

OKLAHOMA INSURANCE

DEPARTMENT



JANUARY 1, 2012 –
DECEMBER 31, 2012



Medical Professional Liability Insurance Closed Claim Annual Report 2012

Oklahoma Insurance Department
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OKLAHOMA INSURANCE DEPARTMENT

MEDICAL PROFESSIONAL LIABILITY INSURANCE

CLOSED CLAIM ANNUAL REPORT

JANUARY 1, 2012 – DECEMBER 31, 2012

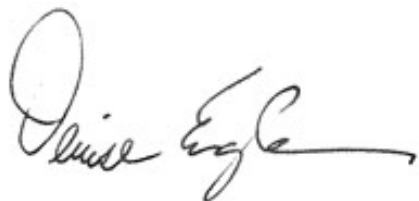
The Oklahoma Insurance Department (OID) presents composite data of medical professional liability closed-claim reports for 2012.

The OID publishes this report pursuant 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 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 2012

**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	3
100,000	6
125,000	1
200,000	2
250,000	9
500,000	18
1,000,000	540
2,000,000	49
3,000,000	8
5,000,000	59
9,000,000	1
10,000,000	5
Unknown/unreported	1

**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
300,000	5
500,000	2
600,000	2
1,000,000	48
1,500,000	1
2,000,000	9
3,000,000	493
4,000,000	34
5,000,000	14
6,000,000	41
10,000,000	1
11,000,000	1
12,000,000	3
Unknown/unreported	45

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

Medical Specialty	Providers Count
Chiropractor	7
Counselor-Mental Health	1
Professional counselor	1
Professional counselor-family/marriage	1
Dentist	76
Dental hygienist	1
EMT Paramedic	1
Registered Nurse	12
Nurse anesthetist	3
Nurse practitioner	7
Licensed practical	4
Certified nurse aide/assistant	1
Home health aide	4
Pharmacist	18
Physician (MD)	254
Physician inter/resident (MD)	1
Osteopathic Physician (DO)	75
Physician assistant allopathic	3
Podiatrist	8
Psychologist	1
Massage therapist	1
Physical therapist	4
Medical technologist	1
Other health care practitioner-not classified	1
Hospital administrator	1
Not an Individual Defendant	209
Unknown	6

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

Medical Occupation/Field	Providers Count
Anesthesiology	13
Cardiovascular diseases	23
Dermatology	5
Emergency medicine	47
Forensic pathology	3
Gastroenterology	8
General / Family Practice	48
General preventive medicine	1
Hospitalist	14

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

Medical Occupation/Field	Providers Count
Internal medicine	27
Neurology	2
Obstetrics & Gynecology	31
Ophthalmology	6
Otolaryngology	1
Pediatrics	6
Psychiatry	2
Public health	14
Physical medicine & rehabilitation	8
Radiology	24
Radiation oncology	3
Colon and rectal surgery	5
General surgery	33
Neurological surgery	8
Orthopedic surgery	29
Plastic surgery	12
Thoracic surgery	5
Urological surgery	10
Other specialty, Unspecified, Unknown	237
General dentistry (no specialty)	35
Pediatric Dentistry	42

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

Location within Facility	Closed Claim Count
Catheterization lab	5
Critical care unit	7
Dispensary	1
Emergency department	83
Labor and delivery room	13
Laboratory	6
Nursery	2
Operating room	179
Outpatient department	9
Patient room	101
Pharmacy	1
Physical therapy department	5
Radiation therapy department	1
Radiology department	13
Recovery room	6
Rehabilitation center	1
Special procedure room	21
Clinical support center - such as a laboratory or radiology center	4
Office	125
Walk-in clinic	12
Other department in hospital	19
Other/Unknown	88

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

Type of Health Care Facility	Closed Claim Count
Chiropractic Group / Practice	7
Dental Group / Practice	77
Optician / Optometric Group / Practice	1
Podiatric Group / Practice	3
Medical Group / Practice	63
Mental health / Substance Abuse Group / Practice	2
Home Health Agency / Organization	3
General/Acute Care Hospital	411
Rehabilitation Hospital	6
Federal Hospital	1
Rehabilitation Unit	1
Nursing Facility/Skilled Nursing Facility	21
Adult Day Care Facility	1
Intermediate Care Facility for Mentally Retarded/ Substance Abuse/ Hospice / Hospice Care Provider	3

Type of Health Care Facility	Closed Claim Count
Outpatient Rehabilitation Center/Comprehensive Outpatient Rehabilitation Center	8
Ambulatory Surgical Center	29
Ambulatory Clinic/Center	12
Health Center/Federally Qualified Health Center/ Community Health Center	2
Mental Health Center/Community Mental Health Center	2
Rural Health Clinic	2
Radiology/Imaging Center	2
Pharmacy	18
Organ Procurement Organization	1
Nursing/Health Care Staffing Service	5
Other not specified	21

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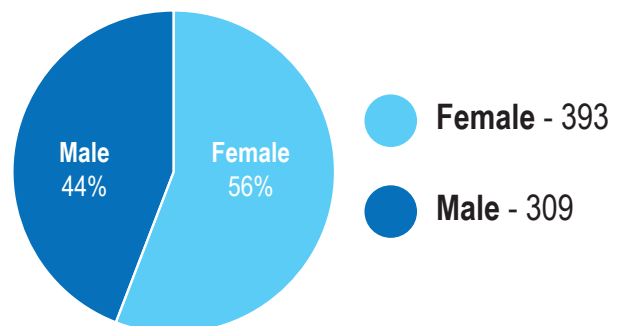
The geographic location, by city, where the medical malpractice incident occurred.

City	Closed Claim Count	City	Closed Claim Count
Ada	7	McAlester	13
Altus	8	McCloud	1
Alva	2	Midwest City	18
Arapaho	1	Moore	3
Ardmore	12	Muskogee	21
Atoka	2	Norman	19
Bartlesville	7	Nowata	3
Bethany	2	Okemah	1
Blackwell	5	Oklahoma City	190
Broken Arrow	8	Okmulgee	1
Bryan	1	Owasso	9
Carnegie	1	Pauls Valley	7
Checotah	2	Pawhuska	1
Chickasha	3	Perkins	1
Claremore	6	Ponca City	5
Colbert	2	Poteau	3
Cushing	2	Sallisaw	1
Drumright	1	Sapulpa	1
Duncan	6	Seminole	3
Durant	5	Shawnee	19
Edmond	12	Stigler	1
El Reno	3	Stillwater	8
Elk City	2	Stroud	2
Enid	7	Sulphur	1
Eufaula	1	Tahlequah	6
Fairview	1	Tishomingo	3
Glenpool	2	Tulsa	165
Grove	1	Tuttle	1
Guthrie	6	Unknown/Unreported	5
Guymon	3	Vinita	1
Hobart	2	Warner	1
Holdenville	4	Warr Acres	1
Hugo	5	Wayne	1
Idabel	6	Weatherford	1
Inola	1	Wilburton	1
Kingfisher	3	Woodward	1
Lawton	37	Yukon	3
Mannford	1		

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

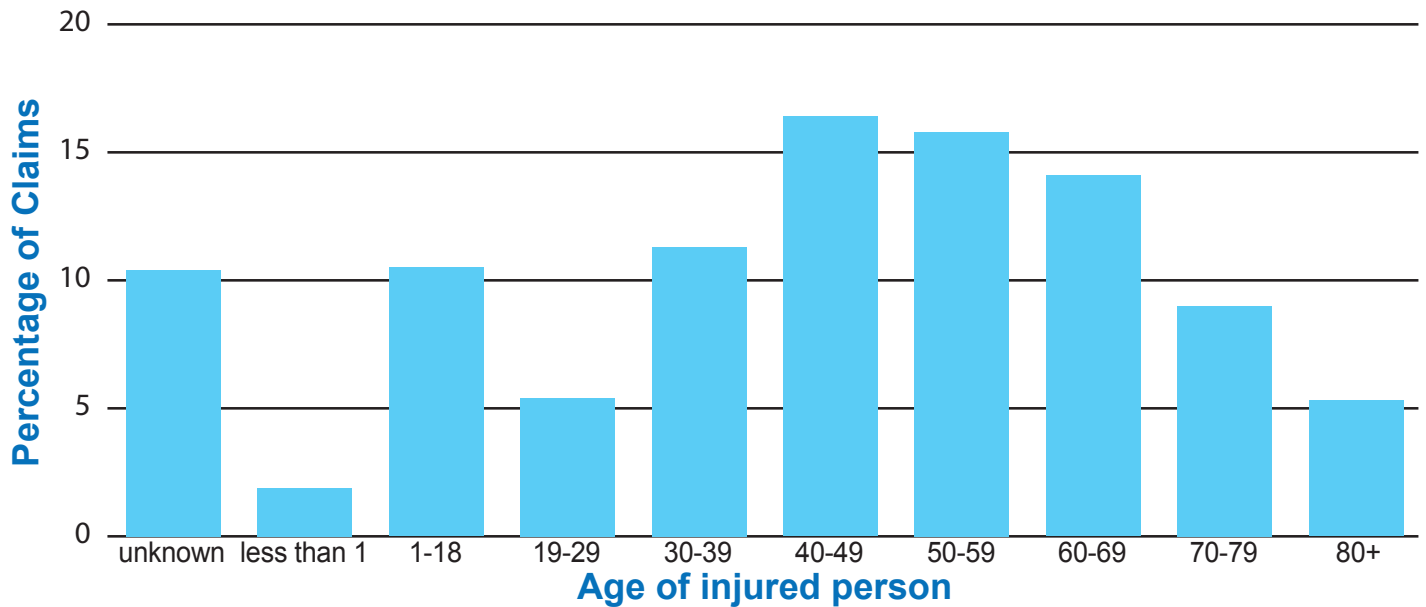
County	Closed Claim Count	County	Closed Claim Count
Atoka	2	McClain	1
Beckham	3	McCurtain	6
Bryan	8	McIntosh	3
Caddo	1	Murray	1
Canadian	4	Muskogee	21
Carter	12	Nowata	3
Cherokee	6	Okfuskee	1
Choctaw	5	Oklahoma	220
Cleveland	29	Okmulgee	2
Comanche	37	Osage	2
Craig	1	Payne	11
Creek	5	Pittsburg	15
Custer	2	Pontotoc	6
Garfield	7	Pottawatomie	19
Garvin	7	Rogers	11
Grady	4	Seminole	3
Haskell	1	Sequoyah	1
Hughes	4	Stephens	6
Jackson	8	Texas	3
Johnson	3	Tulsa	180
Kay	9	Unknown	4
Kingfisher	3	Washington	6
Kiowa	1	Woods	2
Latimer	1	Woodward	1
Leflore	3		
Lincoln	1		
Logan	6		
Major	1		

The sex of the injured person on the incident date.



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The age of the injured person on the incident date.



Age	How many	Percentage
Unknown	73	10.4
less than 1	13	1.9
1-18	74	10.5
19-29	38	5.4
30-39	79	11.3

Age	How many	Percentage
40-49	115	16.4
50-59	111	15.8
60-69	99	14.1
70-79	63	9
80+	37	5.3

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

Temporary		
NPDB code	Type of Injury	Count
1	Emotional injury	62
2	Insignificant	52
3	Minor	131
4	Major	61

Permanent		
NPDB code	Type of Injury	Count
5	Minor	42
6	Significant	40
7	Major	49
8	Grave	9
9	Death	189
	Unknown	67

Settlement information that identifies the final method of claim disposition.

Method of claim disposition	Closed Claim Count
Claim is abandoned by the claimant .	333
Claim is settled by the parties.	156
Directed verdict for the defendant	6
Involuntary dismissal	81
Judgment for the defendant	24
Judgment for the plaintiff	1

Method of claim disposition	Closed Claim Count
Judgment notwithstanding verdict for the plaintiff (judgment for the defendant)	4
Mediation	85
Other type of alternative dispute resolution process	11
Unknown	1

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Settlement information that identifies the timing of claim disposition

Timing of Claim disposition	Closed Claim Count
Before filing suit or requesting arbitration or a mediation hearing	158
Before trial, arbitration or mediation	398
During trial, arbitration or mediation	135
After trial or hearing, but before judgment or award	3
After judgment or decision, but before appeal	5
After an appeal	1
During review panel or non-binding arbitration	1
Unknown	1

The reason for the medical professional liability claim, allegation group

Reason	Closed Claim Count
Diagnosis related	136
Anesthesia related	8
Surgery Related	118
Medication Related	55
IV & Blood Products Related	3
Obstetrics related	13
Treatment related	240
Monitoring related	34
Equipment / Product Related	19
Other / Miscellaneous	68
Behavioral Health	4
Unknown/Unreported	4

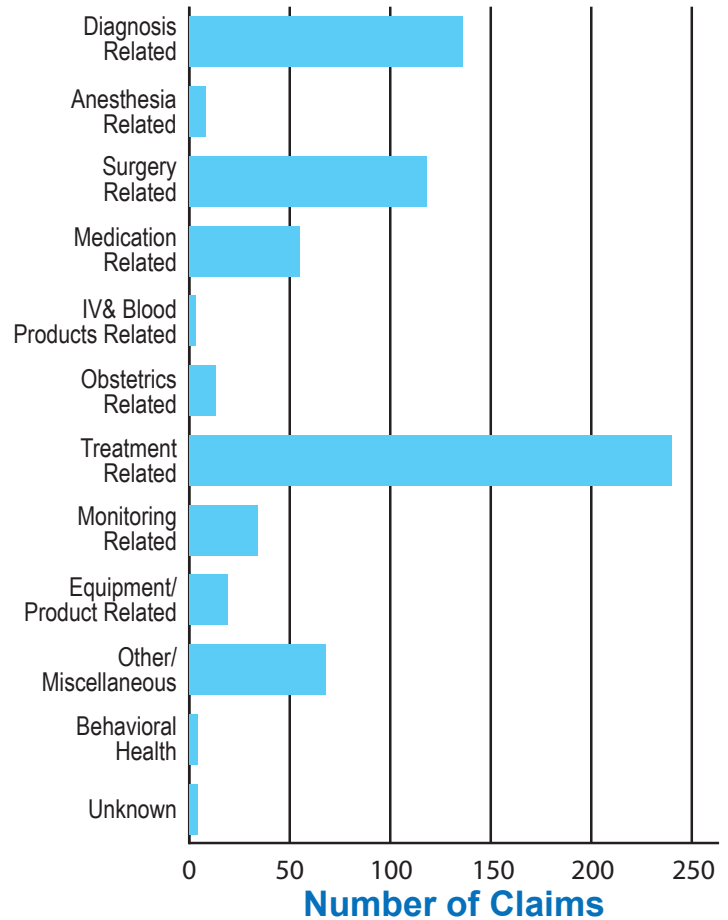
Specific information about the indemnity payments and defense and cost-containment expenses for claims disposed of by a court THAT RESULT in a verdict or judgment that itemizes damages.

The indemnity payment made on behalf of the defendant	\$1,208,00
Economic damages	\$60,000
Noneconomic damages	\$750,000
Punitive damages, if applicable	\$0
Total Defense and Cost Containment Expense	\$1,182,311

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	\$37,927,732
The insuring entity's or self-insurer's best estimate of economic damages included in the settlement	\$4,491,849
The insuring entity's or self-insurer's best estimate of noneconomic damages included in the settlement	\$28,864,161
Total Defense and Cost Containment Expense	\$23,412,457

Reason for Claims



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

NPDB code	Reason	Closed Claim Count	NPDB code	Reason	Closed Claim Count
100	Failure to use aseptic technique	2	326	Wrong dosage administered	1
101	Failure to diagnose	54	327	Wrong dosage dispensed	4
102	Failure to delay case when indicated	2	328	Wrong dosage ordered of correct medication	3
104	Failure to identify fetal distress	2	329	Wrong medication administered	9
105	Failure to medicate	2	330	Wrong medication dispensed	13
106	Failure to monitor	26	332	Wrong medication ordered	1
107	Failure to order appropriate medication	2	333	Wrong body part	2
108	Failure to order appropriate test	1	334	Wrong Blood type	1
109	Failure to perform procedure	6	400	Wrong patient	2
110	Failure to perform resuscitation	2	402	Wrong procedure or treatment	5
112	Failure to recognize a complication	35	404	Contraindicated procedure	3
113	Failure to treat	23	500	Unnecessary procedure	1
200	Delay in diagnosis	59	501	Unnecessary treatment	1
201	Delay in performance	1	502	Communication problem between practitioners	5
202	Delay in treatment	11	504	Failure to instruct or communicate with patient of family	4
203	Delay in treatment of identified fetal distress	2	505	Failure to report on patient condition	1
300	Administration of blood or fluid problems	3	600	Failure to supervise	4
303	Complimentary or alternative medication problem	4	601	Failure/delay in admission to hospital	2
304	Equipment utilization problem	5	702	Failure/delay in referral or consultation	9
305	Improper choice of delivery method	2	703	Premature discharge from institution	1
306	Improper management	96	704	Breach of contract or warranty	2
308	Improper performance	128	706	Breach of patient confidentiality	2
309	Improperly performed test	1	707	Equipment malfunction	4
311	Improper technique	18	711	Failure to ensure patient safety	20
314	Intubation problem	2	715	Failure to obtain consent / lack of informed consent	2
316	Lab error	2	716	(Legal, ethical, or moral) improper conduct	1
318	Pathology error	2	717	Product liability	5
319	Problems with patient monitoring in recovery	1	718	Sexual misconduct	2
320	Patient monitoring problem	3	719	Vicarious liability	33
321	Patient position problem	1	899	Cannot be determined from available records.	9
322	Problem with appliance	6	999	Allegation not otherwise classified	16
323	Radiology or imaging error	4	099	Unknown	4
324	Surgical or other foreign body retained	9			
325	Wrong diagnosis or misdiagnosis	13			

*2012 Supplemental Information

Number of claims with payment by insurer	212
Number of claims with no payment by insurer	490
Average claim settlement or award with payment by insurer	\$184,603
Total defense and cost containment expense for claims with payment by insurer	\$13,669,699
Total defense and cost containment expense for claims with no payment by insurer	\$10,925,069
Average defense and cost containment for claims with payment by insurer	\$64,480
Average defense and cost containment for claims with no payment by insurer	\$22,296

*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.