

**WAC 284-24C-050 Additional medical professional liability statistical plan reporting requirements required by the commissioner.** In addition to the data items specified by the *NAIC Statistical Handbook*, these data items, specific to this medical malpractice statistical plan rule, must be reported by each medical malpractice insurer to a medical malpractice statistical agent:

- (1) Claim dates:
  - (a) Incident month/year; and
  - (b) Report month/year.
  - (c) Closed month/year (closed claims only).
- (2) Additional transaction identifiers and details. Identify the following items and their respective amounts:
  - (a) Paid losses segmented by amounts paid or incurred for past and future:
    - (i) Wage loss;
    - (ii) Medical expenses; and
    - (iii) All other losses.
  - (b) Paid allocated loss adjustment expenses segmented by amounts paid for:
    - (i) Defense counsel;
    - (ii) Expert witness; and
    - (iii) All other allocated loss adjustment expenses.
  - (c) Outstanding losses segmented by amounts paid or incurred for past and future:
    - (i) Wage loss;
    - (ii) Medical expenses; and
    - (iii) All other losses.
  - (d) Outstanding allocated loss adjustment expense segmented by amounts paid or incurred for:
    - (i) Defense counsel;
    - (ii) Expert witness; and
    - (iii) All other allocated loss adjustment expenses.
- (3) Policy limit per incident.
- (4) Deductible or retention.
- (5) Medical outcome classifications (use only one code):
  - (a) Emotional only: Fright, no physical damage.
  - (b) Temporary: Slight - lacerations, contusions, minor scars, rash. No delay.
  - (c) Temporary: Minor - infections, mis-set fracture, fall in hospital. Recovery delayed.
  - (d) Temporary: Major - burns, surgical material left, drug side effect, brain damage. Recovery delayed.
  - (e) Permanent: Minor - loss of fingers, loss or damage to organs. Includes nondisabling injuries.
  - (f) Permanent: Significant - deafness, loss of limb, loss of eye, loss of one kidney or lung.
  - (g) Permanent: Major - paraplegia, blindness, loss of two limbs, brain damage.
  - (h) Permanent: Grave - quadriplegia, severe brain damage, life-long care or fatal prognosis.
  - (i) Permanent: Death.
- (6) Act or omission classification, as follows:
  - (a) Diagnosis related;
  - (b) Anesthesia related;
  - (c) Surgery related;
  - (d) Medication related;
  - (e) Intravenous and/or blood products related;

- (f) Obstetrics related;
- (g) Treatment related;
- (h) Monitoring related;
- (i) Biomedical equipment and/or product related;
- (j) Behavioral health related; or
- (k) All other.

(7) Territory indicator for the county of the principal location in which the incident of alleged medical malpractice occurred.

[Statutory Authority: RCW 48.02.060, 48.19.370. WSR 06-13-035 (Matter No. R 2005-02), § 284-24C-050, filed 6/15/06, effective 7/16/06.]