



### Aon/ASHRM HPL Benchmarking Survey Series – 2020, Vol. 2: Consent to Participate & Questionnaire

#### Welcome

As part of the 2020 Data Call for the Aon/ASHRM Hospital and Physician Professional Liability Benchmark Study, one of the required submission items is to fill in this form which includes your consent to participate in the benchmark and answer a short survey. This exercise should only take 10 minutes and is meant to provide us your contact information for any data questions and basic risk management questions that we may have. All individual information will be kept confidential.

Please visit <u>2020 Data Submission Instructions</u> for more details on the entirety of the data call submission requirements.

We appreciate you taking the time to take this brief survey and consenting to participate in our report.

If you happened to miss Volume 1 of our survey series, you may access it here: <a href="https://www.surveymonkey.com/r/AonASHRM-HPLQuestionnaire-Vol1">https://www.surveymonkey.com/r/AonASHRM-HPLQuestionnaire-Vol1</a>

Thank you,

The Aon HPL Benchmarking Team hpl.benchmark@aon.com

#### Click "Next" to get started with the survey!

Note: Individual participation is kept confidential and statistics are presented on an aggregated, de-identified basis.





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### **CONTACT INFORMATION AND CONSENT**

* 1. Contact Information	on:	
Contact Name:		
Organization		
Name:		
E-Mail:		
* 2. Please accept t	hese Terms & Conditions of participating in our study in 2020:	
not contain personally identification be combined with data submitted Liability claim costs and experience and that Aon receives a percent Aon subsidiaries for the purposimprove and enhance actuar	response to this request, you represent that you are properly authorized to share such data with Aon and that the submitted data do fiable financial or health information, including, but not limited to, patient names. You understand and agree that the submitted data we nitted by other participants to produce aggregated, de-identified benchmark results describing Hospital and Physician Professional osures that Aon will make publicly available in the 2020 Aon/ASHRM Hospital and Physician Professional Liability Benchmark Report, the theory of the revenue generated by the sale of this report. You further acknowledge and agree that Aon may share submitted data we pose of compiling the Benchmark Report or other general internal business purposes, and that Aon may use the benchmark results to rial and brokerage work products. Aon will not disclose submitted data to third parties.  See my information and send me a free report  scept - do not use my information and do not send me a free report.	ill





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### **RISK MANAGEMENT / FINANCIAL METRICS**

3. Please indicate your Fiscal Year 2019 Gross Revenue (\$):
4. Please indicate your Current Estimated Number of Days Cash on Hand:
5. Please indicate your Total Number of Risk Management Staff (FTEs) for entire organization:
6. If possible, please provide Risk Management Staff (from above) FTEs by these categories (all that apply):
Patient Safety FTEs:
Compliance FTEs:
Quality FTEs:
Legal FTEs:
Safety & Security FTEs:

7. How many Certified Professionals in Health Care Risk Management (CPHRM) do you have on staff?	
$\bigcirc$ 0	
$\bigcirc$ 1	
O 2 - 5	
O More than 5	
8. How does your organization insure advance practice professionals (i.e. NPs, PAs, CRNPs, etc.)?	
Require separate limits	
Shared limits within hospital self-insurance program	
O Not Applicable/Unsure	





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### **CLAIMS HANDLING / DATA QUESTIONS**

9. In your loss run submission, will you be able to highlight or identify "batch claims"?
Yes: we will identify batch claims
O Yes: we can but we do not have any batch claims
O No: we cannot identify batch claims
O Not Applicable/Unsure
10. If a single occurrence were to affect multiple individuals, would your insurance attachment point (i.e., retention) apply to each individual claim or to the combined "batch" set of claims?
Ocommercial insurance would apply the retention to each individual claim with no aggregate limit
Ocommercial insurance would apply the retention to each individual claim subject to an (annual) aggregate limit
Ocommercial insurance would apply the retention to the combined set (i.e., batch) of claims
O Not Applicable/Unsure

phy	sician and advance practice (AP) professionals are named?
$\bigcirc$	One item is established on the loss run for the entire event; allocation determined after settlement/resolution
$\bigcirc$	One item is established on the loss run for the entire event; costs are not allocated
	Multiple items are established on the loss run for each named entity/physician/AP; reserves are judgmentally allocated until settlement/resolution
0	Multiple items are established on the loss run for each named entity/physician/AP; reserves are allocated by formula until settlement/resolution
$\bigcirc$	Other (please specify)
	Does your claim handling team or third-party administrator (TPA) establish dollar reserves (>\$1) for
inci	dents or events that do not become actual claims? In other words, do you establish a significant nber of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not de?
inci nur	dents or events that do not become actual claims? In other words, do you establish a significant nber of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not
inci nur	dents or events that do not become actual claims? In other words, do you establish a significant observed of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not de?  Yes, a significant number of small reserves are established for incidents but may
inci nur	idents or events that do not become actual claims? In other words, do you establish a significant onber of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not de?  Yes, a significant number of small reserves are established for incidents but may be reduced to \$0
inci nur	idents or events that do not become actual claims? In other words, do you establish a significant inber of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not de?  Yes, a significant number of small reserves are established for incidents but may be reduced to \$0  No, we only establish dollar reserves for files having a high change of payment
inci nur mad	idents or events that do not become actual claims? In other words, do you establish a significant inber of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not de?  Yes, a significant number of small reserves are established for incidents but may be reduced to \$0  No, we only establish dollar reserves for files having a high change of payment
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inci nur mad	Idents or events that do not become actual claims? In other words, do you establish a significant inber of dollar (non-zero) reserves which are reduced to zero as time passes and claims are not de?  Yes, a significant number of small reserves are established for incidents but may be reduced to \$0  No, we only establish dollar reserves for files having a high change of payment  Other (please specify)  When setting case reserve amounts for significant Professional Liability claims, do your claim usters (or TPA) tend to set reserves generally above, below, or roughly at eventual outcomes?
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	? (anonymously if needed)	
O Y	es (we will follow up with you directly)	
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