OKLAHOMA INSURANCE DEPARTMENT

Medical Professional Liability Insurance Closed Claim Annual Report

January 1, 2011– December 31, 2011

PROTECTING OKLAHOMA

JOHN D. DOAK
INSURANCE COMMISSIONER

OKLAHOMA INSURANCE DEPARTMENT

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OKLAHOMA INSURANCE DEPARTMENT

MEDICAL PROFESSIONAL LIABILITY INSURANCE
CLOSED CLAIM ANNUAL REPORT
JANUARY 1, 2011 – DECEMBER 31, 2011

The Oklahoma Insurance Department (OID) hereby presents composite data of medical professional liability closed-claim reports for 2010.

The OID publishes this report pursuit to Title 36, Section 6813 of the Oklahoma Statutes. This report contains aggregate numbers from statewide closed-claims data. Information about specific closed claims is confidential pursuant to Title 36, Section 6816, and is unavailable for public inspection.

The OID has established procedures to collect these claim reports and produce this final composite report. However, the closed-claim reports submitted to the Insurance Department are completed without any type of affirmation of data accuracy supplied by the insurance company. The OID makes neither final nor absolute guarantee about the information contained in this report. This information should not be viewed as a substitute for any type of financial or actuarial opinion about a reporting insurer's claims activities.

The OID collects unedited data from reporting insurers and presents the final aggregate numbers in this annual report. The Oklahoma Insurance Department continues to work with the Oklahoma Legislature and with others at the state capitol to more accurately define the statutory requirements and enhance data collection and its understanding.

Questions applicable to this report should be directed to:

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INSURANCE CLOSED CLAIM ANNUAL REPORT 2011

The policy limits of the medical professional liability insurance policy covering the claim: Per occurrence policy limits, primary coverage.

Insurance Policy Limits	Closed Claim Count
25,000	6
50,000	1
100,000	5
125,000	12
250,000	3
500,000	29
1,000,000	562
1,500,000	3
2,000,000	92
3,000,000	8
5,000,000	39
6,000,000	1
10,000,000	11
15,000,000	3
Unknown/unreported	16

The policy limits of the medical professional liability insurance policy covering the claim: Annual policy limits, primary coverage.

Insurance Policy Limits	Closed Claim Count
25,000	3
75,000	1
300,000	5
1,000,000	95
2,000,000	15
3,000,000	498
4,000,000	62
4,500,000	5
5,000,000	17
6,000,000	23
10,000,000	4
12,000,000	1
15,000,000	3
25,000,000	1
Unknown/unreported	58

The medical specialty of the provider who was primarily responsible for the medical malpractice incident that led to the claim.

Medical Speciality	Providers Count
Anesthesiology	22
Cardiovascular diseases	20
Dermatology	3
Diagnostic Radiology	8
Emergency medicine	63
Forensic pathology	2
Gastroenterology	4
General / Family Practice	50
General preventive medicine	1
Hospitalist	14
Internal medicine	29
Neurology	5
Obstetrics & Gynecology	44
Ophthalmology	2
Otolaryngology	5
Pediatrics	8
Psychiatry	11
Public health	5
Clinical pharmacology	1
Physical medicine & rehabilitation	3
Pulmonary diseases	10
Radiology	26
Radiation oncology	1
General surgery	63
Neurological surgery	14
Orthopedic surgery	51
Plastic surgery	12
Thoracic surgery	4
Urological surgery	9
Unknown/Unspecified	243
General dentistry (no specialty)	56
Dental: Public Health	1
Pediatric Dentistry	1

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The medical occupation/field of the provider who was primarily responsible for the medical malpractice incident that led to the claim.

Medical Occupation/Field	Providers Count
Chiropractor	5
Counselor-Mental Health	1
Marriage and family therapist	2
Dentist	58
Optometrist	3
Registered Nurse	8
Nurse anesthetist	1
Nurse practitioner	4
Licensed practical	4
Certified nurse aide/assistant	1
Home health aide	1
Pharmacist	19
Pharmacy assistant	1
Physician (MD)	378
Osteopathic Physician (DO)	74
Physician assistant allopathic	13
Podiatrist	3
Psychologist	1
Social worker	1
Other/Not Specified	1
Not an individual defendant	208
Unknown	4

The primary location within a facility where the medical malpractice incident occurred.

Location within Facility	Closed Claim Count
Catheterization lab	8
Critical care unit	5
Dispensary	1
Emergency department	104
Labor and delivery room	31
Laboratory	4
Nursery	2
Operating room	230
Outpatient department	5
Patient room	111
Pharmacy	2
Physical therapy department	5
Radiology department	27
Recovery room	1
Rehabilitation center	1
Special procedure room	19
Clinical support center - such as a laboratory or radiology center	2
Office	126
Walk-in clinic	6
Other department in hospital	2
Other/Unknown	99

The type of health care facility where the medical malpractice incident occurred.

Type of Health Care Facility	Closed Claim Count
Chiropractic Group / Practice	5
Dental Group/Practice	59
Optician/Optometric Group/Practice	2
Medical Group/Practice	65
Mental Health/Substance Abuse Group/Practice	3
Home Health Agency/Organization	4
General/Acute Care Hospital	482
Psychiatric Hospital	1
Rehabilitation Hospital	1
Nursing Facility/Skilled Nursing Facility	23
Intermediate Care Facility for Mentally Retarded/Substance Abuse/ Hospice/Hospice Care Provider	2
Residential Treatment Facility/Program	2

Type of Health Care Facility	Closed Claim Count
Outpatient Rehabilitation Center/Comprehensive Outpatient Rehabilitation Center	3
Ambulatory Surgical Center	38
Ambulatory Clinic/Center	18
Health Center/Federally Qualified Health Center/Community Health Center	4
Mental Health Center/Community Mental Health Center	1
Rural Health Clinic	2
Radiology/Imaging Center	3
Health Insurance Company/Provider	6
Pharmacy	21
Purchasing Service	1
Ambulance/Transportation Company	3
Other not specified	42

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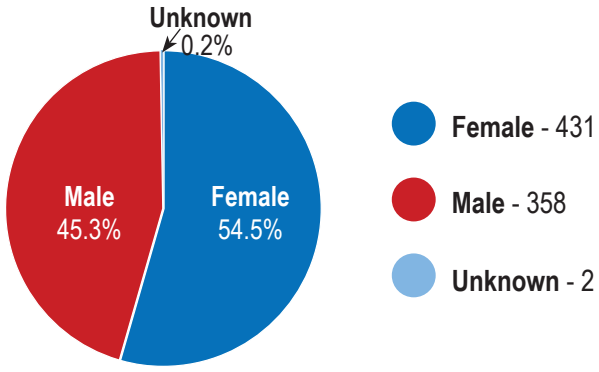
The geographic location, by city, where the medical malpractice incident occurred.

City	Closed Claim Count	City	Closed Claim Count
Ada	7	Muskogee	18
Altus	8	Mustang	4
Antlers	1	Newcastle	1
Ardmore	5	Newkirk	1
Bartlesville	14	Norman	33
Bethany	4	Nowata	1
Broken Arrow	4	Oklahoma City	203
Chandler	1	Okmulgee	8
Cheyenne	1	Owasso	2
Chickasha	8	Pauls Valley	2
Choctaw	1	Ponca City	9
Claremore	5	Poteau	3
Cleveland	1	Pryor	2
Coalgate	1	Purcell	2
Coweta	1	Rogers	1
Dewey	1	Sallisaw	8
Duncan	4	Sapulpa	3
Durant	7	Sayre	1
Edmond	36	Seminole	2
Enid	6	Shawnee	16
Fairview	1	Skiatook	1
Frederick	1	Stigler	1
Grove	2	Stillwater	14
Guthrie	5	Stilwell	6
Harrah	1	Taft	2
Hobart	1	Tahlequah	13
Holdenville	1	Tishomingo	2
Idabel	12	Tulsa	200
Kingfisher	1	Tuttle	1
Kiowa	1	Unknown	8
Lawton	32	Vinita	2
Lexington	1	Wagoner	5
Mangum	1	Wainwright	1
Marlow	1	Waurika	1
McAlester	7	Weatherford	6
Miami	2	Woodward	2
Midwest City	14	Yukon	1
Moore	5		

The geographic location, by county, where the medical malpractice incident occurred.

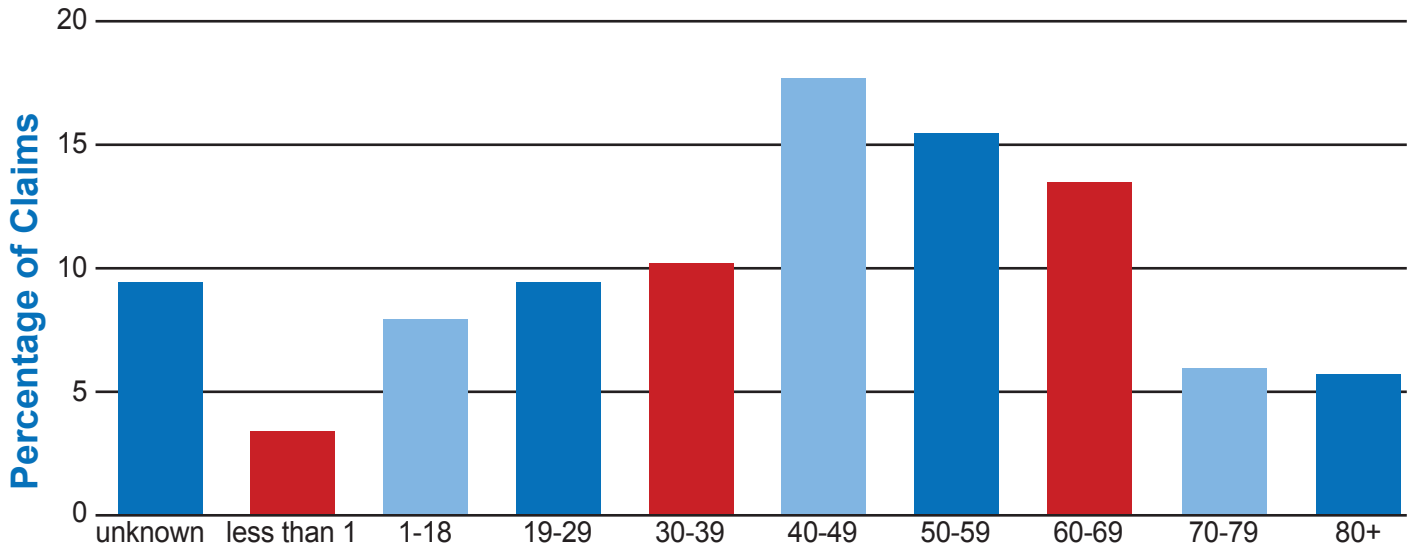
County	Closed Claim Count	County	Closed Claim Count
Adair	6	Logan	5
Beckham	1	Major	1
Bryan	7	Mayes	1
Canadian	5	McClain	3
Carter	5	McCurtain	12
Cherokee	13	Muskogee	20
Cimmaron	1	Oklahoma	272
Cleveland	39	Okmulgee	11
Coal	1	Osage	4
Comanche	32	Ottawa	2
Craig	2	Pawnee	1
Creek	3	Payne	13
Custer	6	Pittsburg	6
Delaware	2	Pontotoc	8
Garfield	4	Pottawatomie	13
Garvin	2	Pushmataha	1
Grady	9	Roger Mills	1
Greer	1	Rogers	6
Haskell	2	Seminole	5
Hughes	1	Sequoyah	8
Jackson	6	Stephens	5
Jefferson	1	Tillman	1
Johnson	2	Tulsa	193
Kay	9	Unknown	4
Kingfisher	1	Wagoner	8
Kiowa	3	Washington	14
LeFlore	5	Washita	1
Lincoln	1	Woodward	2

The sex of the injured person on the incident date.



INSURANCE CLOSED CLAIM ANNUAL REPORT 2011

The age of the injured person on the incident date.



Age of injured person

Age	How many	Percentage
Unknown	76	9.6
less than 1	27	3.4
1-18	64	8.1
19-29	76	9.6
30-39	80	10.1

Age	How many	Percentage
40-49	140	17.7
50-59	125	15.8
60-69	109	13.8
70-79	48	6.1
80+	46	5.8

The severity of malpractice injury using the National Practitioner Data Bank severity scale.

Temporary

NPDB code	Type of Injury	Count
1	Emotional injury	33
2	Insignificant	56
3	Minor	149
4	Major	79

Permanent

NPDB code	Type of Injury	Count
5	Minor	42
6	Significant	41
7	Major	86
8	Grave	17
9	Death	198
	Unknown	90

Settlement information that identifies the final method of claim disposition.

Method of claim disposition	Closed Claim Count
Claim is abandoned by the claimant .	351
Claim is settled by the parties.	161
Directed verdict for the defendant	11
Involuntary dismissal	124
Judgment for the defendant	23
Judgment for the defendant after appeal	6
Judgment for the plaintiff	2

Method of claim disposition	Closed Claim Count
Judgment notwithstanding verdict for the defendant (judgment for the plaintiff)	1
Judgment notwithstanding verdict for the plaintiff (judgment for the defendant)	4
Mediation	93
Other type of alternative dispute resolution process	14
Unknown	1

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Settlement information that identifies the timing of claim disposition

Timing of Claim deposition	Closed Claim Count
Before filing suit or requesting arbitration or a mediation hearing	147
Before trial, arbitration or mediation	489
During trial, arbitration or mediation	129
After trial or hearing, but before judgment or award	1
After judgment or decision, but before appeal	9
During an appeal	2
After an appeal	8
During review panel or non-binding arbitration	4
Unknown	2

Specific information about the indemnity payments and defense and cost-containment expenses for claims disposed of by a court THAT RESULT in a verdict or judgment that itemizes damages.

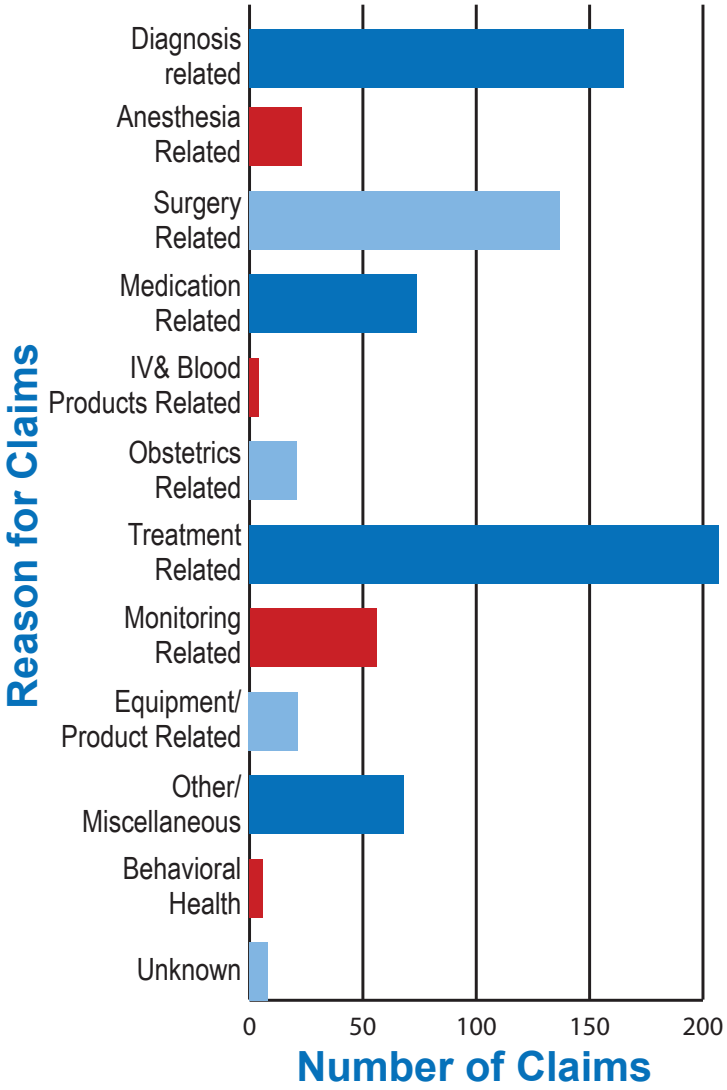
The indemnity payment made on behalf of the defendant	$45,000
Economic damages	$0
Noneconomic damages	$0
Punitive damages, if applicable	$0
Total Defense and Cost Containment Expense	$99,896

Specific information about the indemnity payments and defense and cost-containment expenses for claims that DO NOT result in a verdict or judgment that itemizes damages.

The total amount of the settlement on behalf of the defendant	$50,941,413
The insuring entity's or self-insurer's best estimate of economic damages included in the settlement	$10,450,490
The insuring entity's or self-insurer's best estimate of noneconomic damages included in the settlement	$34,959,972
Total Defense and Cost Containment Expense	$22,167,862

The reason for the medical professional liability claim, allegation group

Reason	Closed Claim Count
Diagnosis related	165
Anesthesia related	23
Surgery Related	137
Medication Related	74
IV & Blood Products Related	4
Obstetrics related	21
Treatment related	207
Monitoring related	56
Equipment / Product Related	22
Other / Miscellaneous	68
Behavioral Health	6
UNKNOWN	8



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The reason for the medical professional liability claim, specific allegation.

NPDB code	Reason	Closed Claim Count
100	Failure to use aseptic technique	1
101	Failure to diagnose	71
102	Failure to delay case when indicated	1
104	Failure to treat fetal distress	1
105	Failure to medicate	3
106	Failure to monitor	41
107	Failure to order appropriate medication	3
108	Failure to order appropriate test	1
109	Failure to perform preoperative evaluation	1
110	Failure to perform procedure	2
112	Failure to recognize a complication	23
113	Failure to treat	36
200	Delay in diagnosis	64
201	Delay in performance	8
202	Delay in treatment	13
203	Delay in treatment of identified fetal distress	2
300	Administration of blood or fluid problems	1
303	Equipment utilization problem	6
304	Improper choice of delivery method	4
305	Improper management	42
306	Improper performance	150
308	Improperly performed vaginal delivery	2
309	Improperly performed resuscitation	3
311	Improper technique	31
314	Pathology error	1
316	Patient history	1
318	Patient monitoring problem	3
319	Patient position problem	3
320	Problem with appliance	5
321	Radiology or imaging error	7
322	Surgical or other foreign body retained	19
323	Wrong diagnosis or misdiagnosis	10
324	Wrong dosage administered	4
325	Wrong dosage dispensed	7
326	Wrong dosage ordered of correct medication	7
327	Wrong medication administered	6
328	Wrong medication dispensed	9
329	Wrong medication ordered	2
330	Wrong body part	7
332	Wrong equipment	1
333	Wrong patient	4
334	Wrong procedure or treatment	5
400	Contraindicated procedure	4
402	Unnecessary procedure	6
404	Unnecessary treatment	2
500	Communication problem between practitioners	8
501	Failure to instruct or communicate with patient of family	9
502	Failure to report on patient condition	1
504	Failure to supervise	5
505	Improper supervision	3
600	Failure/delay in admission to hospital	1
601	Failure/delay in referral or consultation	4
702	Breach of contract or warranty	1
703	Breach of patient confidentiality	1
704	Equipment malfunction	3
706	Failure to ensure patient safety	12
707	Failure to obtain consent / lack of informed consent	7
711	(Legal/ethical/moral) improper conduct	4
715	Product liability	21
716	Religious issues	1
717	Sexual misconduct	2
718	Third party claimant	3
719	Vicarious liability	25
899	Cannot be determined from available records	12
999	Allegation not otherwise classified	35
099	UNKNOWN	10

*2011 Supplemental Information

Number of claims with payment by insurer	200
Number of claims with no payment by insurer	591
Average claim settlement or award with payment by insurer	$254,932
Total defense and cost containment expense for claims with payment by insurer	$11,294,315
Total defense and cost containment expense for claims with no payment by insurer	$10,973,443
Average defense and cost containment for claims with payment by insurer	$56,472
Average defense and cost containment for claims with no payment by insurer	$18,568

*This supplemental information is provided as a courtesy by the Oklahoma Insurance Department to supplement your Medical Professional Liability Insurance Closed Claim Annual Report and is not required to be furnished by statute.