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, lifelong 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;
- (q) 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.