

May 31, 1988

SUBJECT: INSURANCE

WITHDRAWN

Circular Letter No. 14 (1988)

TO: ALL INSURERS THAT HAVE WRITTEN MEDICAL MALPRACTICE INSURANCE IN NEW YORK STATE

RE: UNIFORM CLAIM REPORT REQUIREMENTS MEDICAL MALPRACTICE CLAIM COUNTS HARVARD
MEDICAL MALPRACTICE STUDY REQUIRED COMPLIANCE CERTIFICATION

Circular Letters No. 6 (1986), No. 6 (1987) and No. 10 (1988) (copies attached) deal with ongoing medical malpractice claims reporting requirements under governing state and federal law, including Section 315 of the New York Insurance Law. In the context of these statutory mandates, this Circular Letter concerns the special medical malpractice study being conducted by the Harvard Medical Practice Study Group, engaged by the Commissioner of Health after consultation with the Superintendent of Insurance, pursuant to Section 39 of Chapter 266 of the Laws of 1986, to:

...develop the information needed to appraise the operation of the current fault-based tort system and to assess the possibility of alternatives to tort liability -- in particular, no-fault compensation for injured patients, analogous to that now provided workers injured on the job.

Key components of the Harvard Group study depend upon analysis of Section 315 insurer claim information submitted on the prescribed forms. As Circular Letter No. 10 (1988) notes, beyond being required by law, it would seem to be in insurers' best interests to maximize compliance and cooperation in order to facilitate this study. As prescribed by Circular Letter No. 6 (1986), complete insurer claim information current to the first-half of 1988 is required no later than August 15, 1988.

The Harvard Group study is focusing on reporting years 1983 through 1988. Accordingly, each insurer subject to Section 315 shall (by its chief executive officer chief operating officer, or responsible individual in charge of medical malpractice business) certify to the Superintendent that it has complied with Section 315 and submitted on the prescribed forms all information required on all physician and hospital medical malpractice claims for each of the reporting years 1983, 1984, 1985, 1986, 1987 and the first-half of 1988, in accordance with such statutory provisions and applicable Circular Letters.

In addition, given the time focus of this study, to assist the Harvard Group in connection with its evaluation of hospital records, claims frequency and claims severity, the requisite certification shall also specify the following physician and hospital medical malpractice claims count information:

(a) total number of claims opened, arising from accident year 1984, in each of the years 1984, 1985, 1986, 1987 and first-half 1988;

(b) total number of claims closed, arising from accident year 1984, in each of the years 1984, 1985, 1986, 1987 and first-half 1988;

(c) total number of claims opened in calendar year 1983, arising from accident years 1983 and prior by accident year; and

(d) total number of claims closed in calendar year 1983, arising from accident years 1983 and prior by accident year.

The certification herein specified shall be made on the annexed form and shall be directed to the attention of Joan Finnerty, Property & Casualty Insurance Bureau, at the above address, to be received no later than August 15, 1988. Please direct questions to Ms. Finnerty (212-602-0372).

The Insurance Department will not seek penalties against an insurer for Section 315 non-compliance prior to August 15, 1988 with respect to the reporting years 1983 through the first-half of 1988, where reporting deficiencies (if any) are cured in conjunction with a certification duly made and received by August 15, 1988. Since failure to furnish full physician and hospital medical malpractice claims information by this date could seriously impede carrying out the legislative mandate, any such failures will be viewed as wilful violations of the Insurance Law.

Very truly yours,

JAMES P. CORCORAN

[SIGNATURE]

SUPERINTENDENT OF INSURANCE

SECTION 315 PHYSICIAN & HOSPITAL CLAIM COMPLIANCE CERTIFICATION

Name of Insurer

Address of Insurer

NAIC Code Number

TOTAL NUMBER OF CLAIMS,
ARISING FROM ACCIDENT
YEAR 1984:

(a) OPENED

(b) CLOSED

(1) 6m88:

(1) 6m88:

(2) 1987:

(2) 1987:

(3) 1986:

(3) 1986:

(4) 1985:

(4) 1985:

(5) 1984:

(5) 1984:

TOTAL NUMBER OF CLAIMS
IN CALENDAR YEAR 1983,
ARISING FROM ACCIDENT YEARS:

(c) OPENED

(d) CLOSED

(1) 1983:

(1) 1983:

(2) 1982:

(2) 1982:

- | | |
|------------|-------------|
| (3) 1981: | (3) 1981: |
| (4) 1980: | (4) 1980: |
| (5) 1979: | (5) 1979: |
| (6) 1978: | (6) 1978: |
| (7) 1977: | (7) 1977: |
| (8) 1976: | (8) 1976: |
| (9) 1975: | (9) 1975: |
| (10)1974: | (10) 1974: |
| (11)Prior: | (11) Prior: |

The undersigned hereby certifies on behalf of the insurer identified above that: (A) the information provided on this form is correct and complete; and (B) said insurer is now in compliance with Section 315 of the Insurance Law, for the reporting years 1983, 1984, 1985, 1986, 1987 and the first-half of 1988, having submitted on the prescribed forms all information required on all physician and hospital medical malpractice claims, in accordance with Section 315 and Circular Letters No. 6 (1986) and No. 6(1987).

Name of Certifier

Certifier Title

Certifier Tel. No. Date:

Certifier Signature