Aon/ASHRM Hospital and Physician Professional Liability

2021 Data Call Instructions

March 30, 2021

HPL.Benchmark@aon.com

Deadline for Participation: *May 31, 2021*

Empower Results®

Table of Contents

Welcome to the 2021 HPL Benchmark Report!

Dear Benchmarking Participant:

On behalf of our benchmarking team we would like to invite you to participate in the 2021 Aon/ASHRM Hospital and Physician Professional Liability Benchmark Study. This year's study will mark our 22nd annual publication. The ongoing objective of the 2021 Benchmark will be to provide self-insured healthcare organizations with research and data regarding the costs of retaining professional liability risk.

We are proud to note that this research initiative is unique in its audience and message - we collect information directly from healthcare organizations in an effort to report results of interest to participating organizations.

This document serves as our "Data Call" and contains the set of instructions for data submission and participation. There are two parts to the data submission process. First, all participants must complete the consent form and participant survey. Second, participants must send claim and exposure data to the benchmark team. In cases where Aon has access to this data for other purposes, participants can simply complete just the consent form and participation survey.

If you have any questions or comments relating to the survey please e-mail us at:

HPL.Benchmark@aon.com

or do not hesitate to contact one of our team members:

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Consent Form and Participant Survey

This is required for participation

- **Purpose:** To collect participant contact information, consent to terms and conditions, and to ask a brief set of risk management questions.
- Note that organizations must complete the contact information, provide consent and answer the survey questions in order to participate.
- Expected Time to Complete: 10 minutes
- The deadline for participation is May 31, 2021.
- The **Consent Form and Participant Survey** can be accessed via a **Survey Monkey link** that appears on the 2021 Benchmark Data Call webpage (link to data call). Please click "DONE" at the end of the survey to ensure that your response is received by us.

Loss Data Requirements - Recent PL/GL Loss Run

REQUIRED

- PL/GL loss run valued as of a date on or after 12/31/2020 in a Microsoft Excel compatible format.
- In the PL/GL loss run, please include:
  - 10 year history of occurrences, specifically occurrences starting 1/1/2011 through the valuation date - or as many historical occurrence years as possible.
  - Individual loss (claim level) detail
  - Financial fields, namely, Required #7-10, and Optional #19 in the table below, should be presented on a "ground up" / "unlimited" basis – including amounts falling within deductibles or retentions and/or in the excess layer of insurance coverage.
- Loss Run should not include any detail that indentifies patients – ***Please do not include claimant names within the submission.***
- The loss run should include the following data fields:

REQUIRED Data Fields		OPTIONAL / IF AVAILABLE Data Fields	
1.	**Claim Number/ID** (DO NOT SEND Claimant Name)	12.	**Department/Place of Occurrrence**
2.	**Occurrence Date**	13.	**Care Setting (New) (see pg.5)**
3.	**Report Date**	14.	**Claim Type/Litigation Type** (see pg.6)
4.	**Closed Date**	15.	**Claim Resolution/Disposition** (see pg.6)
5.	**State**	16.	**Batch Claim Indicator** (see pg.7)
6.	**Facility Name**	17.	**Accident/Claim Description**
7.	**Indemnity Paid**	18.	**Cause/Allegation** incl ***COVID -19*** (see pg.7)
8.	**Indemnity Outstanding Case Reserve**	19.	**Injury/Nature of Injury**
9.	**Expense Paid**	20.	**Initial Indemnity Reserve**
10.	**Expense Outstanding Case Reserve**	21.	**Law Firm - Plaintiff**
11.	**Coverage** (i.e. HPL/PPL/GL)	22.	**Law Firm - Defense**

Loss Data Field Descriptions

Care Setting

- Purpose of this field: To investigate indemnity and expense differentials in traditional settings vs. telehealth / telemedicine settings.
- For each record in the Loss Run, please categorize the "claim type" as of the current valuation date into one of the following:
  1. "In-Person Encounter"
  2. "Telehealth / Telemedicine Encounter"

Loss Data Field Descriptions (cont.)

Claim Type/Litigation Type

- Purpose of this field: To investigate indemnity and expense differentials among trials, suits, non-suit settlements, and expense only claims.
- For each record in the Loss Run, please categorize the "claim type" as of the current valuation date into one of the following:
  1. "Trial"
  2. "Suit – No Trial"
  3. "Non-Suit Settlement" - Indemnity settlement, but no suit filed
  4. "Other" – Was not a lawsuit, and no settlement or indemnity payment was necessary to dispose of the claim
- Lawsuits should not include Notice of Intent claims (NOI) – these should be considered non-suited claims for the benchmark submission

Claim Resolution/Disposition

- Purpose of this field: To investigate the cost differentials among the various types of claim resolutions.
- For each record in the Loss Run, please describe the "claim resolution/disposition type" as of the current valuation date.
- Some examples for this field are: dismissal, settlement, defense verdict, plaintiff verdict, etc.

Loss Data Field Descriptions (cont.)

Batch Claim Indicator

- Purpose of this field: To investigate frequency and severity of batch claim incidents.
- For each record in the Loss Run, please identify “batch claims” where an event triggered claims from more than 1 claimant.
- Label the field as “BATCH” to indicate such a claim. Leave the field blank for all other claims associated with this claim.

Cause/Allegation

- Purpose of this field: To investigate frequency and severity by the source of the claim.
- For each record in the Loss Run, please describe the “cause/allegation” as of the current valuation date.
- Some examples for this field are: ***COVID-19 (new)***, failure to diagnose/misdiagnosis, birth related error, delay in treatment, equipment related, breach of privacy/policy, etc.

Exposure Data Requirements

REQUIRED

- Historical exposure data by Calendar Year (i.e. 1/1 basis) or by Policy Year
- ***Provide same set of years as shown in loss runs***
- Provide exposure broken out by facility (if available)

For each facility and year, please provide the following:

1. **Occupied Beds by Type:**
    1. Acute Care
    2. Intensive Care
    3. Psychiatric
    4. Rehabilitation
    5. Long Term Acute Care

2. **Visits by Type:**
    1. ED Visits
    2. Births/Deliveries
    3. Inpatient Surgery
    4. Outpatient Surgery
    5. Other Outpatient Visits (ex. ED visits)

3. **Employed Physician FTEs by Specialty:**
    1. Provide by state
    2. Provide by facility (if possible)

Frequently Asked Questions

Q: Do I need to agree to the consent terms & conditions?

A: Yes, if you do not agree, we cannot include you in the study or send you a free copy.

Q: Does it cost anything to participate?

A: There is no charge for participation. Moreover**,** in return for participation, you will receive a copy of the completed benchmark report before it is launched at the ASHRM Conference in October 2021.

Q: Should I include events/possibles in my loss information?

A: Yes, we want ALL claim detail, including claims, suits, events, possibles, zero-dollar items etc.

Q: Should I include open claims in my loss information?

A: Yes, include both closed and open claims.

Q: I don't have 10 years of data…

A: Provide as many years of data as possible, we will still use smaller sets of data.

Q: What is the bare minimum that I need to send to participate?

A: 1) Recent Valued Loss Run and 2) Historical Exposure Data (you have likely compiled these items for your most recent PL insurance renewal). 3) Consent Form and Survey (the contact information and consent, at a minimum)

Q: Should I include our divested facilities?

A: This is up to you, however, if you include, please be sure to provide both loss data and corresponding exposure data for these facilities.

Q: What if I don't have some of the fields requested in the loss run?

A: Send us the fields you do have.

Contact Information

If you have any additional questions, please feel free to contact:

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HPL Benchmark Inbox
HPL.Benchmark@aon.com

Please send completed data submissions via email to:
HPL.Benchmark@aon.com *(DUE: May 31, 2021)*

No Late Submissions will be accepted.