3	\$90,000	200.0%	350.0%	1	\$20,000	-50.0%	-60.0%
19 - 24	2	\$650,000	-50.0%	154.9%	4	\$255,000	300.0%	218.8%	1	\$80,000	-80.0%	-93.1%
25 - 30	3	\$783,333	0.0%	483.9%	3	\$134,167	-50.0%	-83.9%	6	\$830,833	50.0%	-44.8%
31 - 36	4	\$2,068,750	-50.0%	105.7%	8	\$1,005,624	33.3%	-31.8%	6	\$1,474,583	50.0%	94.0%
37 - 42	3	\$393,333	-70.0%	-12.3%	10	\$448,750	-9.1%	-17.3%	11	\$542,500	10.0%	-52.1%
43 - 48	8	\$961,250	0.0%	-46.4%	8	\$1,793,125	-11.1%	230.5%	9	\$542,500	-25.0%	82.0%
48 - 60	10	\$289,250	-23.1%	-84.2%	13	\$1,825,385	8.3%	162.9%	12	\$694,417	-40.0%	45.4%
61 - 71	4	\$151,250	-69.2%	-81.6%	13	\$820,854	225.0%	6.4%	4	\$771,250	-42.9%	-21.0%
72 - 82	4	\$1,975,000	-33.3%	260.2%	6	\$548,333	200.0%	77.2%	2	\$309,522	0.0%	-48.0%
83 - 93	4	\$212,500	-20.0%	-60.4%	5	\$537,000	66.7%	-83.0%	3	\$3,161,667	.	.
94 - 104	0	\$0	.	.	0	\$0	-100.0%	-100.0%	3	\$1,073,333	.	.
105 - 115	1	\$985,000	-50.0%	245.6%	2	\$285,000	.	.	0	\$0	.	.
116 - 126	2	\$163,750	.	.	0	\$0	-100.0%	-100.0%	1	\$4,500,000	-50.0%	129.3%
127 - 137	1	\$12,500,000	-50.0%	1624.1%	2	\$725,000	.	.	0	\$0	-100.0%	-100.0%
138 - 148	1	\$990,000	.	.	0	\$0	-100.0%	-100.0%	2	\$262,500	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
160 - 170	1	\$1,900,000	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	-100.0%	-100.0%	1	\$750,000	.	.	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%	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2019			2018 - 2019, % Change		2018		2017 - 2018, % Change		2017		2016 - 2017, % 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
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Subtotal	53	\$943,830	-32.1%	2.7%	78	\$919,437	27.9%	2.8%	61	\$894,255	-15.3%	-1.7%
Severity 9 (Fatalities)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
7 - 12	1	\$250,000	.	.	0	\$0	.	.	0	\$0	.	.
13 - 18	2	\$900,000	0.0%	260.0%	2	\$250,000	100.0%	150.0%	1	\$100,000	-66.7%	-58.0%
19 - 24	7	\$332,143	75.0%	-46.0%	4	\$615,000	0.0%	115.5%	4	\$285,417	0.0%	-38.6%
25 - 30	6	\$608,333	0.0%	45.4%	6	\$418,333	20.0%	52.7%	5	\$274,034	25.0%	17.2%
31 - 36	3	\$498,750	-66.7%	21.0%	9	\$412,083	28.6%	59.4%	7	\$258,571	-12.5%	19.2%
37 - 42	8	\$321,875	60.0%	10.8%	5	\$290,600	-37.5%	29.2%	8	\$225,000	60.0%	-50.4%
43 - 48	7	\$348,929	-30.0%	-18.1%	10	\$426,250	42.9%	23.1%	7	\$346,357	-22.2%	2.3%
48 - 60	5	\$151,500	0.0%	-37.3%	5	\$241,519	-50.0%	-41.6%	10	\$413,775	25.0%	266.0%
61 - 71	4	\$188,750	-50.0%	-81.8%	8	\$1,035,784	100.0%	60.8%	4	\$644,138	-33.3%	209.2%
72 - 82	4	\$378,125	33.3%	64.4%	3	\$230,000	-40.0%	-28.7%	5	\$322,750	150.0%	153.1%
83 - 93	3	\$495,000	50.0%	25.3%	2	\$395,000	0.0%	-12.2%	2	\$450,000	100.0%	328.6%
94 - 104	1	\$1,000,000	-50.0%	174.0%	2	\$365,000	100.0%	386.7%	1	\$75,000	-66.7%	-70.6%
105 - 115	0	\$0	-100.0%	-100.0%	1	\$250,000	.	.	0	\$0	.	.
116 - 126	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$8,000,020	.	.
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
138 - 148	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
149 - 159	1	\$200,000	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	-100.0%	-100.0%	1	\$547,022	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2019			2018 - 2019, % Change		2018		2017 - 2018, % Change		2017		2016 - 2017, % 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
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	52	\$389,399	-10.3%	-17.6%	58	\$472,330	5.5%	0.1%	55	\$471,807	-1.8%	60.0%

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, 2019
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	268	341	173	\$58,754,943
Missouri Hospital Plan	92	91	44	\$22,582,881
Medical Protective Company	63	45	3	\$558,000
Columbia Casualty Company	47	45	31	\$4,849,250
Norcal Mutual Insurance Company	43	44	23	\$13,047,500
Medical Liability Alliance	39	40	22	\$7,745,000
Proassurance Indemnity Company Inc	27	36	8	\$2,180,000
Doctors Company An Interins Exchange	42	26	5	\$1,730,000
St Lukes Health System Risk Retention Group	25	15	12	\$4,841,250
Mmic Insurance Inc	14	12	5	\$765,000
Preferred Physicians Medical Risk Retention Group A	8	12	3	\$397,500
Missouri Professionals Mutual-Physicians Professional	0	11	0	\$0
Lexington Insurance Company	2	11	0	\$0
Continental Casualty Company	4	11	6	\$2,167,500
National Fire & Marine Insurance Company	11	9	1	\$12,500
Keystone Mutual Insurance Company	7	6	3	\$2,473,749
American Casualty Company Of Reading Pennsylvania	9	6	3	\$235,000
Homeland Insurance Company Of New York	3	6	0	\$0
Health Care Industry Liability Reciprocal Insurance	6	5	3	\$575,792
Physicians Standard Insurance Company	20	5	0	\$0
Medicus Insurance Company	0	3	3	\$2,950,000
Ncmic Insurance Company	5	3	0	\$0
Capson Physicians Insurance Company	0	3	1	\$425,000
Arch Specialty Insurance Company	8	3	1	\$7,500
Oms National Insurance Company Rrg	6	3	0	\$0
Proassurance Specialty Insurance Inc	4	2	1	\$950,000
Professional Solutions Insurance Company	6	2	1	\$300,000
Physicians Insurance Mutual	0	2	0	\$0
Missouri Medical Malpractice Joint Underwriting	3	2	2	\$1,150,000
Coverys Specialty Insurance Company	4	2	0	\$0
Allied World Specialty Insurance Company	0	2	2	\$250,000
National Union Fire Insurance Company Of Pittsburg Pa	0	2	0	\$0
Admiral Insurance Company	0	2	0	\$0
Ismie Mutual Insurance Company	7	2	0	\$0
Paco Assurance Company Inc	0	1	1	\$125,000
Cincinnati Insurance Company The	1	1	1	\$5,500
Fortress Insurance Company	1	1	0	\$0

Medical Malpractice Actions by Company, 2019
Sorted by Descending Number of Paid Claims

Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Applied Medico-Legal Solutions Rrg Inc	1	1	0	\$0
Pharmacists Mutual Insurance Company	6	1	0	\$0
Proassurance Insurance Company Of America	1	1	1	\$8,500
Zurich American Insurance Company	0	1	1	\$75,000
Liberty Insurance Underwriters Inc	1	1	1	\$200,000
Massachusetts Bay Insurance Company	0	1	1	\$210,000
Allied World Insurance Company	0	1	0	\$0
Allied World Surplus Lines Insurance Company	1	1	1	\$75,000
Ironshore Speciality Insurance Company	1	1	1	\$50,000
Steadfast Insurance Company	0	1	1	\$250,000
Axis Surplus Insurance Company	1	1	1	\$197,500
Cincinnati Casualty Company The	0	1	1	\$7,000
Landmark American Insurance Company	0	1	1	\$400,000
Intermed Insurance Company	0	1	0	\$0
Centennial Casualty Company	1	1	1	\$110,000
Kansas Medical Mutual Insurance Company	2	1	1	\$125,000
Fair American Insurance And Reinsurance Company	0	1	1	\$35,000
Evanston Insurance Company	0	1	1	\$175,000
Health Care Indemnity Inc	0	1	1	\$900,000
Preferred Professional Insurance Company	1	1	1	\$47,500
Liberty Surplus Insurance Corporation	1	0	0	\$0
Missouri Doctors Mutual Insurance Company	2	0	0	\$0
Church Mutual Insurance Company S.I.	1	0	0	\$0
American Alternative Insurance Corporation	1	0	0	\$0
Tdc Specialty Insurance Company	1	0	0	\$0
Norcal Specialty Insurance Company	1	0	0	\$0
Hudson Specialty Insurance Company	1	0	0	\$0

Medical Malpractice Actions by Company, 2018				
Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	305	327	190	\$102,751,638
Missouri Hospital Plan	91	132	58	\$30,209,872
Norcal Mutual Insurance Company	46	62	17	\$10,335,555
Medical Protective Company	67	42	6	\$575,000
Proassurance Indemnity Company Inc	30	42	5	\$2,234,436
Missouri Professionals Mutual-Physicians Professional	12	38	9	\$1,748,398
Doctors Company An Interins Exchange	45	31	11	\$2,672,500
Medical Liability Alliance	36	30	12	\$5,212,500
St Lukes Health System Risk Retention Group	28	26	11	\$4,991,825
Columbia Casualty Company	36	23	10	\$2,876,883
Lexington Insurance Company	18	21	0	\$0
Mmic Insurance Inc	25	16	3	\$1,037,500
Continental Casualty Company	9	16	8	\$967,500
Missouri Doctors Mutual Insurance Company	6	14	6	\$1,207,500
Arch Specialty Insurance Company	19	10	3	\$291,000
American Casualty Company Of Reading Pennsylvania	3	9	4	\$1,069,999
Medicus Insurance Company	0	8	3	\$1,121,865
Preferred Physicians Medical Risk Retention Group A Mutual	9	8	1	\$70,000
Ncmic Insurance Company	8	7	3	\$327,500
National Fire & Marine Insurance Company	15	7	0	\$0
Allied World Surplus Lines Insurance Company	1	6	5	\$492,000
Keystone Mutual Insurance Company	6	5	3	\$425,000
Capson Physicians Insurance Company	4	5	2	\$70,000
Ironshore Speciality Insurance Company	2	5	4	\$798,500
Kansas Medical Mutual Insurance Company	1	5	3	\$1,550,000
Lloyds Of London Syndicate #2001	2	5	3	\$415,000
Health Care Industry Liability Reciprocal Insurance Company	2	4	2	\$350,000
Galen Insurance Company	0	4	3	\$409,733
Physicians Insurance Mutual	3	4	3	\$815,000
Pharmacists Mutual Insurance Company	3	4	2	\$285,000
Homeland Insurance Company Of New York	4	4	2	\$345,000
Evanston Insurance Company	1	4	1	\$62,500
Hudson Specialty Insurance Company	0	4	2	\$5,300,000
Zurich American Insurance Company	4	3	2	\$290,000
Allied World Insurance Company	2	3	0	\$0
Cincinnati Insurance Company The	4	2	1	\$10,000
Professional Solutions Insurance Company	7	2	1	\$40,000
Emergency Medicine Risk Retention Group Inc	0	2	2	\$1,025,000
Physicians Standard Insurance Company	22	2	1	\$187,500

Medical Malpractice Actions by Company, 2018				
Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Missouri Medical Malpractice Joint Underwriting Association	1	2	2	\$700,000
Massachusetts Bay Insurance Company	1	2	2	\$283,333
Ace American Insurance Company	0	2	2	\$585,000
Steadfast Insurance Company	0	2	1	\$1,944,991
Preferred Professional Insurance Company	4	2	1	\$100,000
Oms National Insurance Company Rrg	5	2	2	\$35,000
Proassurance Specialty Insurance Inc	7	1	1	\$150,000
Paco Assurance Company Inc	0	1	1	\$775,000
Fortress Insurance Company	0	1	0	\$0
Physicians Professional Indemnity Association	0	1	1	\$125,000
Emergency Physicians Insurance Exchange Risk Retention	0	1	0	\$0
James River Insurance Company	0	1	0	\$0
Orthoforum Insurance Company A Risk Retention Group	0	1	0	\$0
Proassurance Insurance Company Of America	1	1	1	\$75,000
Hudson Excess Insurance Company	3	1	1	\$15,024
Allied World Specialty Insurance Company	0	1	1	\$4,000
National Union Fire Insurance Company Of Pittsburg Pa	1	1	0	\$0
American Alternative Insurance Corporation	1	1	0	\$0
Liberty Insurance Underwriters Inc	1	1	1	\$90,000
Chicago Insurance Company	0	1	1	\$70,000
Admiral Insurance Company	1	1	1	\$50,000
Illinois Union Insurance Company	1	1	0	\$0
Intermed Insurance Company	0	1	1	\$125,000
Tdc Specialty Insurance Company	0	1	1	\$15,000
Centennial Casualty Company	2	1	1	\$126,000
Essex Insurance Company	0	1	0	\$0
Cincinnati Specialty Underwriters Insurance Company The	1	0	0	\$0
Coverys Specialty Insurance Company	1	0	0	\$0
Cincinnati Casualty Company The	1	0	0	\$0
Mt Hawley Insurance Company	1	0	0	\$0

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	312	339	193	\$85,132,771
Missouri Hospital Plan	109	93	32	\$13,150,919
Missouri Professionals Mutual-Physicians Professional	40	63	24	\$3,573,000
Medical Protective Company	60	60	4	\$2,575,000
Norcal Mutual Insurance Company	62	38	8	\$1,185,000
Columbia Casualty Company	40	36	20	\$3,262,371
Proassurance Indemnity Company Inc	37	34	7	\$769,650
Medical Liability Alliance	37	32	10	\$2,190,000
Doctors Company An Interins Exchange	29	28	10	\$4,482,540
Lexington Insurance Company	9	20	4	\$416,500
Continental Casualty Company	20	20	5	\$596,500
Mmic Insurance Inc	9	16	4	\$875,000
St Lukes Health System Risk Retention Group	18	12	9	\$1,531,500
American Casualty Company Of Reading Pennsylvania	10	12	4	\$115,750
Medicus Insurance Company	0	9	3	\$1,475,000
Physicians Professional Indemnity Association	0	8	7	\$1,950,000
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	4	7	7	\$1,905,000
Ncmic Insurance Company	8	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	8	5	0	\$0
Admiral Insurance Company	5	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
Proassurance Insurance Company Of America	3	4	2	\$80,000
Allied World Surplus Lines Insurance Company	2	4	1	\$2,500
Ironshore Speciality Insurance Company	5	4	4	\$700,000
Oms National Insurance Company Rrg	3	4	0	\$0
Physicians Insurance Mutual	1	3	1	\$50,000
Steadfast Insurance Company	6	3	3	\$1,437,500
Centennial Casualty Company	2	3	3	\$225,679
Essex Insurance Company	0	3	2	\$335,846
Lloyds Of London Syndicate #2001	1	3	2	\$225,000
Proassurance Specialty Insurance Inc	2	2	1	\$4,800,000

Medical Malpractice Actions by Company, 2017				
Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
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
Intermed Insurance Company	0	2	1	\$500,000
Homeland Insurance Company Of New York	4	2	1	\$175,000
Kansas Medical Mutual Insurance Company	2	2	0	\$0
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
National Union Fire Insurance Company Of Pittsburg Pa	2	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	3	0	0	\$0
Zurich American Insurance Company	5	0	0	\$0
Allied World Specialty Insurance Company	1	0	0	\$0
Liberty Insurance Underwriters Inc	1	0	0	\$0
Arch Specialty Insurance Company	8	0	0	\$0
Massachusetts Bay Insurance Company	1	0	0	\$0
Allied World Insurance Company	4	0	0	\$0
Cincinnati Casualty Company The	1	0	0	\$0
Tdc Specialty Insurance Company	1	0	0	\$0
Fair American Insurance And Reinsurance Company	3	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, 2019				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	284	336	171	\$59,425,824
Misc . Corporations / Partnership, etc	235	225	57	\$20,406,750
General Physician / Surgeon	90	102	23	\$9,343,749
Nurses (excluding anesthesiologist)	44	58	5	\$660,000
Skilled Nursing Facilities	49	49	42	\$8,451,542
Orthopedics	57	48	10	\$3,737,250
Emergency Medicine	42	46	17	\$4,934,234
Dentists	49	42	7	\$446,626
OB / GYN	37	38	13	\$6,545,000
Radiology	22	33	8	\$3,315,000
Internal Medicine	34	32	5	\$825,000
Anesthesiology	22	28	7	\$2,561,875
Neurology / Neursurgeons	15	27	6	\$4,625,000
Clinics - Outpatient - Surgery	13	25	9	\$2,645,000
Cardiologists / Vascular Specialists	22	23	4	\$825,000
Physicians - Misc.	3	18	1	\$350,000
Clinics - Outpatient Only, No Surgery	14	18	7	\$984,375
Hospitalists	12	14	2	\$1,500,000
Urologists	11	13	1	\$47,500
Physicians / Surgeons Assistants	5	10	7	\$1,695,000
Nurse Anesthetists	12	9	2	\$425,000
Ophthalmology	10	8	2	\$675,000
Gastroenterology	7	8	2	\$157,500
Otorhinolaryngology	6	7	3	\$1,445,000
Chiropractor	7	7	1	\$100,000
Nursing Homes	12	7	2	\$275,000
All other (speech therapists, message therapists,	8	7	6	\$609,500
Psychiatry	5	6	3	\$410,000
Cosmetic Surgery	10	5	1	\$925,000
Physical Medicine	4	5	0	\$0
Pediatricians	3	5	0	\$0
Dermatology	2	4	0	\$0
Psychologists	2	3	1	\$60,000
Pathology	4	3	0	\$0
Oncology	2	3	0	\$0
Radiologists - Non-Physicians (techs, etc)	1	3	0	\$0
Pharmacists / Pharmacies	6	2	1	\$7,000

Indemnity by Specialty / Entity Type, 2019
Sorted by Number of Closed Actions

Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hematology	0	2	1	\$500,000
Infectious Disease	1	2	0	\$0
Endocrinology	1	2	0	\$0
Geriatrics	3	2	0	\$0
Intensive Care Physicians	2	2	0	\$0
Alcohol / Drug Rehabilitation Centers	0	2	2	\$250,000
Podiatrists	5	2	1	\$8,500
Occupational Medicine	0	1	0	\$0
Pulmonologists	4	1	0	\$0
Cardiac Centers	0	1	0	\$0
Allergy / Immunologists	1	0	0	\$0
Nephrology	4	0	0	\$0
EMT	2	0	0	\$0
Blood Banks	1	0	0	\$0
Optometrists	1	0	0	\$0

Indemnity by Specialty / Entity Type, 2018				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	317	387	251	\$94,914,770
Misc . Corporations / Partnership, etc	277	235	77	\$30,926,179
General Physician / Surgeon	133	101	25	\$7,117,750
Orthopedics	66	82	20	\$5,727,750
Nurses (excluding anesthesiologist)	86	61	20	\$2,244,750
OB / GYN	21	44	12	\$5,376,050
Internal Medicine	39	43	10	\$5,093,768
Clinics - Outpatient - Surgery	25	42	22	\$7,733,500
Dentists	47	39	13	\$268,495
Skilled Nursing Facilities	44	38	43	\$9,610,792
Emergency Medicine	33	37	15	\$4,933,750
Cardiologists / Vascular Specialists	26	34	5	\$1,589,999
Clinics - Outpatient Only, No Surgery	28	31	17	\$2,643,304
Neurology / Neurosurgeons	22	23	13	\$5,277,500
Radiology	31	21	5	\$3,012,500
Anesthesiology	30	19	8	\$11,145,000
Physical Medicine	3	13	1	\$50,000
Cosmetic Surgery	12	12	5	\$1,516,000
Physicians - Misc.	28	12	3	\$700,000
Podiatrists	4	12	6	\$1,136,449
All other (speech therapists, message therapists,	11	12	7	\$332,500
Urologists	13	11	2	\$97,500
Ophthalmology	12	11	2	\$360,000
Pharmacists / Pharmacies	3	10	4	\$320,000
Hospitalists	11	10	3	\$1,675,000
Pediatricians	12	10	6	\$3,987,500
Chiropractor	8	9	4	\$1,102,500
Gastroenterology	9	8	3	\$105,000
Nursing Homes	20	7	4	\$687,500
Nurse Anesthetists	14	7	2	\$1,225,000
Physicians / Surgeons Assistants	5	6	3	\$420,597
Otorhinolaryngology	4	6	2	\$791,865
Pathology	6	6	1	\$300,000
Alcohol / Drug Rehabilitation Centers	0	5	1	\$4,000
Infectious Disease	5	4	1	\$375,000
Psychiatry	5	3	1	\$156,099
Psychologists	1	3	0	\$0
Geriatrics	2	3	0	\$0
Oncology	3	3	2	\$2,700,000

Indemnity by Specialty / Entity Type, 2018				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Nephrology	1	2	0	\$0
EMT	2	2	1	\$87,500
Forensic / Legal Medicine	0	1	1	\$425,000
Hematology	0	1	1	\$75,000
Endocrinology	1	1	0	\$0
Dermatology	6	1	2	\$705,000
Rehabilitation Hospitals	1	1	0	\$0
Cardiac Centers	0	1	0	\$0
Radiologists - Non-Physicians (techs, etc)	3	1	0	\$0
Midwives	0	1	1	\$600,000
Pulmonologists	1	0	0	\$0
Hospices	1	0	0	\$0
Mental Institutions	1	0	0	\$0
Optometrists	1	0	0	\$0

Indemnity by Specialty of Individual / Entity Type, 2017				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	325	331	277	\$82,194,788
Misc . Corporations / Partnership, etc	256	269	111	\$35,641,086
General Physician / Surgeon	97	122	43	\$13,123,330
Orthopedics	69	59	22	\$4,963,500
OB / GYN	35	58	17	\$7,047,500
Dentists	59	44	16	\$995,294
Emergency Medicine	61	43	28	\$9,300,484
Nurses (excluding anesthesiologist)	45	43	17	\$2,325,119
Skilled Nursing Facilities	39	35	46	\$10,283,750
Internal Medicine	39	32	9	\$1,044,564
Cardiologists / Vascular Specialists	33	30	7	\$5,872,150
Radiology	33	28	10	\$3,812,500
Neurology / Neursurgeons	15	27	9	\$6,022,500
Clinics - Outpatient Only, No Surgery	19	23	9	\$1,590,500
Clinics - Outpatient - Surgery	29	22	16	\$10,010,334
Anesthesiology	17	20	8	\$2,522,500
Pediatricians	12	17	8	\$10,909,044
Urologists	9	14	4	\$1,000,000
All other (speech therapists, message	16	14	7	\$805,000
Gastroenterology	9	13	2	\$350,000
Nursing Homes	7	13	6	\$698,001
Nurse Anesthetists	4	10	3	\$725,000
Physicians / Surgeons Assistants	11	9	5	\$1,130,597
Cosmetic Surgery	5	9	3	\$355,000
Hospitalists	14	9	4	\$1,037,000
Otorhinolaryngology	6	9	1	\$90,000
Chiropractor	11	8	8	\$1,409,500
Pharmacists / Pharmacies	9	7	9	\$342,500
Dermatology	3	6	1	\$500,000
Podiatrists	6	6	4	\$305,000
Psychiatry	14	4	4	\$450,000
Ophthalmology	7	4	1	\$250,000
Physicians - Misc.	11	4	2	\$365,000
Infectious Disease	6	3	0	\$0
Nephrology	0	3	0	\$0
Pathology	5	3	0	\$0
Psychologists	4	2	1	\$100,000
Allergy / Immunologists	0	2	1	\$75,000
Pulmonologists	1	2	0	\$0

Indemnity by Specialty of Individual / Entity Type, 2017				
Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Oncology	4	2	0	\$0
Radiologists - Non-Physicians (techs, etc)	3	2	1	\$300,000
Physical Medicine	13	1	0	\$0
Hematology	2	1	0	\$0
Geriatrics	4	1	0	\$0
Hospices	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
Sanitarium - not hospital or mental health	1	0	0	\$0
Blood Banks	1	0	0	\$0
Optometrists	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

Disposition, All Cases, 2019									
Disposition	Claim Reports		Average Months		Average Injury Severity	Average Paid			
	Claims	Percent	Incident to Report	Incident to Disposition		Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Resulting in Payment									
Claims settled before litigation	83	26.0%	11	25	4.4	\$41,018	\$87,031	\$128,049	\$8,581
Settled before judgment	234	73.4%	18	52	6.2	\$205,696	\$285,246	\$495,194	\$116,929
Settled after verdict	2	0.6%	12	16	4.5	.	.	.	\$1,923
Total Settled	317	99.4%	16	45	5.7	\$162,579	\$233,348	\$399,065	\$88,560
Direct verdict for plaintiff	1	0.3%	23	53	9	.	\$145,594	\$145,594	.
Judgment for plaintiff	3	0.8%	57	100	7.3	\$110,000	\$257,341	\$400,674	\$91,387
Judgment for plaintiff after appeal	1	0.3%	19	44	9	\$30,000	\$30,000	\$60,000	\$524,425
Total Court Dispositions	5	1.3%	42	80	8	\$72,000	\$189,523	\$281,523	\$159,717
Total paid claim dispositions	376	100.0%	17	46	5.6	\$220,516	\$232,825	\$468,969	\$91,957
Closed Without Payment									
Claims closed before litigation	111	31.7%	15	34	3.6	.	.	.	\$4,062
Lawsuit closed or abandoned before trial	217	62.0%	23	46	4.8	.	.	.	\$65,060
Total not disposed by court	330	94.3%	20	42	4.4	.	.	.	\$44,160
Direct verdict for defendant	9	2.6%	33	97	6.4	.	.	.	\$278,936
Judgment for defendant	9	2.6%	35	65	6	.	.	.	\$189,798
Judgment for defendant after appeal	1	0.3%	20	128	3	.	.	.	\$52,159
Total Court Dispositions	19	5.4%	33	83	6.1	.	.	.	\$224,777
Total unpaid claim dispositions	349	100.0%	21	44	4.5	.	.	.	\$54,070

Means of Disposition, Cases Involving At Least One Physician or Surgeon, 2019									
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	9	5.5%	3	35	5.2	\$1,110,000	\$751,667	\$1,861,667	\$101,470
Settled before judgment	148	90.2%	21	58	6.2	\$250,494	\$303,517	\$591,777	\$149,615
Settled after verdict	1	0.6%	23	55	4	.	.	\$153,634	\$44,108
Total Settled	158	96.3%	20	56	6.2	\$297,868	\$327,123	\$661,340	\$146,205
Direct verdict for plaintiff	1	0.6%	23	53	9	.	\$145,594	\$145,594	.
Judgment for plaintiff	3	1.8%	57	100	7.3	\$110,000	\$257,341	\$400,674	\$91,387
Judgment for plaintiff after appeal	1	0.6%	19	44	9	\$30,000	\$30,000	\$60,000	\$524,425
Total Court Dispositions	5	3.0%	42	80	8	\$72,000	\$189,523	\$281,523	\$159,717
Total paid claim dispositions	164	100.0%	20	57	6.2	\$291,630	\$325,633	\$652,892	\$148,590
Claims Closed Without Payment									
Claims closed before litigation	26	13.6%	14	29	3.6	.	.	.	\$4,642
Lawsuit closed or abandoned before	147	77.0%	25	49	5.2	.	.	.	\$31,125
Total not disposed by court	173	90.6%	23	46	5	.	.	.	\$27,145
Direct verdict for defendant	6	3.1%	17	69	6	.	.	.	\$210,516
Judgment notwithstanding verdict for	1	0.5%	6	53	5	.	.	.	\$112,308
Judgment for defendant	8	4.2%	24	72	5.4	.	.	.	\$1,289,483
Judgment for defendant after appeal	1	0.50%	43	114	9	.	.	.	\$108,321
Total Court Dispositions	16	8.40%	21	73	5.8	.	.	.	\$737,474
Total unpaid claim dispositions	191	100.00	23	48	5	.	.	.	\$86,609

Means of Disposition, Cases Involving At Least One Hospital, 2019									
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	58	33.0%	11	23	4.6	\$42,089	\$88,313	\$130,402	\$7,500
Settled before judgment	118	67.0%	16	54	6.4	\$262,927	\$371,592	\$634,519	\$143,943
Total Settled	176	100.0%	14	44	5.8	\$190,151	\$278,239	\$468,390	\$98,979
Total paid claim dispositions	176	100.0%	14	44	5.8	\$190,151	\$278,239	\$468,390	\$98,979
Incidents Closed Without Payment									
Claims closed before litigation	43	33.1%	11	40	4.2	.	.	.	\$6,391
Lawsuit closed or abandoned before	83	63.8%	23	53	5.2	.	.	.	\$38,147
Total not disposed by court	126	96.9%	19	49	4.9	.	.	.	\$27,310
Direct verdict for defendant	3	2.3%	54	129	5.7	.	.	.	\$439,798
Judgment for defendant	1	0.8%	2	43	9	.	.	.	\$388,751
Total Court Dispositions	4	3.1%	41	107	6.5	.	.	.	\$427,036
Total unpaid claim dispositions	130	100.0%	19	51	4.9	.	.	.	\$39,609

Means of Disposition, All Cases, 2018									
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	86	22.9%	9	25	4.5	\$148,142	\$163,677	\$312,158	\$22,410
Settled before judgment	280	74.5%	18	52	5.9	\$238,148	\$250,874	\$508,999	\$109,570
Settled after verdict	3	0.8%	22	45	6.3	\$898,330	\$283,333	\$1,232,875	\$137,868
Total Settled	369	98.1%	16	46	5.6	\$222,538	\$230,816	\$469,008	\$89,486
Direct verdict for plaintiff	1	0.3%	23	53	9	.	\$145,594	\$145,594	.
Judgment for plaintiff	3	0.8%	57	100	7.3	\$110,000	\$257,341	\$400,674	\$91,387
Judgment for plaintiff after appeal	1	0.3%	19	44	9	\$30,000	\$30,000	\$60,000	\$524,425
Total Court Dispositions	5	1.3%	42	80	8	\$72,000	\$189,523	\$281,523	\$159,717
Total paid claim dispositions	376	100.0%	17	46	5.6	\$220,516	\$232,825	\$468,969	\$91,957
Incidents Closed Without Payment									
Claims closed before litigation	102	24.8%	11	31	3.9	.	.	.	\$2,848
Lawsuit closed or abandoned before	287	69.8%	22	47	4.9	.	.	.	\$27,388
Total not disposed by court	389	94.6%	19	43	4.6	.	.	.	\$20,953
Direct verdict for defendant	7	1.7%	16	69	6.4	.	.	.	\$180,442
Judgment notwithstanding verdict for	1	0.2%	6	53	5	.	.	.	\$112,308
Judgment for defendant	10	2.4%	22	64	4.8	.	.	.	\$1,037,056
Judgment for defendant after appeal	2	0.50%	42	87	9	.	.	.	\$60,438
Total Court Dispositions	20	4.90%	21	67	5.8	.	.	.	\$593,342
Total unpaid claim dispositions	411	100.00	19	44	4.7	.	.	.	\$48,818

Means of Disposition, All Involving At Least One Physician or Surgeon, 2018									
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	9	5.5%	3	35	5.2	\$1,110,000	\$751,667	\$1,861,667	\$101,470
Settled before judgment	148	90.2%	21	58	6.2	\$250,494	\$303,517	\$591,777	\$149,615
Settled after verdict	1	0.6%	23	55	4	.	.	\$153,634	\$44,108
Total Settled	158	96.3%	20	56	6.2	\$297,868	\$327,123	\$661,340	\$146,205
Direct verdict for plaintiff	1	0.6%	23	53	9	.	\$145,594	\$145,594	.
Judgment for plaintiff	3	1.8%	57	100	7.3	\$110,000	\$257,341	\$400,674	\$91,387
Judgment for plaintiff after appeal	1	0.6%	19	44	9	\$30,000	\$30,000	\$60,000	\$524,425
Total Court Dispositions	5	3.0%	42	80	8	\$72,000	\$189,523	\$281,523	\$159,717
Total paid claim dispositions	163	100.0%	20	57	6.2	\$291,630	\$325,633	\$652,892	\$148,590
Incidents Closed Without Payment									
Claims closed before litigation	26	13.6%	14	29	3.6	.	.	.	\$4,642
Lawsuit closed or abandoned before	147	77.0%	25	49	5.2	.	.	.	\$31,125
Total not disposed by court	173	90.6%	23	46	5	.	.	.	\$27,145
Direct verdict for defendant	6	3.1%	17	69	6	.	.	.	\$210,516
Judgment notwithstanding verdict for	1	0.5%	6	53	5	.	.	.	\$112,308
Judgment for defendant	8	4.2%	24	72	5.4	.	.	.	\$1,289,483
Judgment for defendant after appeal	1	0.50%	43	114	9	.	.	.	\$108,321
Total Court Dispositions	16	8.40%	21	73	5.8	.	.	.	\$737,474
Total unpaid claim dispositions	191	100.00	23	48	5	.	.	.	\$86,609

Means of Disposition, Cases Involving At Least One Hospital, 2018									
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	58	33.0%	11	23	4.6	\$42,089	\$88,313	\$130,402	\$7,500
Settled before judgment	118	67.0%	16	54	6.4	\$262,927	\$371,592	\$634,519	\$143,943
Total Settled	176	100.0%	14	44	5.8	\$190,151	\$278,239	\$468,390	\$98,979
Total paid claim dispositions	176	100.0%	14	44	5.8	\$190,151	\$278,239	\$468,390	\$98,979
Incidents Closed Without Payment									
Claims closed before litigation	43	33.1%	11	40	4.2	.	.	.	\$6,391
Lawsuit closed or abandoned before	83	63.8%	23	53	5.2	.	.	.	\$38,147
Total not disposed by court	126	96.9%	19	49	4.9	.	.	.	\$27,310
Direct verdict for defendant	3	2.3%	54	129	5.7	.	.	.	\$439,798
Judgment for defendant	1	0.8%	2	43	9	.	.	.	\$388,751
Total Court Dispositions	4	3.1%	41	107	6.5	.	.	.	\$427,036
Total unpaid claim dispositions	130	100.0%	19	51	4.9	.	.	.	\$39,609

Means of Disposition, All Cases, 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	95	26.10%	10	25	4.4	\$35,380	\$77,343	\$118,014	\$12,826
Settled before judgment	266	73.10%	17	51	6.1	\$202,228	\$275,371	\$479,695	\$172,429
Settled after verdict	1	0.30%	8	158	1	\$250,000	\$250,000	\$500,000	.
Total Settled	362	99.50%	15	44	5.7	\$158,574	\$223,332	\$384,835	\$130,068
Judgment for plaintiff	1	0.30%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total Court Dispositions	1	0.30%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total paid claim dispositions	363	100%	15	45	5.7	\$157,703	\$223,616	\$384,231	\$130,409
Incidents Closed Without Payment									
Claims closed before litigation	132	32.40%	14	29	3.8	.	.	.	\$5,770
Lawsuit closed or abandoned before	247	60.50%	24	48	5.1	.	.	.	\$42,027
Settled after verdict	1	0.20%	14	86	4
Total not disposed by court	380	93.10%	21	42	4.6	.	.	.	\$29,322
Direct verdict for defendant	11	2.70%	19	66	5.8	.	.	.	\$116,632
Judgment for defendant	15	3.70%	19	61	6.7	.	.	.	\$182,254
Judgment for defendant after appeal	1	0.20%	24	95	8	.	.	.	\$990,405
Total Court Dispositions	27	6.60%	19	64	6.4	.	.	.	\$185,450
Total unpaid claim dispositions	407	100%	21	43	4.7	.	.	.	\$39,582

Means of Disposition, Cases Involving At Least One Physician, 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	9.60%	15	35	4.8	\$121,406	\$50,469	\$203,291	\$20,677
Settled before judgment	148	89.20%	20	56	6.4	\$238,521	\$345,283	\$585,105	\$255,820
Settled after verdict	1	0.60%	8	158	1	\$250,000	\$250,000	\$500,000	.
Total Settled	165	99.40%	19	55	6.2	\$227,234	\$316,117	\$547,565	\$231,468
Judgment for plaintiff	1	0.60%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total Court Dispositions	1	0.60%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total paid claim dispositions	166	100%	19	55	6.2	\$225,865	\$315,418	\$545,471	\$231,551
Incidents Closed Without Payment									
Claims closed before litigation	48	23.50%	19	33	4.1	.	.	.	\$12,278
Lawsuit closed or abandoned before	136	66.70%	27	53	5.3	.	.	.	\$59,918
Total not disposed by court	184	90.20%	25	48	5	.	.	.	\$47,490
Direct verdict for defendant	8	3.90%	23	70	6.6	.	.	.	\$142,938
Judgment for defendant	11	5.40%	22	63	6.5	.	.	.	\$144,402
Judgment for defendant after appeal	1	0.50%	24	95	8	.	.	.	\$990,405
Total Court Dispositions	20	9.80%	23	67	6.6	.	.	.	\$186,117
Total unpaid claim dispositions	204	100.00	25	49	5.1	.	.	.	\$61,081

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	23.4%	10	23	4.4	\$16,891	\$73,489	\$90,380	\$12,347
Settled before judgment	146	76.0%	15	52	6.1	\$224,690	\$371,225	\$596,201	\$248,496
Total Settled	191	99.5%	14	45	5.7	\$175,732	\$301,078	\$477,028	\$192,858
Total paid claim dispositions	191	100.0%	14	45	5.7	\$175,732	\$301,078	\$477,028	\$192,858
Incidents Closed Without Payment									
Claims closed before litigation	42	32.1%	12	34	4	.	.	.	\$13,496
Lawsuit closed or abandoned before	81	62%	24	54	5.3	.	.	.	\$72,879
Settled after verdict	1	0.8%	14	86	4
Total not disposed by court	124	94.7%	20	48	4.9	.	.	.	\$52,178
Direct verdict for defendant	2	1.5%	8	55	5.5	.	.	.	\$75,621
Judgment for defendant	3	2.3%	10	71	8	.	.	.	\$264,331
Judgment for defendant after appeal	1	0.8%	24	95	8	.	.	.	\$990,405
Total Court Dispositions	6	4.6%	12	70	7.2	.	.	.	\$322,440
Total unpaid claim dispositions	130	100.0%	19	49	4.9	.	.	.	\$64,158

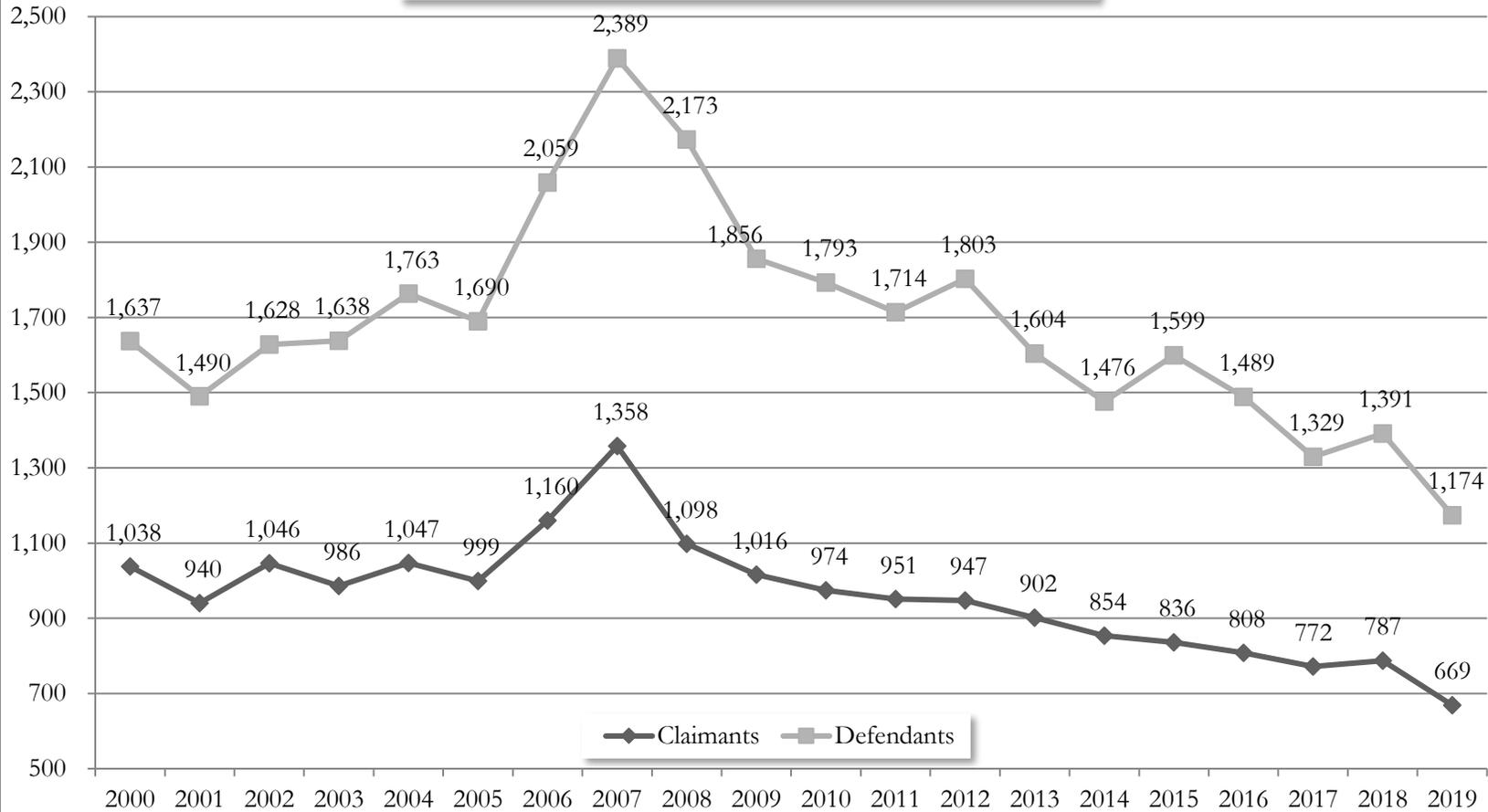
Section VII

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 DCI database.

This report presents two alternative methods of aggregating the data, only recently available to DCI'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 DCI claims data. See the executive summary for further discussion.

Defendant and Claimant Count, By Year Closed



Closed Malpractice Actions by Type of Defendants 1997-2019										
	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
Year Case Was Closed	Total	Paid	Total Indemnity	Average Recovery Per Claimant	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1997	1,006	437	\$89,262,936	\$204,263	769	677	163	201	260	72
1998	1,013	420	\$73,473,271	\$174,936	747	645	182	136	255	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	446	\$118,549,306	\$265,806	732	758	148	208	301	42
2004	1,047	427	\$128,704,434	\$301,416	828	759	176	223	255	56
2005	999	401	\$136,180,518	\$339,602	813	695	182	195	248	60
2006	1,160	437	\$121,150,893	\$277,233	952	878	229	171	289	64
2007	1,358	630	\$146,117,552	\$231,933	989	1,209	191	221	473	74
2008	1,098	484	\$131,808,834	\$272,332	914	1,071	188	158	441	41
2009	1,016	445	\$137,047,345	\$307,972	750	925	181	153	342	54
2010	974	462	\$110,652,736	\$239,508	756	882	155	141	375	45
2011	951	457	\$135,429,805	\$296,345	634	893	187	129	389	46
2012	947	460	\$136,354,747	\$296,423	711	924	168	143	388	48
2013	902	400	\$119,176,016	\$297,940	616	799	189	122	291	56
2014	854	392	\$142,547,594	\$363,642	532	782	162	117	311	48
2015	836	397	\$132,400,179	\$333,502	588	815	196	122	310	69
2016	808	396	\$185,095,318	\$467,412	571	732	186	138	302	63
2017	772	364	\$139,860,194	\$384,231	512	701	116	118	299	36
2018	787	376	\$176,332,395	\$468,969	494	764	133	112	317	38
2019	669	319	\$127,933,365	\$401,045	420	644	110	98	270	24

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

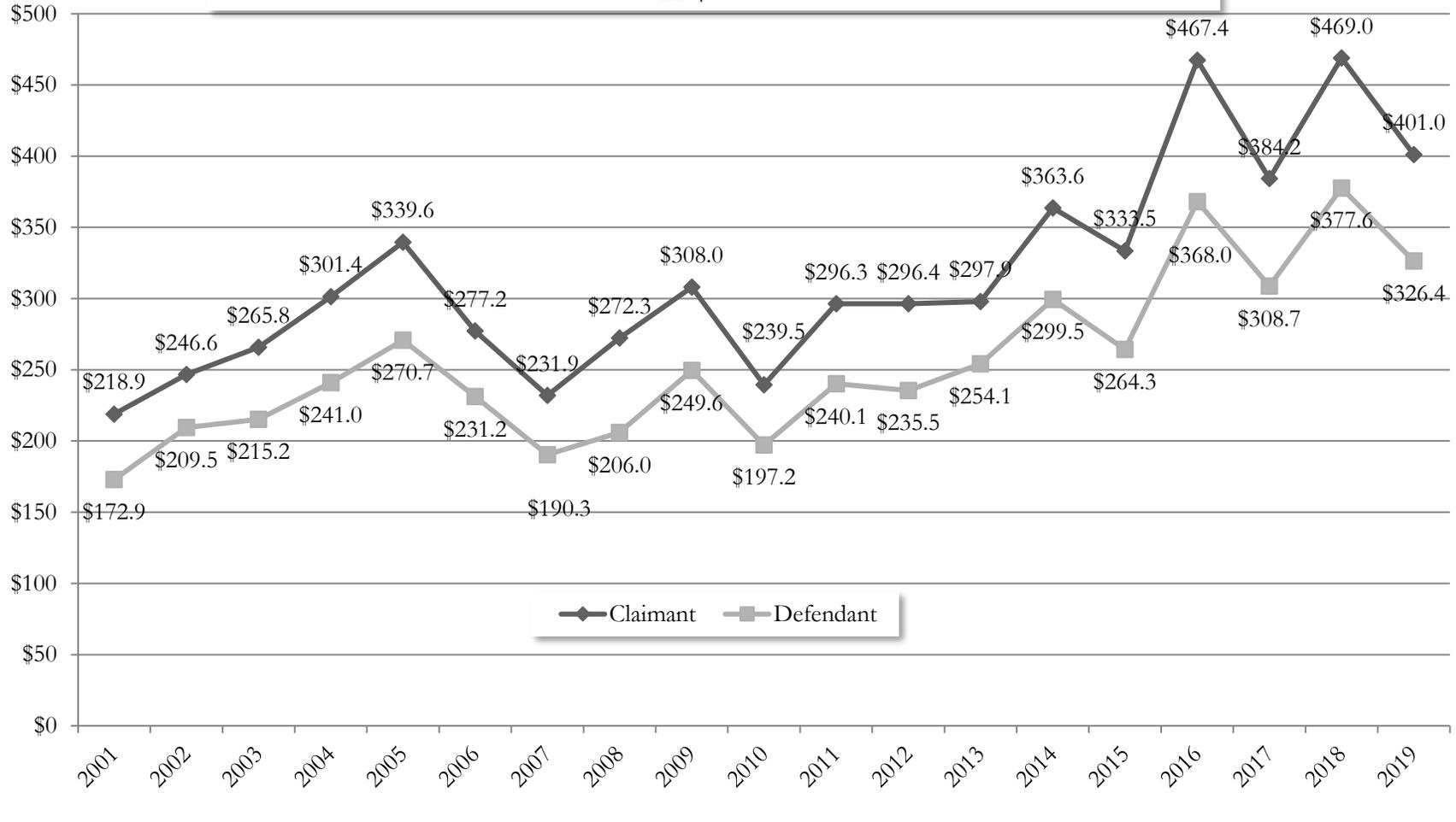
Cases Involving At Least One Physician Defendant, Closed 1997-2019										
	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1997	556	228	\$70,821,499	\$310,621	769	320	21	201	106	8
1998	530	183	\$50,669,231	\$276,881	747	284	15	136	89	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	569	226	\$100,559,047	\$444,952	813	354	46	195	111	13
2006	660	219	\$87,767,272	\$400,764	952	481	64	171	122	8
2007	700	301	\$98,118,404	\$325,975	989	613	48	221	182	16
2008	565	249	\$92,372,370	\$370,973	914	569	63	158	213	5
2009	504	237	\$100,140,247	\$422,533	750	477	54	153	174	6
2010	513	212	\$71,038,316	\$335,086	756	465	40	141	158	3
2011	429	193	\$85,717,945	\$444,134	634	417	76	129	147	11
2012	456	209	\$94,160,400	\$450,528	711	481	51	143	165	5
2013	434	185	\$81,267,740	\$439,285	616	396	62	122	107	12
2014	399	170	\$86,158,143	\$506,813	532	361	53	117	110	10
2015	396	161	\$81,654,850	\$507,173	588	388	56	122	99	16
2016	378	191	\$142,063,757	\$743,789	571	369	60	138	132	14
2017	370	166	\$90,548,148	\$545,471	512	320	35	118	115	9
2018	355	164	\$107,074,266.00	\$652,892	494	341	44	112	118	8
2019	311	139	\$89,547,499.00	\$644,227	420	306	37	98	98	5

Cases Involving At Least One Payment Made on Behalf of a Physician Defendant, Closed 1997-2019										
	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
1997	179	179	\$57,760,631	\$322,685	248	102	5	201	40	2
1998	126	126	\$33,509,245	\$265,946	175	77	2	136	28	
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	198	198	\$69,625,408	\$351,643	307	167	21	221	63	13
2008	142	142	\$67,051,477	\$472,194	244	130	13	158	60	3
2009	144	144	\$64,461,135	\$447,647	211	139	8	153	69	3
2010	129	129	\$50,190,262	\$389,072	211	129	8	141	58	1
2011	110	110	\$59,668,978	\$542,445	200	106	19	129	49	6
2012	129	129	\$69,222,975	\$536,612	205	138	11	143	75	3
2013	112	112	\$46,689,299	\$416,869	159	83	8	122	25	5
2014	110	110	\$59,937,853	\$544,890	144	106	14	117	46	7
2015	110	110	\$63,832,275	\$580,293	163	121	13	122	45	11
2016	117	117	\$98,686,787	\$843,477	183	110	22	138	49	7
2017	105	105	\$66,330,226	\$631,716	151	97	13	118	47	5
2018	102	102	\$88,079,922	\$863,529	160	106	8	112	53	2
2019	88	88	\$65,227,999	\$741,227	128	87	5	98	34	4

Cases Involving At Least One Institutional Defendant (Including Nursing Homes, Hospitals, Clinics & Group Practices) Closed 1997-2019										
	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
1997	571	274	\$68,932,758	\$251,579	393	677	26	94	260	8
1998	563	275	\$60,326,106	\$219,368	364	645	27	68	255	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	326	\$92,831,105	\$284,758	383	758	26	113	301	9
2004	622	302	\$104,195,247	\$345,017	439	759	33	125	255	14
2005	593	278	\$109,197,786	\$392,798	445	695	37	114	248	11
2006	720	328	\$101,575,111	\$309,680	569	878	59	104	289	13
2007	964	493	\$120,641,810	\$244,710	658	1209	48	131	473	15
2008	786	391	\$115,302,963	\$294,892	632	1071	51	92	441	6
2009	729	349	\$117,928,738	\$337,905	534	925	45	101	342	7
2010	700	377	\$97,104,591	\$257,572	526	882	46	90	375	6
2011	719	389	\$125,589,788	\$322,853	438	893	82	91	389	13
2012	727	387	\$119,048,134	\$307,618	517	924	44	103	388	7
2013	653	308	\$105,268,598	\$341,781	434	799	64	65	291	11
2014	638	320	\$131,844,423	\$412,014	383	782	63	78	311	11
2015	633	332	\$118,192,221	\$356,001	422	815	74	88	310	23
2016	594	313	\$145,581,016	\$465,115	404	732	59	92	302	13
2017	570	299	\$120,262,788	\$402,217	327	701	33	76	299	7
2018	616	325	\$157,373,123	\$484,225	362	764	62	84	317	15
2019	532	282	\$113,346,116	\$401,937	309	644	58	67	270	13

Cases Involving At Least One Payment Made on Behalf of an Institutional Defendant (Including Nursing Homes, Hospitals, Clinics & Group Practices) Closed 1997-2019										
	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
1997	229	229	\$55,223,758	\$241,152	144	293	8	44	260	4
1998	236	236	\$52,754,871	\$223,538	122	275	11	27	255	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	273	273	\$80,035,669	\$293,171	162	352	8	56	301	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	274	274	\$85,029,472	\$310,327	198	363	38	49	289	8
2007	428	428	\$107,210,371	\$250,492	242	555	18	63	473	8
2008	358	358	\$102,771,123	\$287,070	282	534	21	56	441	2
2009	308	308	\$108,005,147	\$350,666	245	422	25	61	342	3
2010	343	343	\$84,648,036	\$246,787	225	441	21	53	375	5
2011	356	356	\$116,173,088	\$326,329	197	459	40	55	389	10
2012	349	349	\$102,996,277	\$295,118	233	458	17	64	388	1
2013	271	271	\$92,534,624	\$341,456	153	336	37	27	291	6
2014	280	280	\$117,939,711	\$421,213	147	359	22	35	311	9
2015	278	278	\$101,853,995	\$366,381	139	385	30	38	310	12
2016	271	271	\$122,641,916	\$452,553	170	350	29	47	302	10
2017	271	271	\$106,041,744	\$391,298	139	346	13	51	299	3
2018	286	286	\$145,969,525	\$510,383	151	368	22	52	317	5
2019	249	249	\$97,551,116	\$391,772	138	307	21	32	270	2

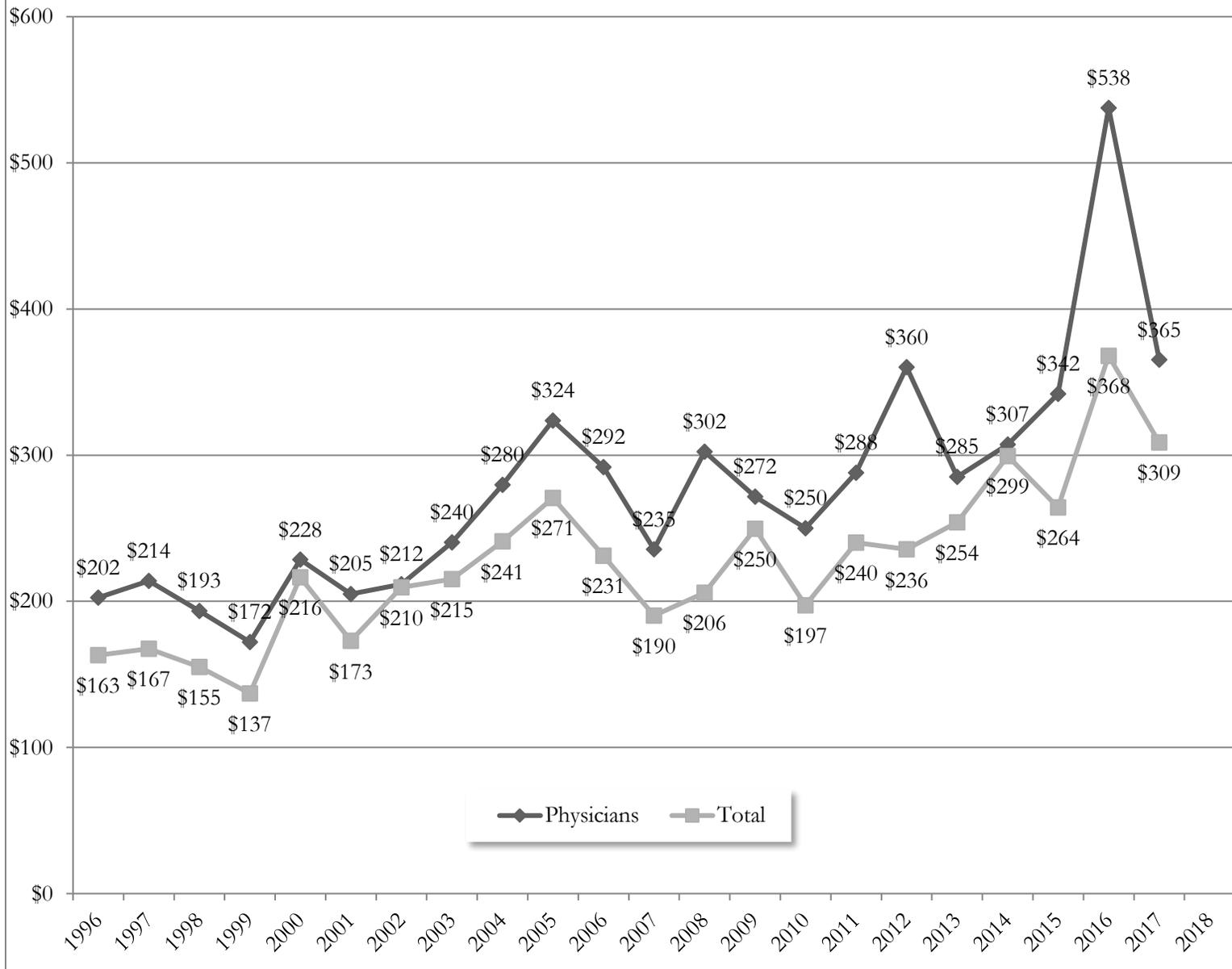
**Average Payment Received by Claimant, and Paid on Behalf of Defendant
in \$000s**



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
1997	769	201	\$213,930	677	260	\$170,440	163	72	\$27,063	1,609	533	\$167,473
1998	747	136	\$193,433	645	255	\$174,531	182	83	\$32,059	1,574	474	\$155,007
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	301	\$210,514	148	42	\$123,313	1,638	551	\$215,153
2004	828	223	\$279,692	759	255	\$246,580	176	56	\$61,698	1,763	534	\$241,020
2005	813	195	\$323,656	695	248	\$266,143	182	60	\$117,736	1,690	503	\$270,737
2006	952	171	\$291,873	878	289	\$221,439	229	64	\$113,196	2,059	524	\$231,204
2007	989	221	\$235,497	1209	473	\$184,329	191	74	\$93,040	2,389	768	\$190,257
2008	914	158	\$302,407	1071	441	\$181,574	188	41	\$96,446	2,173	640	\$205,951
2009	750	153	\$271,667	925	342	\$266,414	181	54	\$80,904	1,856	549	\$249,631
2010	756	141	\$250,029	882	375	\$194,547	155	45	\$54,301	1,793	561	\$197,242
2011	634	129	\$288,000	893	389	\$242,772	187	46	\$83,463	1,714	564	\$240,124
2012	711	143	\$360,290	924	388	\$209,955	168	48	\$70,226	1,803	579	\$235,500
2013	616	122	\$285,220	799	291	\$256,360	189	56	\$174,618	1,604	469	\$254,107
2014	532	117	\$307,260	782	311	\$330,249	162	48	\$81,061	1,476	476	\$299,470
2015	588	122	\$341,974	815	310	\$254,210	196	69	\$172,092	1,599	501	\$264,272
2016	571	138	\$537,675	732	302	\$321,909	186	63	\$217,138	1,489	503	\$367,983
2017	512	118	\$365,332	701	299	\$307,343	116	36	\$134,875	1329	453	\$308,742
2018	494	112	\$450,809	764	317	\$381,291	133	38	\$130,858	1391	467	377585.428
2019	420	98	\$426,598	644	270	\$308,364	110	24	\$119,521	1174	392	326360.625

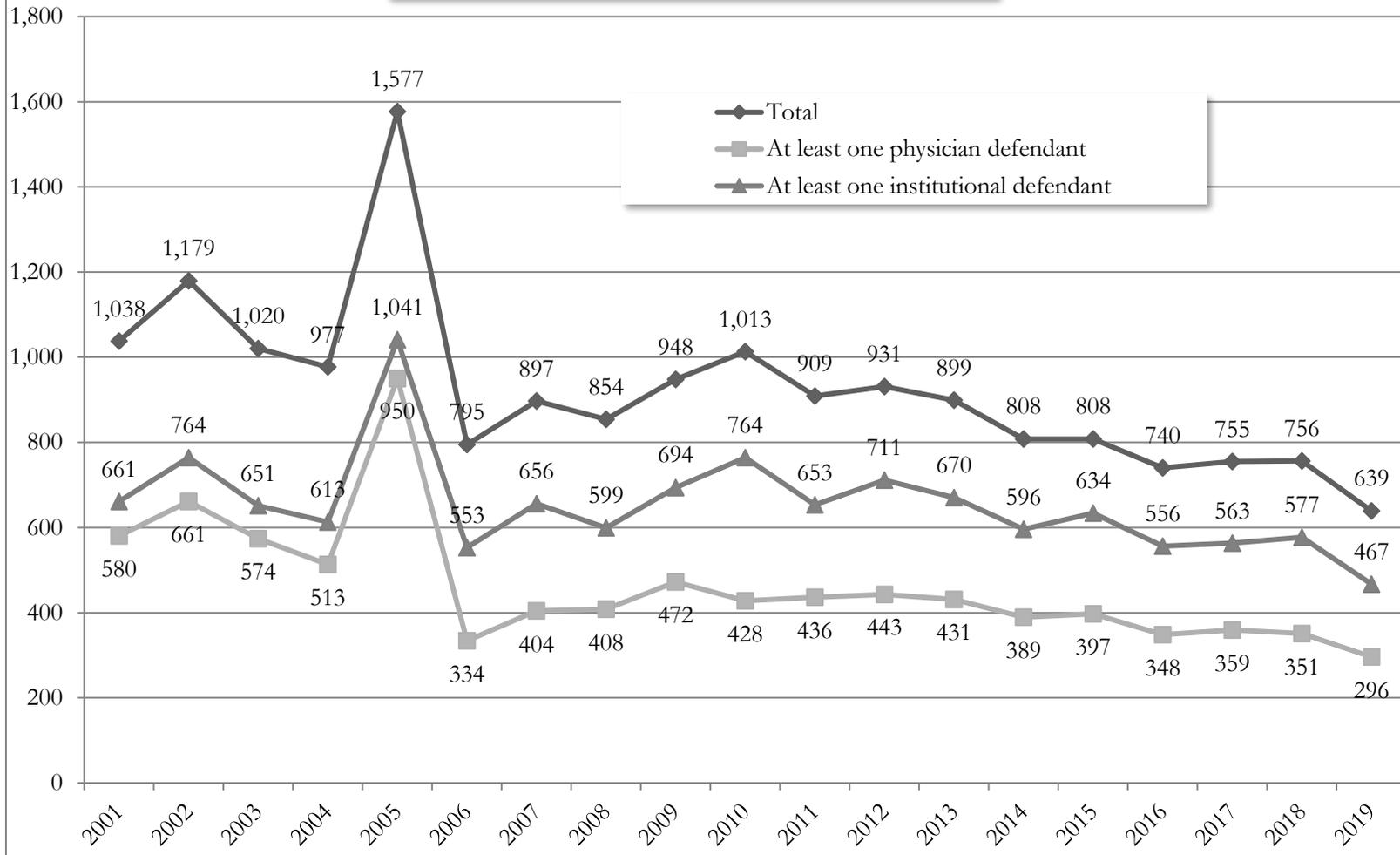
*Each defendant is counted in the year the occurrence was closed, regardless of whether the claim against the individual practitioner was closed in an earlier year.

Average Indemnity Per Defendant

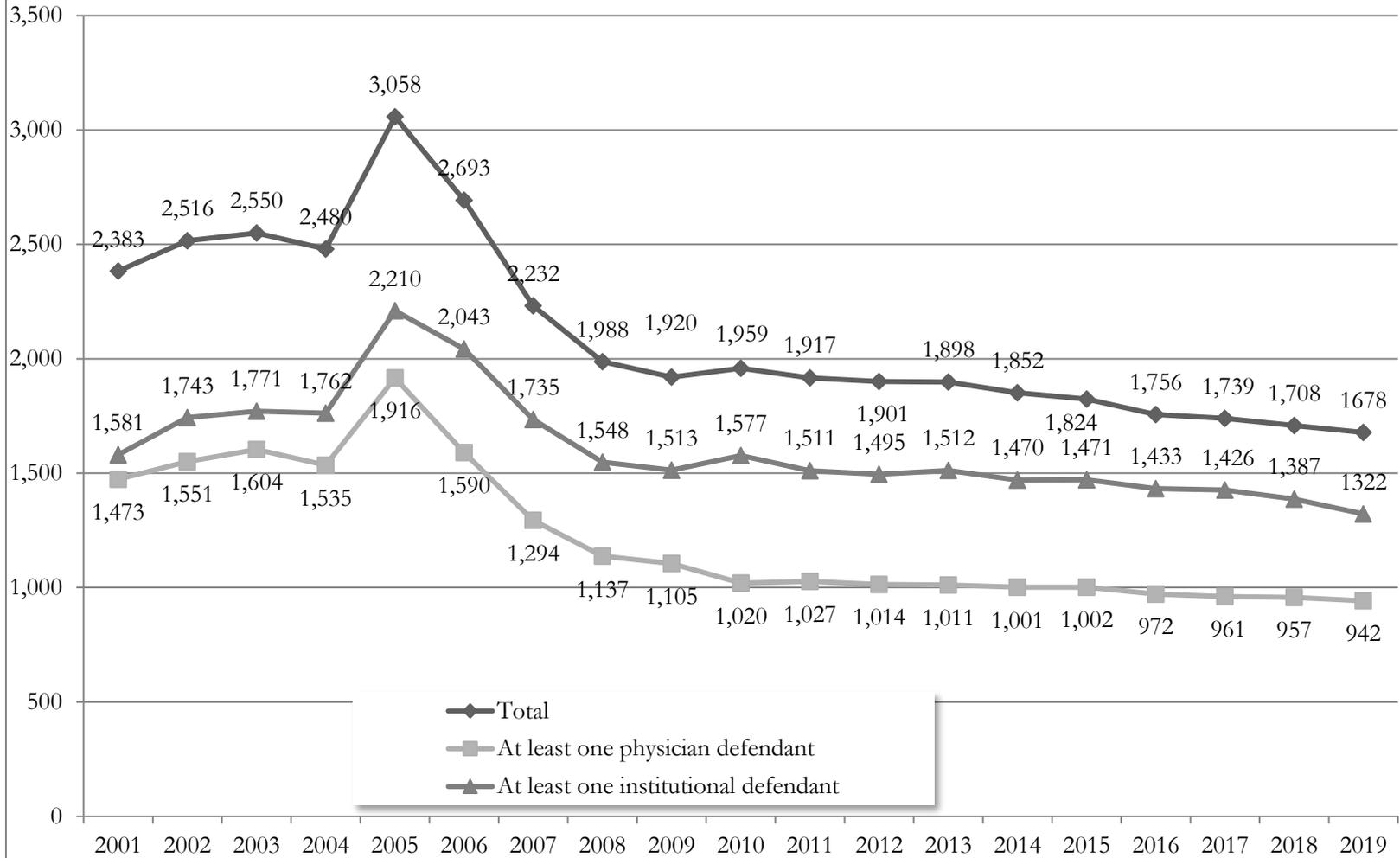


Claimants and Associated Number of Defendants By Report Year					
		Defendants			
Year Reported	Claimants	Physicians	Institutions	All Other	Total
1992	1,192	902	693	198	1,793
1993	1,148	933	692	185	1,810
1994	1,097	896	643	163	1,702
1995	1,163	934	708	186	1,828
1996	1,040	782	710	139	1,631
1997	1,001	708	663	163	1,534
1998	1,027	711	729	163	1,603
1999	1,018	729	721	171	1,621
2000	1,201	940	890	158	1,988
2001	1,038	815	818	171	1,804
2002	1,179	963	960	176	2,099
2003	1,020	801	832	187	1,820
2004	977	765	777	216	1,758
2005	1,577	1451	1386	260	3,097
2006	795	500	643	144	1,287
2007	897	614	793	165	1,572
2008	854	575	722	162	1,459
2009	948	682	870	151	1,703
2010	1,013	597	933	201	1,731
2011	909	618	804	202	1,624
2012	931	595	857	198	1,650
2013	899	619	855	181	1,655
2014	808	545	735	148	1,428
2015	808	573	805	136	1,514
2016	740	508	695	122	1,325
2017	755	515	698	132	1,345
2018	756	512	708	154	1,374
2019	639	380	560	117	1,057

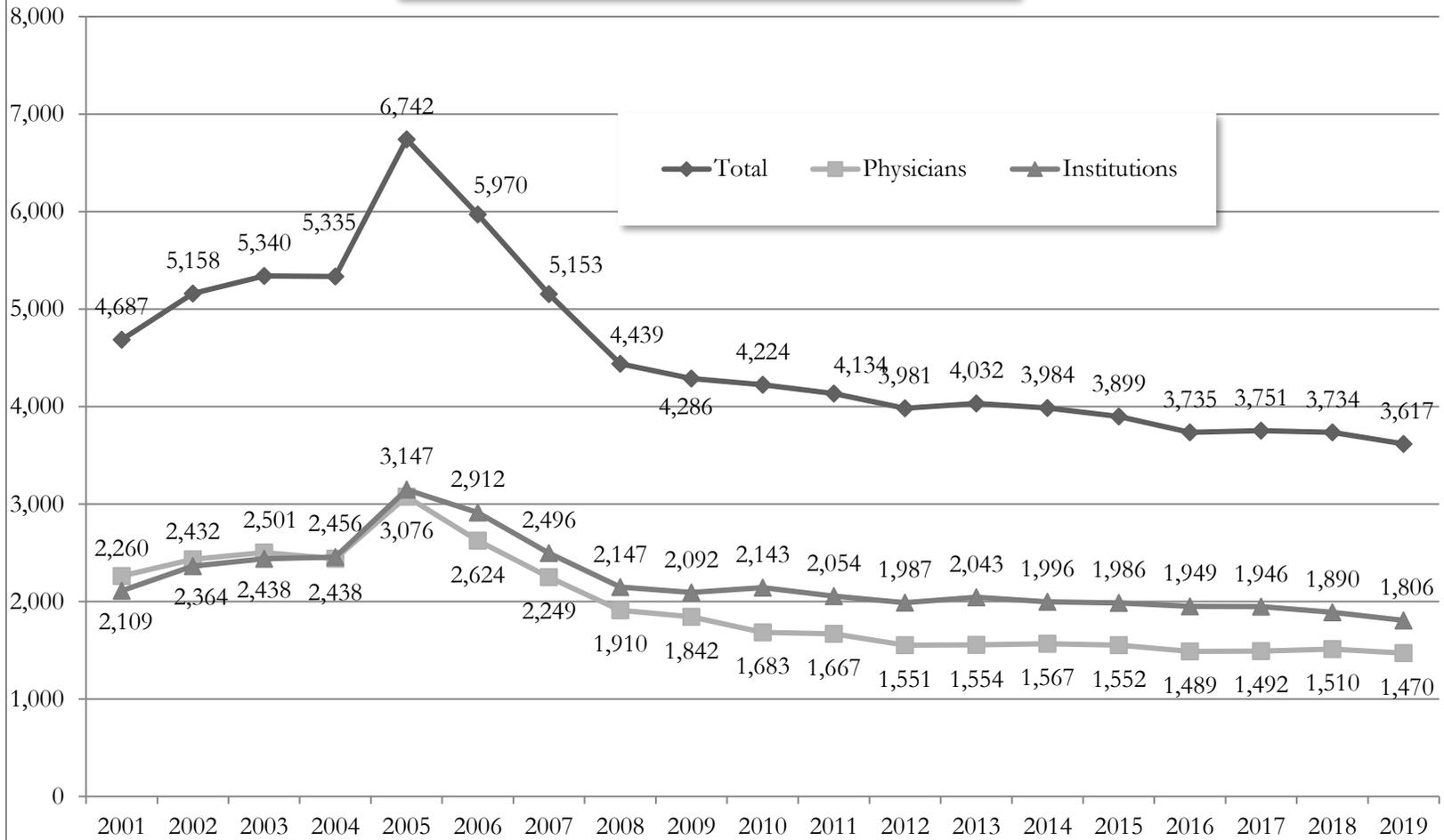
Number of New Claimants, by Report Year



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 DCI 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 DCI. 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, 2005-2018			
Category	Claimants	Claimants With Payment	Average Indemnity Per Paid Claimant
Surgery	4,550	2,023	\$325,615
Treatment	2,610	1,244	\$249,475
Diagnosis	2,581	1,230	\$452,723
Other / miscellaneous	2,216	1,043	\$137,345
Medication	1,267	579	\$203,866
Pregnancy & childbirth	877	446	\$847,780
Anesthesia	276	110	\$356,771
IV & Blood Products	229	126	\$170,683
Total	14,606	6,801	\$327,315

Adverse Outcomes by Medical Category Closed Occurrences, 2004-2018 Percent			
Category	Claimants	Claimants With Payment	Total Indemnity
Surgery	31.2%	29.7%	29.6%
Treatment	17.9%	18.3%	13.9%
Diagnosis	17.7%	18.1%	25.0%
Patient Safety / Ethics /	15.2%	15.3%	6.4%
Medication	8.7%	8.5%	5.3%
Pregnancy & childbirth	6.0%	6.6%	17.0%
Anesthesia	1.9%	1.6%	1.8%
IV & Blood Products	1.6%	1.9%	1.0%
Total	100.0%	100.0%	100.0%

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Alleged Diagnostic Failures				
Diagnostics Allegations - Infectious Conditions				
Respiratory infections	50	23	\$281,674	6.8
Other or unknown infection	48	23	\$411,470	6.0
Meningitis, encephalitis, other central nervous system infection	46	31	\$1,031,868	7.7
Digestive disorders	29	11	\$57,727	4.8
Spine / spinal cord disorder	18	6	\$928,056	6.3
Musculoskeletal disorder order- excluding spine	16	11	\$769,091	5.5
Development of septic condition during care	16	12	\$664,125	7.5
Heart Condition	13	6	\$472,500	8.3
Integumentary system - skin, hair, nails etc	12	3	\$436,667	4.5
Diseases of the genitourinary system	9	4	\$86,950	6.3
Diseases of the reproductive system	6	4	\$179,737	6.5
Auditory condition	4	1	\$65,000	5.8
Blood and immune disorders	3	3	\$833,333	8.3
Visual condition	2	1	\$3,000	5.0
Other respiratory conditions	1	1	\$235,000	9.0
Other respiratory distress	1	1	\$75,000	9.0
Development of gangrene or other necrotizing condition	1	1	\$733,000	9.0
Staph infection contracted during care	1	1	\$1,155,850	9.0
Other infection contracted during care	1			4.0
Subtotal	276	143	\$563,228	6.5
Diagnostic Allegations - Non-infectious Conditions				
Cardiovascular Conditions				
Heart Condition	238	135	\$422,673	7.9
Stroke	170	84	\$562,310	6.6
Embolism/ thrombosis	102	59	\$387,352	7.3
Hematoma / aneurysm	59	35	\$526,475	8.1
Ischemia / vascular deficiency	9	6	\$686,167	7.0
Transient cerebral ischemic attacks and related	2	1	\$815,000	7.0
Subtotal	342	185	\$505,116	7.1
Cancers				
Breast	127	54	\$452,600	7.1
Respiratory	109	53	\$372,249	7.9

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Digestive	81	37	\$509,192	7.2
Unknown or benign neoplasms	52	25	\$384,817	5.4
Skin	50	26	\$461,043	6.2
Reproductive organs	41	20	\$389,693	7.8
Unknown type	36	18	\$246,452	6.4
Kidney, bladder and related	31	16	\$611,057	6.5
Thyroid and other endocrine glands	27	13	\$336,602	6.3
Bone and Cartilage	24	13	\$473,567	7.3
Oral	20	5	\$181,000	7.2
Central nervous system	14	10	\$233,570	7.9
Hodgkin's, lymphoma, and related	11	3	\$604,500	7.4
Mesothelial and soft tissue	2			7.5
Subtotal	625	293	\$417,101	7.0
Traumatic Injuries				
Fracture	193	58	\$127,906	3.8
Injury to internal organs	66	32	\$376,469	7.2
Spine	45	20	\$1,020,092	5.8
Injury to tendons or muscle	40	10	\$86,433	6.2
Poison, exposure to toxin	9	4	\$111,000	5.7
Dislocation w/out fracture	6	4	\$318,750	4.8
Neurological injury	4	4	\$96,604	4.3
Cuts, burns, abrasions	3	1	\$200,000	3.3
Details unknown	3	1	\$170,000	3.7
Peripheral nervous system	3			4.0
Sprains or other soft tissue injury	1			3.0
Subtotal	373	134	\$322,441	5.0
Nervous system disorders				
Spine / spinal cord disorder	54	22	\$948,697	5.9
Meningitis, encephalitis, and inflammatory conditions of central nervous system	8	2	\$1,217,500	7.1
Multiple sclerosis	1			2.0
Epilepsy and related syndromes	4	1	\$250,000	7.5
Nerve root and plexus disorders	1			3.0
Guillain-Barre and related syndromes	2			6.0
Cerebral palsy	1	1	\$75,000	6.0
Hydrocephalus	5	1	\$950,000	7.2

Allegations, 2005-2018					
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)	
Subtotal	76	27	\$910,420	6.1	
Misc.					
Digestive disorders	185	91	\$398,247	5.8	
Healthy patient misdiagnosed with condition	80	34	\$155,421	3.5	
Diseases of the genitourinary system	35	18	\$485,139	5.9	
Diseases of the reproductive system	30	14	\$240,446	5.0	
Endocrine, nutritional, and metabolic disorders	26	16	\$956,208	7.6	
Visual condition	23	13	\$535,084	5.9	
Musculoskeletal disorder order- excluding spine	22	8	\$1,511,250	4.2	
Blood and immune disorders	15	10	\$579,417	6.9	
Diabetes	14	8	\$344,388	6.4	
Compartment syndrome	12	9	\$256,666	5.3	
Other respiratory conditions	7	4	\$839,928	6.4	
Auditory condition	3	1	\$45,000	4.7	
Respiratory infections	3	2	\$200,000	9.0	
Development of septic condition during care	2	1	\$350,000	9.0	
Integumentary system - skin, hair, nails etc	1	1	\$125,000	4.0	
Other respiratory distress	1			9.0	
Development of fistula	1	1	\$35,000	3.0	
Allergic reaction to medical materials, excluding medications	1			6.0	
Staph infection contracted during care	1			9.0	
Other infection contracted during care	1	1	\$140,000	5.0	
Accidental or unnecessary sterilization	1	1	\$1,032	5.0	
Delay in Emergency Department	1	1	\$300,000	9.0	
Subtotal	465	234	\$442,667	5.5	
Unknown	185	79	\$412,251	6.0	
All Diagnostic-related Claims	2,342	1,095	\$456,748	6.2	
Anesthesia Related Allegations					
Intubation Problem					
Injury during intubation	143	34	\$62,807	3.2	
Failure to timely / properly intubate	12	11	\$596,000	8.6	
Premature extubation	10	8	\$478,468	7.8	
Endotracheal tube wrongly placed	2	1	\$175,000	3.0	
Subtotal	167	54	\$235,077	3.8	
Administration Error					

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Wrong dosage administered	8	4	\$451,979	5.5
Wrong medication administered	2	2	\$17,500	3.0
Injection into wrong body part	1			4.0
Unknown Error	1	1	\$2,304	3.0
Subtotal	12	7	\$263,603	4.8
Respiratory / cardiovascular complication				
Hypoxia	19	10	\$1,243,000	7.0
Other respiratory distress	13	7	\$459,528	7.4
Ischemia / vascular deficiency	5	4	\$504,250	6.6
Myocardial infarction	2			6.0
Hematoma / aneurysm	1	1	\$300,000	9.0
Stroke	1			7.0
Subtotal	41	63	\$285,138	7.1
Misc.				
Other negative side-effect of medications	13	3	\$306,667	4.5
Anesthetic or intra-operative awareness	12	7	\$42,861	1.3
Other inadequate anesthetization	12	8	\$435,199	6.8
Allergic reaction to medication	9	4	\$296,271	4.6
Injury from equipment malfunction	3	2	\$55,000	7.0
Cut, puncture, tear during injection	2	1	\$690,000	5.5
Injury from aspiration	2	1	\$25,000	5.5
Pathology specimen lost	1			3.0
Subtotal	54	26	\$258,142	4.5
Unknown	2	1	\$30,000	9.0
Total - Anesthesia Related Allegations	276	151	\$259,899	4.5
Surgery Related				
Cardiovascular / Respiratory Complications of Surgery				
Postoperative bleeding	111	53	\$580,201	6.9
Embolism/ thrombosis	83	45	\$256,285	7.2
Ischemia / vascular deficiency	60	31	\$695,847	6.8
Myocardial infarction	58	28	\$435,381	8.0
Hypoxia	40	23	\$1,019,069	7.9
Hematoma / aneurysm	32	24	\$528,660	6.8
Stroke	32	12	\$266,038	6.8
Excess blood loss during surgery or treatment	19	8	\$875,486	6.9
Other respiratory distress	19	10	\$369,650	7.5

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Injury from aspiration	17	5	\$165,613	6.4
Subtotal	471	239	\$530,932	7.2
Complications With Implanted Prosthetic, Therapeutic or Other Devices				
Improper placement of prosthetic device	184	74	\$393,558	4.7
Incorrect prosthetic device, or wrong size	76	25	\$177,650	4.2
Improper placement of therapeutic device	73	31	\$302,336	5.5
Defective implant	28	6	\$76,896	4.3
Incorrect therapeutic device, or wrong size	6	2	\$338,500	4.8
Failure to introduce or remove medical implement	3	1	\$70,000	3.7
Subtotal	370	139	\$317,592	4.7
Informed Consent Issues / Unnecessary Treatment				
Treatment lacked salutary effect	355	96	\$171,079	4.3
Unnecessary surgery or procedure	141	48	\$307,099	4.6
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	521	153	\$210,208	4.4
Surgical Trauma				
Cut, puncture, tear during surgery	890	485	\$330,445	5.5
Other surgical injury - nerve injury	120	46	\$365,305	5.0
Injury from patient positioning	59	25	\$250,327	4.3
Other injury incidental to medical procedure	37	18	\$261,361	4.6
Cut, puncture, tear during heart catheterization	35	14	\$761,174	6.4
Other surgical injury - internal organ	34	10	\$183,472	5.2
Injury from equipment malfunction	32	13	\$141,282	5.7
Other surgical injury - central nervous system	20	12	\$1,161,250	6.9
Other surgical injury - impaired vision	15	8	\$264,375	4.9
Other surgical injury - fracture	13	3	\$22,833	3.8
Other surgical injury - peripheral nervous system	11	6	\$547,079	5.5
Cut, puncture, tear during injection	11	4	\$82,500	4.9
Injury from improper operation of equipment	8	5	\$170,815	5.1
Other surgical injury - morphology problem / disfigurement	7	4	\$325,000	5.4
Other surgical injury - non-fracture musculoskeletal injury	3			5.0
Other surgical injury - veins or arteries	1	1	\$202,000	9.0
Cut, puncture, tear during endoscopic exam	1			5.0
Cut, puncture, tear during other catheterization	1			6.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Subtotal	1298	654	\$343,192	5.4
Surgical Infections				
Other infection contracted during care	421	139	\$347,739	5.1
Staph infection contracted during care	54	16	\$295,537	5.1
Development of septic condition during care	45	16	\$630,932	6.7
Development of gangrene or other necrotizing condition	20	7	\$371,429	5.5
Pressure ulcers during care	7	2	\$65,000	3.1
Subtotal	547	180	\$366,051	5.2
Problems with Surgical Site				
Other improper closure of surgical site	79	37	\$406,073	5.2
Sutures, staples, etc improperly placed	58	32	\$596,305	5.2
Development of fistula	43	17	\$436,212	4.5
Other problem with surgical site	27	8	\$146,563	3.7
Failure in suture or ligature	4	1	\$225,000	5.3
Subtotal	211	95	\$451,785	4.9
Misc. Surgical Issues				
Foreign body retained - surgery related	306	176	\$116,811	4.0
Misset fracture or non-union	130	50	\$210,833	4.3
Procedure performed on wrong body part	118	91	\$299,079	4.3
Inappropriate handling of transplantable material	42	39	\$174,602	6.2
Aborted surgery	28	11	\$58,668	3.5
Failure to identify or treat compartment syndrome	26	15	\$579,507	6.2
G-tube or feeding tube improperly placed or malfunction	26	18	\$246,920	7.5
Other problem in post-surgical care	16	5	\$426,000	6.3
Allergic reaction to medical materials, excluding medications	15	3	\$185,500	3.3
Failed sterilization	13	6	\$68,500	1.8
Retained body part	11	5	\$73,000	3.4
Inappropriate temperature in local application	9	7	\$105,213	4.0
Contaminated substance taken or injected	7	3	\$213,333	3.0
Accidental or unnecessary sterilization	6			5.0
Foreign body retained - during heart catheterization	4	2	\$790,000	3.5
Non-administration of necessary care	2	1	\$10,000	4.0
Failure to stabilize prior to transfer / discharge	2	1	\$225,000	9.0
Wrong patient	2	1	\$122,000	5.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Physician delay or failure to respond to call	1	1	\$5,500	3.0
No clear allegation of medical injury	1			1.0
Wrong fluid used in transfusion	1	1	\$175,000	6.0
Pathology specimen lost	1			1.0
Failure to ensure proper nutrition or hydration	1			5.0
Subtotal	768	436	\$196,938	4.4
Unknown	363	127	\$291,255	4.9
Total Surgery Related Allegations	4,549	2,023	\$325,907	5.1
Allegations Related to Medication				
Dosage / Medication Errors				
Wrong medication administered	263	187	\$43,950	3.3
Wrong dosage administered	260	176	\$221,333	5.1
Medication error	12	7	\$117,000	4.4
Medication administered via the wrong route	7	5	\$1,351,996	5.9
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	548	378	\$151,395	4.2
Adverse Reaction to Correct Medication & Dose				
Cognitive & affective disorders	110	2	\$55,000	4.5
Anticoagulants	64	25	\$305,029	5.8
Weight loss medications	31			3.5
Pain management, narcotics	31	9	\$126,068	6.3
Antibiotics	27	10	\$387,300	5.0
Pain management, non-narcotics	16	1	\$100,000	6.1
Steroids	15	7	\$105,714	4.2
Heart medications	11	3	\$172,500	7.8
Cholesterol agents	9	1	\$100,000	4.3
Digestives medications	8	3	\$312,500	5.5
Anti-seizure medications	7	3	\$355,000	5.1
Chemotherapy	7	1	\$5,000	7.3
Diabetic medications	7	2	\$35,500	5.0
Hypertension medications	6			5.0
Anti-inflammatory, excluding steroids	6			4.8

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
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 treatment	1			9.0
Antifungal agents	1			5.0
Subtotal	380	76	\$270,399	5.1
Misc. Medication-related Allegations				
Other negative side-effect of medications	115	25	\$198,303	4.9
Allergic reaction to medication	81	38	\$153,367	4.5
Interaction of two or more medications	48	25	\$250,450	6.4
Injury from excessive use of medication	38	17	\$211,544	5.8
Addiction or withdrawal issues	25	9	\$1,808,620	3.6
Accident attributed to medicine	10	2	\$5,512	5.0
Injection into wrong body part	4	2	\$1,293,750	6.3
Premature cessation of medications	2	1	\$100,000	3.0
All acts of self-harm	1			9.0
Cut, puncture, tear during injection	1			3.0
Unnecessary surgery or procedure	1	1	\$60,331	3.0
Excess blood loss during surgery or treatment	1	1	\$183	9.0
Other Delay	1			2.0
Other failure to effectively treat	1	1	\$215,000	9.0
Subtotal	329	122	\$327,005	5.0
Unknown	9	3	\$122,167	6.0
Total - Medication Related Allegations	1,266	579	\$203,866	4.7
IV & Blood Products				
IV infiltration event	135	76	\$122,956	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
Other infection contracted during care	7	5	\$45,060	3.9
Staph infection contracted during care	6	3	\$678,667	5.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Excessive amount of blood or other fluid	4	1	\$275,000	6.8
Contaminated substance taken or injected	4	2	\$82,500	3.5
Injection into wrong body part	3	3	\$79,167	4.7
Foreign body retained - during injection	3	3	\$21,667	3.7
Inappropriate temperature in local application	2	2	\$77,500	4.5
Failure to identify or treat compartment syndrome	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
Cut, puncture, tear during other catheterization	1			3.0
Cut, puncture, tear during other medical procedure	1			2.0
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	225	125	\$171,889	5.6
Unknown	4	1	\$20,000	4.3
Total - IV & Blood Products	229	126	\$170,683	5.6
Pregnancy & Childbirth				
Intrauterine hypoxia	130	83	\$1,592,955	7.5
Shoulder dystocia	99	54	\$599,675	5.8
Complications of placental disorders	55	28	\$1,416,883	9.6
Spontaneous abortion / stillbirth	52	26	\$223,472	7.7
Infections	42	18	\$1,252,111	6.1
Cut, tear, perforation	29	10	\$755,223	4.3
Retained surgical or other material	29	18	\$147,226	3.6
Ectopic pregnancy	27	10	\$140,900	4.3
Pre-term labor	24	9	\$418,836	7.0
Other birth injuries to central nervous system	22	14	\$810,201	7.3
Birth injury to peripheral nervous system	22	13	\$466,154	19.7
Eclampsia	19	9	\$1,951,275	7.3
Complications from disproportion	17	10	\$817,973	5.7
Injury to fetus or mother due to procedure unrelated to pregnancy	16	4	\$94,250	6.8
Intracranial laceration or hemorrhage due to birth injury	13	6	\$682,917	6.1
Cardiovascular complications of pregnancy	11	5	\$1,193,743	8.0
Fetal abnormality or damage	10	4	\$668,750	6.9

Allegations, 2005-2018					
Allegation	Claimants	Claimants Receiving	Avg Payment	Avg. Injury Severity (1-9)	
Other obstructed labor	9	6	\$168,333	6.4	
Prolonged labor	8	5	\$1,213,800	6.6	
Fetus / newborn affected by maternal condition unrelated to pregnancy	8	4	\$873,750	7.6	
Complications w/ abortion	7	3	\$43,333	5.4	
Other injury incidental to medical procedure	7	2	\$475,000	6.9	
Other inadequate anesthetization	5	2	\$26,450	2.4	
Development of gangrene or other necrotizing condition	5	2	\$1,062,500	5.8	
Complications of gestational diabetes	4	2	\$237,500	8.8	
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 / discharge	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 pregnancy	2	2	\$210,000	9.0	
Other fetal problems	2			9.0	
Deficient fetal growth rate	2	1	\$400,000	7.0	
Pulmonary hemorrhage originating in the perinatal period	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	
Other problem with surgical site	2			5.0	
Failed resuscitation	2	2	\$395,000	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	

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Respiratory distress of newborn	1	1	\$300,000	9.0
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 newborn	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 syndrome	1			3.0
Sutures, staples, etc. improperly placed	1	1	\$85,000	3.0
Other respiratory distress	1			4.0
Development of septic condition during care	1	1	\$450,000	9.0
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	752	390	\$890,163	7.0
Unknown	125	56	\$552,613	6.8
Total - Pregnancy & Childbirth	877	446	\$847,780	7.0
Allegations Related to Non-Surgical Treatment				
Cardiovascular / Respiratory Complications				
Myocardial infarction	41	20	\$405,417	8.0
Embolism/ thrombosis	30	14	\$656,476	5.6
Injury from aspiration	28	13	\$330,794	7.6
Stroke	28	9	\$706,111	7.0
Other respiratory distress	16	9	\$523,611	8.1
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	176	81	\$454,952	7.3
Allegations Related to Medical & Biological Agents (Excluding Medication)				
Overdose of radiation during therapy	81	67	\$362,791	5.8

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Allergy to medical materials, excluding medications	26	11	\$62,426	4.0
Wrong dosage administered	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
Excessive amount of blood or other fluid	2	1	\$230,000	6.5
Inadvertent exposure to radiation	2	2	\$42,500	6.5
Contaminated substance taken or injected	2			3.5
Subtotal	136	95	\$314,588	5.4
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 malfunction	13	5	\$1,875,000	7.5
Improper placement of prosthetic device	9	2	\$47,500	3.3
Incorrect therapeutic device, or wrong size	4	1	\$43,500	3.0
Incorrect prosthetic device, or wrong size	3	2	\$6,000	2.7
Defective implant	1			5.0
Subtotal	104	54	\$284,470	5.0
Physical Injuries Resulting from Procedure				
Injury during physical therapy	213	101	\$139,572	3.7
Cut, puncture, tear during injection	131	60	\$236,022	4.4
Cut, puncture, tear during endoscopic exam	108	38	\$290,810	5.1
Cut, puncture, tear during other medical procedure	75	46	\$61,068	3.6
Cut, puncture, tear during other catheterization	57	22	\$190,481	4.6
Other injury incidental to medical procedure	41	20	\$46,441	3.6
Inappropriate temperature in local application	25	20	\$30,413	3.6
Injury from patient positioning	12	1	\$150,000	3.7
Injection into wrong body part	8	4	\$227,500	5.8
Injury during intubation	5	3	\$94,333	3.8
Extravasation from injection	5	4	\$63,802	3.2
Subtotal	680	319	\$154,996	4.1
Infections and Related				
Pressure ulcers during care	331	206	\$191,615	7.3
Other infection contracted during care	184	72	\$238,633	6.5

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Development of septic condition during care	33	17	\$516,740	7.7
Development of gangrene or other necrotizing condition	22	10	\$311,065	5.7
Staph infection contracted during care	18	3	\$20,083	3.8
Subtotal	588	308	\$222,759	6.9
Retention of Foreign Object				
During other medical procedure	15	8	\$74,670	3.1
During injection	3			3.0
During endoscopic exam	1	1	\$35,000	3.0
During other catheterization	1			3.0
Subtotal	20	9	\$70,262	3.1
Delays and Other Omissions				
Nonadministration of necessary care	168	76	\$302,057	6.5
Failure to stabilize prior to transfer / discharge	34	17	\$365,416	7.4
Failure to timely / properly intubate	29	21	\$542,286	8.4
Delay in Emergency Department	25	10	\$604,132	5.7
Failure to ensure proper nutrition or hydration	21	9	\$649,963	7.7
Other Delay	16	6	\$381,970	6.4
Failure in follow-up care	15	4	\$356,250	6.2
Failure to monitor	12	7	\$437,071	7.8
Failure to make timely or appropriate referral	12	6	\$299,167	6.0
Delay in scheduling surgery	10	6	\$306,601	8.3
Delay in transport	9	4	\$402,069	7.3
Nonadministration of necessary drug	6	2	\$162,500	7.7
Physician delay or failure to respond to call	3	2	\$154,250	9.0
Failure to communicate with patient	4	1	\$50,000	7.3
Deficient monitoring of patient status	2	2	\$253,449	5.0
Subtotal	366	173	\$379,520	6.8
Misc.				
Treatment lacked salutary effect	123	42	\$200,702	5.7
Misset fracture or non-union	58	24	\$121,790	4.1
Other failure to effectively treat	29	13	\$161,236	6.6
Unnecessary surgery or procedure	18	6	\$101,917	3.5
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	8	4	\$22,063	1.6

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Failure to identify or treat compartment syndrome	8	6	\$202,850	4.9
Sutures, staples, etc. improperly placed	7	2	\$3,750	3.0
Procedure performed on wrong body part	5	3	\$678,333	3.6
Wrong patient	5	4	\$85,000	4.2
Inappropriate handling of transplantable material	4	1	\$20,000	1.0
Aborted surgery	4	1	\$12,500	3.0
Performance of inappropriate operation or 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
Other problem with surgical site	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
All acts of self-harm	1			9.0
Patient harmed third party	1			9.0
Allergic reaction to medication	1			3.0
Incorrect blood type	1			3.0
Development of fistula	1	1	\$123,000	6.0
Postoperative bleeding	1	1	\$225,000	6.0
Subtotal	314	127	\$174,007	4.9
Unknown	219	73	\$290,569	5.3
Total - Non-surgical Treatment	2,603	1,239	\$250,001	5.6
Patient Safety / Legal / Ethical Issues				
Fall while under care or on premises	944	573	\$129,372	4.9
Civil rights originating among incarcerated population	385	33	\$311,089	3.2
Injury during transporting or repositioning	160	104	\$97,873	4.2
Other injury unrelated to medical treatment	113	80	\$121,082	5.1
Breach of patient confidentiality	105	55	\$64,132	1.1
Other legal or ethical misconduct	93	28	\$106,042	1.3
All acts of self-harm	72	38	\$272,935	8.3
Sexual misconduct	56	24	\$102,344	1.3
Harmed by 3rd party	53	30	\$100,995	4.3
Assault & battery	31	17	\$136,000	2.6
Failure to warn of health hazard	28	2	\$8,750	5.7
False imprisonment	25	6	\$17,821	1.3

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Breach of specific regulation	20	5	\$296,990	1.8
Refusal to treat / indifference	20	1	\$760,000	3.9
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 clear allegation of medical injury	13	4	\$23,250	1.3
Patient abandonment	6	1	\$153,255	2.8
Abuse / neglect	6	2	\$181,250	6.3
Injury while restraining patient or by security	6	3	\$103,352	4.2
Patient harmed third party	5	1	\$20,000	3.2
Other respiratory distress	5	4	\$359,583	9.0
Religious issues	3	2	\$31,250	2.3
Wrongful life / birth	3	1	\$45,000	1.0
EMTALA violation	3	2	\$16,000	2.3
Failure to ensure proper nutrition or hydration	3	1	\$2,500	7.3
Did not consent to procedure	2	1	\$9,000	1.0
Injury during physical therapy	2			3.0
Subtotal	2,205	1,039	\$136,888	4.1
Unknown	10	3	\$241,667	3.7
Total - Patient Safety / Legal - Ethical Issues	2,215	1,042	\$137,189	4.1

Injury / Outcomes, 2005-2018				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Emotional distress	607	203	\$91,423	1.1
Physical pain, little loss of function	226	83	\$39,027	2.5
Subtotal	833	286	\$76,217	1.5
Tissue and Musculoskeletal Injuries				
Burns, lacerations, or other skin damage	566	312	\$62,612	3.3
Soft tissue injury	46	21	\$78,511	3.3
Fracture caused from error	584	334	\$84,205	3.5
Other skeletal caused from error	309	115	\$79,921	3.4
Fracture complicated by error	225	68	\$85,923	4.2
Skeletal problem complicated by error	279	66	\$189,162	3.7
Partial loss of function of limb	62	33	\$328,818	5.2
Full loss of function of limb	24	15	\$407,700	5.9
Amputation of fingers/toes	71	33	\$137,443	5.1
Amputation of hands/feet	35	14	\$511,372	5.7
Amputation of one limb	162	91	\$520,875	6.1
Amputation of two or more limbs	13	7	\$559,769	7.1
Loss of other body part	195	90	\$449,870	7.2
Disfigurement / cosmetic	49	21	\$149,377	4.0
Other morphology problem	431	160	\$190,785	4.4
Subtotal	3,051	1,380	\$167,360	4.2
Neurological / nervous system impairment				
Cut, perforation, or tear of nerve	42	22	\$266,625	5.3
Other damage to nerve	676	292	\$299,442	5.7
ERBS palsy	24	13	\$430,962	6.0
Cauda equine syndrome	16	9	\$634,169	6.0
Brachial plexus disorders	78	45	\$469,024	5.7
Cerebral palsy	64	49	\$1,994,038	7.6
Monoplegia - lower limb	3	1	\$30,000	6.0
Hemiplegia	21	11	\$1,127,273	6.8
Paraplegia	120	76	\$1,404,544	7.0
Quadriplegia	47	34	\$1,885,203	8.0
Cognitive or neurological deficits	572	306	\$1,179,414	6.3
Other nervous system impairment	6	2	\$175,000	4.8

Subtotal	1,669	860	\$892,965	6.1
Cardiovascular/ circulatory outcomes				
Damage to veins or arteries	22	8	\$138,773	4.3
Internal bleeding	158	53	\$328,351	4.1
Embolism/thrombosis	64	20	\$108,575	4.0
Ruptured aneurism	4	1	\$1,375	5.3
Stroke	136	71	\$719,211	6.1
Myocardial infarction	63	24	\$313,075	4.8
Ischemic or anoxic event	2	1	\$5,000	4.5
Subtotal	449	178	\$445,328	4.8
Contraction or progression of infection while under care				
Contraction of staph infection	58	14	\$59,703	3.6
Progression of staph infection	11	4	\$62,750	3.8
Contraction of meningitis	12	2	\$840,000	4.9
Progression of meningitis	11	7	\$1,025,429	6.1
Contraction of encephalitis	1			4.0
Progression of encephalitis	2	1	\$1,025,000	6.5
Contraction of peritonitis	17	10	\$308,050	4.6
Contraction of hepatitis	5	1	\$50,000	4.4
Progression of hepatitis	11			2.0
Progression of cancer	389	182	\$413,704	6.1
Contraction of sepsis	64	34	\$599,756	9.1
Progression of sepsis	4	3	\$366,498	5.0
Contraction of gangrene / necrotizing condition	34	20	\$304,509	4.7
Progression of gangrene / necrotizing condition	1			4.0
Contraction of other / unknown infection	528	192	\$184,431	4.4
Progression of other / unknown infection	160	42	208,117	3.3
Subtotal	1,308	512	\$314,702	5.0
Damage to internal organs				
Cut, perforation, tear to internal organ	531	223	\$300,909	4.4
Leakage from internal organ	48	26	\$169,781	4.0
Temporary partial loss of organ	89	26	\$119,201	3.5
Temporary full loss of organ	19	8	\$166,563	3.9
Permanent partial loss of organ	288	92	\$633,096	5.3
Permanent full loss of organ	29	18	\$702,326	9.4
Subtotal	1,004	393	\$373,627	4.7
Hearing and vision loss				
Partial loss of vision	174	73	\$258,150	5.3
Full loss of vision	45	26	\$770,217	6.7
Partial loss of hearing	40	17	\$213,735	4.9

Full loss of hearing	2	2	\$1,037,500	6.0
Subtotal	261	118	\$377,789	5.5
Misc.				
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	6.0
Coma	10	5	\$930,000	5.7
Injury primarily psychological	16	7	\$103,450	2.1
Malnutrition / dehydration	4	3	\$31,467	2.8
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	894	402	\$142,643	4.3
Wrong site surgery	1	1	\$1,000,000	5.0
Unknown	2,023	745	\$146,868	3.3
Subtotal	3,145	1,231	\$149,815	3.6
Death	3,469	1,994	\$310,100	9.0

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.

Total Malpractice Premium and Losses, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
Missouri Hospital Plan	\$28,931,584	24.9%	\$28,838,176	\$8,190,300	\$20,008,494
Medical Protective Company	\$14,439,714	12.4%	\$14,635,744	\$3,457,949	\$15,452,248
Medical Liability Alliance	\$12,525,890	10.8%	\$11,913,139	\$7,583,728	\$11,010,828
Norcal Mutual Insurance Company	\$10,864,416	9.3%	\$10,161,517	\$14,388,370	\$12,252,997
Proassurance Indemnity Company Inc	\$8,249,521	7.1%	\$7,987,776	\$2,225,468	\$3,770,533
Doctors Company An Interins Exchange	\$6,953,063	6.0%	\$7,355,159	\$2,330,000	\$11,231,926
Missouri Doctors Mutual Insurance Company	\$3,665,615	3.2%	\$3,656,294	\$1,565,000	\$1,327,031
Mmic Insurance Inc	\$3,497,514	3.0%	\$3,449,714	\$580,000	\$589,952
Keystone Mutual Insurance Company	\$2,811,635	2.4%	\$2,628,461	\$2,533,043	\$1,063,276
Continental Casualty Company	\$2,513,622	2.2%	\$1,560,475	\$1,520,213	\$2,072,163
American Casualty Company Of Reading Pennsylv	\$2,493,353	2.1%	\$2,528,053	\$498,034	\$441,932
Ismie Mutual Insurance Company	\$1,865,616	1.6%	\$979,275	\$0	\$382,489
Health Care Indemnity Inc	\$1,819,011	1.6%	\$1,819,011	\$900,000	\$2,940,298
Ncmic Insurance Company	\$1,662,168	1.4%	\$1,679,890	\$0	\$528,875
Preferred Physicians Medical Risk Retention G	\$1,601,006	1.4%	\$1,607,579	\$360,000	\$802,413
Mag Mutual Insurance Company	\$1,355,901	1.2%	\$486,984	\$0	\$0
Professional Solutions Insurance Company	\$1,306,814	1.1%	\$907,913	\$300,000	\$721,630
Physicians Insurance Mutual	\$1,205,037	1.0%	\$1,146,843	\$80,000	-\$7,000
Pharmacists Mutual Insurance Company	\$1,107,214	1.0%	\$1,125,384	\$6,870	\$59,850
Preferred Professional Insurance Company	\$1,019,644	0.9%	\$764,349	\$95,000	\$1,204,547
Liberty Insurance Underwriters Inc	\$786,638	0.7%	\$853,717	\$1,800	\$314,468
Zurich American Insurance Company	\$619,554	0.5%	\$455,350	\$927	\$260,145
Fair American Insurance And Reinsurance Compa	\$605,941	0.5%	\$586,915	\$0	-\$65,209
Church Mutual Insurance Company S.I.	\$545,322	0.5%	\$414,492	\$0	\$471,634
Ace American Insurance Company	\$494,223	0.4%	\$501,492	\$0	-\$197,443
Doctors Direct Insurance Inc	\$469,415	0.4%	\$232,050	\$0	\$58,622
Kansas Medical Mutual Insurance Company	\$388,959	0.3%	\$341,082	\$0	\$25,000
Proassurance Insurance Company Of America	\$388,456	0.3%	\$397,199	\$133,548	-\$23,287
Cincinnati Insurance Company The	\$381,078	0.3%	\$365,946	\$8,592	\$50,702
Aspen American Insurance Company	\$324,039	0.3%	\$301,237	\$0	\$96,032
Allied World Insurance Company	\$316,519	0.3%	\$317,319	\$0	\$13,790
Kammco Casualty Company Inc	\$294,665	0.3%	\$250,053	\$0	\$192,765
Continental Insurance Company The	\$275,138	0.2%	\$246,160	\$0	\$15,761
Great Divide Insurance Company	\$146,582	0.1%	\$136,604	\$0	\$57,189
American Alternative Insurance Corporation	\$91,419	0.1%	\$89,992	\$0	\$102
American Home Assurance Company	\$68,567	0.1%	\$66,812	\$0	\$49,530
Fortress Insurance Company	\$58,904	0.1%	\$58,999	\$0	\$59,500
State Farm Fire And Casualty Company	\$39,403	0.0%	\$40,456	\$0	-\$95
Berkshire Hathaway Specialty Insurance Compan	\$31,402	0.0%	\$25,970	\$0	\$10,126
Cincinnati Casualty Company The	\$29,346	0.0%	\$28,014	\$0	\$10,998
Cincinnati Indemnity Company Inc	\$18,112	0.0%	\$19,420	\$0	\$8,729
Medmal Direct Insurance Company	\$10,312	0.0%	\$25,821	\$0	\$65,399
Beazley Insurance Company Inc	\$8,816	0.0%	\$7,168	\$0	\$11,583
Hudson Insurance Company	\$5,215	0.0%	\$5,963	\$0	-\$2,374

Total Malpractice Premium and Losses, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
General Insurance Company Of America	\$4,934	0.0%	\$4,253	\$0	\$2,454
Campmed Casualty & Indemnity Company Inc	\$2,710	0.0%	\$3,529	\$0	\$6,606
Philadelphia Indemnity Insurance Company	-\$862	0.0%	\$682	\$0	\$121
National Union Fire Insurance Company Of Pitt	-\$4,811	0.0%	\$6,428	\$0	\$593

Physicians & Surgeons Malpractice, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses
Medical Liability Alliance	\$11,539,490	16.8%	\$10,851,692	\$15,868,807
Norcal Mutual Insurance Company	\$10,864,416	15.9%	\$10,161,517	\$12,252,997
Medical Protective Company	\$10,630,150	15.5%	\$10,576,263	\$11,802,794
Proassurance Indemnity Company Inc	\$7,590,470	11.1%	\$7,351,279	\$3,470,083
Doctors Company An Interins Exchange	\$6,953,063	10.1%	\$7,355,159	\$11,231,926
Missouri Doctors Mutual Insurance Company	\$3,665,615	5.3%	\$3,656,294	\$1,327,031
Keystone Mutual Insurance Company	\$2,811,635	4.1%	\$2,628,461	\$1,063,276
Mmic Insurance Inc	\$2,805,071	4.1%	\$2,780,086	\$376,564
Ismie Mutual Insurance Company	\$1,865,616	2.7%	\$979,275	\$382,489
Preferred Physicians Medical Risk Retention G	\$1,601,006	2.3%	\$1,607,579	\$802,413
Mag Mutual Insurance Company	\$1,355,901	2.0%	\$486,984	\$0
Physicians Insurance Mutual	\$1,205,037	1.8%	\$1,146,843	-\$7,000
Professional Solutions Insurance Company	\$1,045,602	1.5%	\$662,224	\$611,712
Liberty Insurance Underwriters Inc	\$786,638	1.1%	\$853,717	\$314,468
Preferred Professional Insurance Company	\$776,206	1.1%	\$581,862	\$1,143,602
Zurich American Insurance Company	\$615,489	0.9%	\$449,976	\$256,699
Fair American Insurance And Reinsurance Compa	\$605,941	0.9%	\$586,915	-\$65,209
Doctors Direct Insurance Inc	\$469,415	0.7%	\$232,050	\$58,622
Kansas Medical Mutual Insurance Company	\$355,322	0.5%	\$314,412	\$25,000
Aspen American Insurance Company	\$324,039	0.5%	\$301,237	\$96,032
Allied World Insurance Company	\$316,519	0.5%	\$317,319	\$13,790
Kammco Casualty Company Inc	\$126,514	0.2%	\$126,514	\$192,765
Continental Insurance Company The	\$86,189	0.1%	\$82,845	-\$10,680
American Home Assurance Company	\$68,567	0.1%	\$66,812	\$49,530
Continental Casualty Company	\$28,750	0.0%	\$26,851	\$24,264

Physicians & Surgeons Malpractice, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses
Medmal Direct Insurance Company	\$10,312	0.0%	\$25,821	\$65,399
Cincinnati Insurance Company The	\$8,958	0.0%	\$7,063	\$1,359

Malpractice for Hospitals, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses
Missouri Hospital Plan	\$28,931,584	83.9%	\$28,838,176	\$20,008,
Continental Casualty Company	\$2,477,938	7.2%	\$1,523,161	\$2,039,
Health Care Indemnity Inc	\$1,819,011	5.3%	\$1,819,011	\$2,940,
MMIC Insurance Inc	\$692,443	2.0%	\$669,628	\$213,
Medical Liability Alliance	\$420,987	1.2%	\$501,351	\$102,
American Alternative Insurance Corporation	\$91,419	0.3%	\$89,992	\$
Proassurance Indemnity Company Inc	\$48,489	0.1%	\$46,469	\$21,
Ace American Insurance Company	\$6,924	0.0%	\$8,337	\$112,
Zurich American Insurance Company	\$4,065	0.0%	\$5,374	\$3,

Dentists, 2018

Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses
Medical Protective Company	\$2,846,416	77.3%	\$2,864,571	\$3,274,
Proassurance Indemnity Company Inc	\$274,081	7.4%	\$268,842	\$150,
Professional Solutions Insurance Company	\$261,212	7.1%	\$245,689	\$109,
American Casualty Company Of Reading Pennsylv	\$111,231	3.0%	\$108,233	\$126,
Cincinnati Insurance Company The	\$91,526	2.5%	\$97,492	-\$2,
Fortress Insurance Company	\$58,904	1.6%	\$58,999	\$59,
Cincinnati Casualty Company The	\$20,923	0.6%	\$20,244	\$8,
Cincinnati Indemnity Company Inc	\$8,476	0.2%	\$9,383	\$3,
Pharmacists Mutual Insurance Company	\$6,601	0.2%	\$6,190	
State Farm Fire And Casualty Company	\$4,219	0.1%	\$3,272	-

Nurses, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incur Loss
American Casualty Company Of Reading PA	\$1,166,328	72.8%	\$510,722	\$1,253,
Proassurance Indemnity Company	\$290,843	18.1%	\$278,711	\$61,
Medical Protective Company	\$56,519	3.5%	\$39,100	-\$217,
State Farm Fire And Casualty Company	\$39,046	2.4%	\$40,250	
Cincinnati Insurance Company The	\$31,918	2.0%	\$31,936	\$8,
Continental Insurance Company The	\$9,194	0.6%	\$0	
Hudson Insurance Company	\$6,766	0.4%	\$6,271	-\$1,
Cincinnati Indemnity Company	\$1,183	0.1%	\$1,902	\$
Cincinnati Casualty Company The	\$1,129	0.1%	\$975	\$

All Other Providers, 2019				
Insurer	Premium Written	Market Share	Premium Earned	Incur Loss
NCMIC Insurance Company	\$1,662,168	22.1%	\$1,679,890	\$528,
American Casualty Company Of Reading PA	\$1,209,580	16.1%	\$1,279,565	\$412,
Pharmacists Mutual Insurance Company	\$1,100,613	14.6%	\$1,119,194	\$59,
Medical Liability Alliance	\$565,413	7.5%	\$560,096	-\$4,960,
Church Mutual Insurance Company S.I.	\$545,322	7.3%	\$414,492	\$471,
Medical Protective Company	\$495,591	6.6%	\$753,380	\$66,
Ace American Insurance Company	\$487,299	6.5%	\$493,155	-\$309,
Proassurance Insurance Company Of America	\$388,456	5.2%	\$397,199	-\$23,
Preferred Professional Insurance Company	\$243,438	3.2%	\$182,487	\$60,
Cincinnati Insurance Company The	\$238,570	3.2%	\$223,858	\$43,
Continental Insurance Company The	\$177,390	2.4%	\$153,321	\$26,

All Other Providers, 2019

Insurer	Premium Written	Market Share	Premium Earned	Incurr Loss
Kammco Casualty Company Inc	\$168,151	2.2%	\$123,539	
Great Divide Insurance Company	\$146,582	2.0%	\$136,604	\$57,
Kansas Medical Mutual Insurance Company	\$33,637	0.4%	\$26,670	
Berkshire Hathaway Specialty Insurance	\$31,402	0.4%	\$25,970	\$10,
Cincinnati Indemnity Company Inc	\$8,069	0.1%	\$8,317	\$4,
Cincinnati Casualty Company The	\$8,025	0.1%	\$7,487	\$2,
Continental Casualty Company	\$3,325	0.0%	\$7,471	\$8,
General Insurance Company Of America	\$2,715	0.0%	\$2,036	\$1,
Campmed Casualty & Indemnity Company Inc	\$2,710	0.0%	\$3,529	\$6,
National Union Fire Insurance Company Of	-\$4,811	-0.1%	\$6,428	\$