

### CAS ANTITRUST NOTICE

- The Casualty Actuarial Society is committed to adhering strictly to the letter and spirit of the antitrust laws. Seminars conducted under the auspices of the CAS are designed solely to provide a forum for the expression of various points of view on topics described in the programs or agendas for such meetings.
- Under no circumstances shall CAS seminars be used as a means for competing companies or firms to reach any understanding expressed or implied that restricts competition or in any way impairs the ability of members to exercise independent business judgment regarding matters affecting competition.
- It is the responsibility of all seminar participants to be aware of antitrust regulations, to prevent any written or verbal discussions that appear to violate these laws, and to adhere in every respect to the CAS antitrust compliance policy.

© Oliver Wyms

Introduction

# California Jury Awards Family of Brain-damaged Boy \$12.1Million

(Contra Costa Times – 9/19/14)

© Oliver Wyn

2

1 4 1	4.4
Introd	uction
IIIIII	uction

## Awards Greater than \$1 Million (Indemnity)

	#	\$
	Percentage	Percentage
1985	0.6%	8.1%
1995	2.7%	18.9%
2005	6.7%	27.4%
2012	9.0%	33.8%

• [Source: PIAA Closed Claim Comparative 2014]

© Olver Wyman

# Introduction

# • Birth Injury Fund General Goals

- -provide needed care to injured children
- -reduce medical professional liability costs
- -make medical professional liability insurance premiums more affordable
- -make medical professional liability insurance more available so that, in particular, physicians will continue to provide obstetrics services

© Oliver Wyms

Virginia Birth-Related Neurological Injury Compensation Program

	_
Virginia Birth-Related Neurological Injury Compensation Program	
• Established in 1987	
Governed by a Board appointed by the Governor; Executive Director;	
Funded by the Virginia Birth-Related Neurological Injury Compensation Fund	
Participation is Optional for Physicians and Hospitals	
- Hospitals – 36 participated in 2013 - Physicians – 703 participated in 2013	
© Clow Wyman 6	
	]
Virginia Birth-Related Neurological Injury Compensation Program	
• Eligibility	
≻injury must be a birth-related neurological injury as defined by law	
and either	
➤obstetrical services were performed by a participating physician	
or	
➤ birth occurred in a participating hospital	
© Clour Wyman 7	
	1
Virginia Birth-Related Neurological Injury Compensation Program	
• Process	
≻file claim with the Virginia Workers' Compensation Commission	
≻must be filed by claimant's 10 <sup>th</sup> birthday	
≻case reviewed by experts	
≻hearing	
>WCC decision	
© Claw Wyman 8	
I ·	l .

Virginia Birth-Related Neurological Injury Compensation Program	
Eligible Benefits Include (among other benefits):     >medical	
≻ hospital	
➤nursing care	
≻rehabilitation	
≻lost earnings	
≻ prescription drugs	
≻special equipment/facilities	
Excess over Other Government Programs, Pre-Paid Health Plans, or Private Insurance	
© Cher Wynns 9	
	1
Virginia Birth-Related Neurological Injury Compensation Program	
• Funding	
≻hospitals – \$55 per live birth (subject to a maximum)	
≻participating physicians - \$6,250 annual assessment currently	
➤non participating physicians – annual assessment if necessary \$300	
liability insurers – may be assessed a % of written premium (currently	
.25%)	
© Ober Hyman 10	
	1
Virginia Birth-Related Neurological Injury Compensation Program	
• Facts & Figures	
> # of claimants in the Fund as of 12/31/13: 183 (plus 42 not-yet-admitted)about 10 per birth year	
➤financials as of 12/31/13:	
o assets: \$384M	
o liabilities: \$442M (discounted reserves)	
o operating revenue: about \$25M per year (-half from insurance company fees)	
o investment income: \$37M in 2013	
o sufficiently funded for more than 20 years	
© Cliver Wyman 11	

Virginia Birth-Related Neurological Injury Compensation Program	
Actuarial Studies of Reserve Needs and Funding Adequacy	
≻conducted at the direction of the Virginia Bureau of Insurance	
≻performed at least once every two years	
0 Oler Wynn 12	
Virginia Birth-Related Neurological Injury Compensation Program	
Considerations	
➤ultimate number of claimants/participants — development methods	
>annual costs: by benefit category, by claimant category o inflation	
o changes in utilization	
o investment rates	
o risk margin (implicit)	
o payment patterns	
o mortality (Shavelle tables; combined tables for Group C)	
	1
Florida Birth-Related Neurological Injury	
Compensation Plan	

	•
Florida Birth-Related Neurological Injury Compensation Plan	
Established in 1988	
Administered By The Florida Birth-Related Neurological Injury Compensation Association (NICA)	
Participation is Optional for Physicians	
- Fattelpation is Optional for Fitysicians	
≻about 1,000 as of 1/1/14	
© Other 19yrain	
Florida Birth-Related Neurological Injury Compensation Plan	
Total Shiri Total Carroll Signal Hydry Compensation Than	
• Eligibility	
>injuries must be birth-related neurological injuries as defined by law	
Finjuries must be birth totaled fledfological injuries as defined by law	
and	
≻obstetrical services were performed by a participating physician	
	-
© Cliner Wymans 16	
<b></b>	1
Florida Birth-Related Neurological Injury Compensation Plan	
	•
• Process	
acceptance into the Plan is determined by an Administrative Law Judge after a petition is filed with the Florida Division of Administrative Hearings	
> petition must be filed by the child's fifth birthday	
O Char Wyman 17	

Florida Birth-Related Neurological Injury Compensation Plan  • Eligible Benefits Include (among other benefits):	
≻medical	
≻hospital	
≻nursing care	
≽rehabilitation	
≻special equipment/facilities	
≻prescription drugs	
≻one time cash award \$100K to parents/guardians	
Excess over Other State/Federal Government Programs, Pre-Paid Health Plans, or Private Insurance	
© Chart Wyman 18	
Florida Birth-Related Neurological Injury Compensation Plan	
, total 2 total consistent many componential.	
• Funding	
≻hospitals – \$50 per live birth	
➤participating physicians - \$5,000 annual assessment	
➤non-participating physicians – annual assessment of \$250	
➤Insurance Regulatory Trust Fund – initial \$20M transfer; can transfer	
another \$20M	
➤ liability insurers - may be assessed a % of written premium (max is .25%)	
© China Tiyrana 19	
	1
Florida Birth-Related Neurological Injury Compensation Plan	
• Facts & Figures	
> # of claimants in the Fund as of 9/30/12: 314 (about 15 per birth year)	
≽financials as of 6/30/13:	
o assets: \$1,062M	
o liabilities: \$1,059M (discounted reserves)	
o operating revenue: about \$25M per year (most from physician assessments)	
o investment income: \$74M in fiscal year 2013	
© Chew Wyman 20	

Florida Birth-Related Neurological Injury Compensation Plan	
Actuarial Studies of Reserve Needs and Funding Adequacy	-
≻performed quarterly	
	-
6 Olear Wyman 21	
Florida Birth-Related Neurological Injury Compensation Plan	
Considerations     ≻historical development (triangles)	
≻several methods	
➤inflation  ➤investment rates	
≻risk margin (explicit)	
➤unreported claims  ➤payment patterns (based on history, case reserve worksheets, and mortality)	
>mortality	
6 Oler Wyman 22	
Γ	1
New York Medical Indemnity Fund	

	_
New York Medical Indemnity Fund	
Established in 2011	
To Pay for all Future Costs Necessary to Meet the Health Care Needs of "Qualified Plaintiffs" and to Reduce Medical Professional Liability	
Costs and Insurance Premiums	
Administered by the Department of Financial Services	
Mandatory Participation	-
© Cliner Wyman 24	<u> </u>
New York Medical Indemnity Fund	
• Eligibility	
➤ any person deemed in a court approved settlement or judgment to have sustained a birth-related neurological injury during labor, delivery, or	
resuscitation after birth as a result of medical malpractice or alleged medical malpractice is a qualified plaintiff	
➤ applies to related actions for which no judgment/settlement had been entered before April 1, 2011	
© Char Wyman 25	
	1
New York Medical Indemnity Fund	
Eligible Benefits Include (among other benefits):  >medical	
≻hospital	
≻nursing	
>rehabilitation	-
>medical equipment >drugs	
Excess over Private Insurance	
© Ober Wyman	

New York Medical Indemnity Fund	
• Funding	
≻general appropriations (\$30M first year)	
> "quality contribution" collected from hospitals = 1.6% of inpatient revenue derived from inpatient obstetrical services	
derived non inpatient obstetnear services	
6 Clau Wynas 27	
	1
New York Medical Indemnity Fund	
• Process	
≻plaintiff (injured party) files suit against healthcare provider	
≻go through the litigation process	
➢if plaintiff wins, or gets favorable settlement, court awards a total settlement amount and allocates it between future medical care and other (i.e., pain & suffering, economic)	
>plaintiff receives non-medical portion and applies to Fund for future medical care	
➢if accepted (intention is to accept all), future medical costs are paid by Fund and amount of such payments are not at all linked to the amount of the award/settlementFund decides on type of care, quality of care, amount of care, and how much it will pay	
➤ statute is silent on how to do the allocation; first case, court allocated 50/50.	
	٦
New York Medical Indemnity Fund	
Illustration: \$12.1 Million Award	
≽\$55,000 for past medical care	
>\$9.6 million for future medical care	
≽\$2 million for loss of future earnings	
≽\$500,000 for past pain & suffering	
© Oliver Wyman 29	1

Vork Medical Indomnity	Fund	
New York Medical Indemnity I	i unu	
DAMAGES	PRE-MIF	MIF
Pain & Suffering  Past Medical	\$500,000 \$55,000	\$500,000
Future Medical Expenses	\$9,600,000	\$55,000 Paid by MIF
Lost Earnings	\$2,000,000	\$2,000,000
Plaintiff Attorney Fees (est.)	\$1,000,000	\$1,000,000
		21% Paid to Attorney by Plaintiff; 79% Paid by Defendant
Total Liability of Defendant	\$12,100,000	\$3,345,000
© Olver Wyman		30
New York Medical Indemnity I	Fund	
Attorney Fees		
•		
≽if plaintiff wins, plaintiff's at	torney fees determi	ined based on the full
settlement amount (per cal- and non-medical	culation rules) and	pro-rated between medical
and non medical		
>fees allocated to medical a	re paid by defenda	nt
>		
>fees allocated to non-medi	cal are paid by plaii	ntiff
>defendant is responsible for	or paying portion of	plaintiff attorney fees
allocable to Fund damages	s, and plaintiff is res	ponsible for the remainder
		31
© Oliver Wyman		31
New York Medical Indemnity I	Fund	
• Incontivos		
Incentives		
	cated to medical	
defendant wants more allo		
	laaihaaa aaa aa haa	
> plaintiff wants more allocate	ted to non-medical	
>plaintiff wants more allocate	ted to non-medical	
	ted to non-medical	
≻plaintiff wants more allocat	led to non-medical	
≻plaintiff wants more allocat	led to non-medical	
>plaintiff wants more allocate	ed to non-medical	
≻plaintiff wants more allocat	ed to non-medical	
≻plaintiff wants more allocat	led to non-medical	

	٦
New York Medical Indemnity Fund	
Actuarial Studies	
Actuariai Studies	
➤supposed to be performed quarterly	
Simportant because new enrollment is suspended when Fund's liabilities	
≻important because new enrollment is suspended when Fund's liabilities equal or exceed 80% of the Fund's assets	
© Clove Wynan 33	
	٦
New York Medical Indemnity Fund	
	-
Considerations (must)	
># admitted plaintiffs	
7 # duffitted planting	
≻mortality experience of the plaintiffs	
≻amounts of benefits paid	
➤patterns of utilization	
≻inflationary patterns	
▶impact of available health insurance on benefits, investment earnings	
O Chee Wynan 34	