## **Board of Medicine**

## **Final Regulation**

18VAC85-20-290. Reporting of malpractice paid claims and board actions.

A. In compliance with requirements of §54.1-2910.1 of the Code of Virginia, a doctor of medicine, osteopathic medicine, or podiatry licensed by the board shall report all malpractice paid claims in the most recent 10-year period within 30 days of the initial payment. Each report of a settlement or judgment shall indicate:

- 1. The year the claim was paid.
- 2. The specialty in which the doctor was practicing at the time the incident occurred that resulted in the paid claim.
- 3. The total amount of the paid claim in United States dollars.
- 4. The city, state, and country in which the paid claim occurred.
- B. The board shall not release individually identifiable numeric values of reported paid claims but shall use the information provided to determine the relative frequency of paid claims described in terms of the number of doctors in each specialty and the percentage who have made malpractice payments with malpractice paid claims within the most recent 10-year period. The statistical methodology used will include any specialty with more than 10 paid claims. For each specialty with more than 10 paid claims, the top 16% of the paid claims will be displayed as above average payments, the next 68% of the paid claims will be displayed as average payments, and the last 16% of the paid claims will be displayed as below average payments.

C. For purposes of reporting required under this section, a malpractice paid claim shall mean a

payment for the benefit of a doctor of medicine, osteopathic medicine, or podiatry in satisfaction

in whole or in part of a settlement or a judgment in response to a written demand for monetary

payment for damages based on the provision of health care or professional services rendered, or

which should have been rendered. A malpractice paid claim shall include:

1. A lump sum payment or the first payment of multiple payments;

2. A payment made from personal funds;

3. A payment on behalf of a doctor of medicine, osteopathic medicine, or podiatry by a

corporation or entity comprised solely of that doctor of medicine, osteopathic medicine, or

podiatry; or

4. A payment on behalf of a doctor of medicine, osteopathic medicine or podiatry named in the

claim where that doctor is dismissed as a condition of, or in consideration of the settlement,

judgment or release. If [the a] doctor is dismissed independently of the settlement, judgment or

release, then the payment is not reportable.

Certification

I certify that this regulation is full, true, and correctly dated.

William L. Harp, M.D. Executive Director

Virginia Board of Medicine

Date: