

**§2601. Report of claim**

Every insurer providing professional liability insurance in this State to a person licensed by the Board of Licensure in Medicine or the Board of Osteopathic Licensure or to any health care provider shall make a periodic report of claims made under the insurance to the department or board that regulates the insured. For purposes of this section, a claim is made whenever the insurer receives information from an insured, a patient of an insured or an attorney that an insured's liability for malpractice is asserted. The report must include: [PL 1997, c. 126, §1 (AMD).]

**1. Date and place.** The date and place of the occurrence for which each claim was made; [PL 1977, c. 492, §3 (NEW).]

**2. Name of insured; classification of risk.** The name of the insured or insureds and the classification of risk; [PL 1977, c. 492, §3 (NEW).]

**3. Incident or occurrence for claim.** The incident or occurrence for which each claim was made; [PL 1977, c. 492, §3 (NEW).]

**4. Amount.** The amount claimed; [PL 1977, c. 492, §3 (NEW).]

**5. Arbitration agreement.** [PL 1997, c. 592, §8 (RP).]

**6. Filing of suit or arbitration.** [PL 1997, c. 592, §8 (RP).]

**7. Other information.** Such other information as may be required pursuant to section 2603. [PL 1977, c. 492, §3 (NEW).]

The failure of any insurer providing professional liability insurance in this State to a person licensed by the Board of Licensure in Medicine or the Board of Osteopathic Licensure or any health care provider to report as required is a civil violation for which a fine of not more than \$1,000 may be adjudged. [PL 1993, c. 600, Pt. B, §§21, 22 (AMD).]

**SECTION HISTORY**

PL 1977, c. 492, §3 (NEW). PL 1985, c. 804, §§8,22 (AMD). PL 1991, c. 534, §3 (AMD). PL 1993, c. 600, §§B21,22 (AMD). PL 1997, c. 126, §1 (AMD). PL 1997, c. 592, §8 (AMD).

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