

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

DIVISION OF INSURANCE

124 S. Euclid Ave., 2nd Floor, Pierre, South Dakota 57501
Tel: 605.773.3563 Fax: 605.773.5369 dlr.sd.gov/insurance

MEDICAL MALPRACTICE REPORT

Instructions

- a. Complete sections A and B for all adjudicated, paid or closed claims within thirty days of such event.
b. Complete section A only, for each claim not previously reported pursuant to instruction (a.), reported to company during the six-month periods ending June 30th and December 31st of each year.
c. Include all professional liability claims involving the providing of health care services including, but not limited to, physicians, hospitals, nurses, chiropractors, dentists, etc.
d. Reports can be submitted by email to sdinsurance@state.sd.us (list "Medical Malpractice Report" in subject line) or by mail to: Division of Insurance, 124 S. Euclid Ave., 2nd Floor, Pierre, South Dakota 57501.

Section A

Name of Reporting Insurer: NAIC #:

Date of this Report: Claim File I.D.:

Date of Injury: Date Injury Reported:

Insured's Name:

Insured is a/an: Individual Clinic Hospital Other:

Insured's Address: Street City State Zip

Place where injury occurred:

Claimant or plaintiff's name(s):

Claimant or plaintiff's date of birth: or age in years: or check here if unknown

Claimant or plaintiff's address: Street City State Zip

Name of injured party (if other than claimant/plaintiff):

Nature and substance of claim (for each claimant):

Section B

Date of this report: Date of payment, judgment or closing of file:

Type of Settlement: Arbitration Closed w/o payment or Settled w/o payment Court Settlement Negotiated Mediation Other (Describe)

If consideration was not paid on behalf of insured and judgment for no cause of action not entered, state reason for dismissal:

Has the award been appealed? Yes No By which party? Plaintiff Insured

Amount of settlement on behalf of insured (separate for each claimant: \$

Loss adjustment expense paid to defense counsel: \$

Amount of other allocated loss adjustment expense: \$

Reports can be submitted by email to: sdinsurance@state.sd.us (list "Medical Malpractice Report" in subject line) or by mail to: Division of Insurance 124 S. Euclid Ave., 2nd Floor Pierre, South Dakota 57501

Signature

Printed Name Phone Number

Title

Email

CHAPTER 23A
MEDICAL MALPRACTICE INSURANCE

- 58-23A-1. Exclusion of coverage on basis of execution of arbitration agreement prohibited.
- 58-23A-2. Reports of malpractice claims required of insurers -- Frequency.
- 58-23A-3. Form and contents of report on claims.
- 58-23A-4. Data required on disposition of claims.
- 58-23A-5. Forwarding of information to professional licensing board.
- 58-23A-6. Information and files kept by division -- Confidentiality -- Release at director's discretion.
- 58-23A-7. Insurers and division not liable for official actions under chapter.
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58-23A-1. Exclusion of coverage on basis of execution of arbitration agreement prohibited. No medical or hospital professional liability insurance policy shall contain a provision or be construed to exclude coverage on the basis of the insured's execution of an agreement contemplated by chapter 21-25B.

58-23A-2. Reports of malpractice claims required of insurers -- Frequency. Each insurance company engaged in issuing professional medical malpractice insurance in this state shall file with the State Division of Insurance a report of all claims for medical malpractice made against any of its insureds and received by it since its last report. Such reports shall be made to the division not less than semiannually on dates determined by the division.

58-23A-3. Form and contents of report on claims. Such reports shall be in writing on a form prescribed by the division and shall contain the following information:

- (1) Name and address of physician, nurse, hospital, or other person or institution against which claim is made;
 - (2) Name, address, and age of the claimant or plaintiff;
 - (3) Nature and substance of the claim; and
 - (4) Date and place from which the claim arose.
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58-23A-4. Data required on disposition of claims. The following data and information shall be furnished by the insurance company to the division within thirty days from any judgment, settlement, or other dismissal involving the insured:

- (1) Date of any judgment, settlement, or other dismissal;
 - (2) Whether any appeal has been taken and by which party;
 - (3) Amount of any judgment against the insured;
 - (4) Amount of any settlement paid on behalf of the insured, whether such settlement was negotiated by suit or without the filing of a complaint for damages; and
 - (5) If consideration was not paid on behalf of the insured and a judgment of no cause for action was not entered, the reason for any dismissal.
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58-23A-5. Forwarding of information to professional licensing board. The Division of Insurance shall, within thirty days of receipt, submit in writing to the appropriate state professional and occupational licensing board, the data and information furnished to the division pursuant to this chapter, but only that which is relevant to the board.

58-23A-6. Information and files kept by division -- Confidentiality -- Release at director's discretion. The Division of Insurance shall retain the information and maintain the files in the form and for a period as it shall determine necessary. The division shall maintain the data and information filed in accordance with this chapter as confidential records and shall release the same only for bona fide research, educational, or legislative purposes, or as required by § 58-23A-5. The director of the division in his sole discretion shall determine the validity of any request for the information.

58-23A-7. Insurers and division not liable for official actions under chapter. There is no liability on the part of, and no cause of action of any nature may arise against, an insurer reporting pursuant to this chapter or its insurance producers or employees, or the division or its representatives, for any action taken by them pursuant to this chapter.
