

**BULLETIN 02-011**

**October 1, 2002**

**NEVADA MEDICAL PROFESSIONAL LIABILITY**

Newly enacted legislation, Assembly Bill 1 of the 18<sup>th</sup> Special Session of the Nevada State Legislature, requires the Division of Insurance (Division) to monitor and maintain records of all:

1. Premiums charged for policies of insurance covering the liability of a practitioner licensed to practice medicine, dentistry or osteopathic medicine pursuant to chapter 630, 631 or 633 of the Nevada Revised Statutes (NRS) for a breach of his professional duty toward a patient; and
2. Jury verdicts and settlements of cases and claims relating to the liability of a practitioner licensed to practice medicine, dentistry, or osteopathic medicine pursuant to Chapter 630, 631, or 633 of NRS for a breach of his professional duty toward a patient, including, without limitation:
  - The amount of each jury verdict or settlement;
  - For each case or claim, whether any limitation on the amount of any damages applied; and
  - For each case or claim, the effect of any applicable limitation on the amount of any damages.

**NEVADA MEDICAL PROFESSIONAL LIABILITY CLOSED CLAIM REPORT**

The Division has revised the closed claim reporting form in order to collect and maintain the information required pursuant to the new legislation and NRS 690B.050. The new form is the NEVADA MEDICAL PROFESSIONAL LIABILITY CLOSED CLAIM REPORT ("Closed Claim Report"), Form Number NDOI-1102, revised October 1, 2002, and is effective for claims closed on or after October 1, 2002. All claims pertaining to the liability of a practitioner licensed to practice medicine, dentistry, or osteopathic medicine pursuant to Chapter 630, 631, or 633 must be reported to the Division of Insurance within 30 days of closure of each claim, whether or not any payment was made to the claimant. In the event that there is a change or a correction to the information reported to the Division, the insurer shall submit an updated report to the Division within 30 days of such change or correction.

## **NEVADA MEDICAL PROFESSIONAL LIABILITY QUARTERLY REPORT**

The Division has created the NEVADA MEDICAL PROFESSIONAL LIABILITY QUARTERLY REPORT ("Quarterly Report") to collect and maintain the policy information required pursuant to the new legislation and to reconcile the information reported in the Closed Claim Report. The Quarterly Report applies to claims closed on or after October 1, 2002, and policies written on or after October 1, 2002. The first report will be due January 15, 2003, for the quarter ending December 31, 2002. Subsequent reports will be due 15 days after the end of each quarter. The last report will be due October 15, 2005, for the quarter ending September 30, 2005.

### **OTHER REPORTING REQUIREMENTS**

Sections 54 and 63 of Assembly Bill 1 require insurers to report any action filed or claim submitted to arbitration or mediation for malpractice or negligence against the physician to the Board of Medical Examiners or the Board of Osteopathic Medicine, as applicable. The report must be made within 30 days after the action was filed or the claim was submitted to arbitration or mediation. Another report must be made within 30 days after the disposition of the action or claim. Failure to comply may result in administrative fines up to \$10,000 for each failure to report. There is no minimum reporting threshold for Section 54 or Section 63.

Pursuant to NRS 690B.045, insurers covering the liability of a practitioner licensed pursuant to Chapters 630 to 640, inclusive, of NRS for a breach of his professional duty toward a patient shall report to the board which licensed the practitioner. This report shall be made within 30 days of each settlement or award made or judgment rendered by reason of a claim, if the settlement, award or judgment is for more than \$5,000. The insurer must report the name and address of the claimant and the practitioner and the circumstances of the case.

For any questions concerning this report, please contact the Property and Casualty section of the Division at (775) 687-4270.

BULLETIN 98-005 is withdrawn.

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ALICE A. MOLASKY-ARMAN  
Commissioner of Insurance

