AS OF 9/30/2020

Report Generator: Erica Andrew



**Policy Numbers: ES1942** 

Includes: Claim, First Notice, Incident, Legal Defense, Med-Pay, Pre-Suit, Suit

Claim Status: OPEN, CLOSED, REOPEN

ISSUE COMPANY	CLAIM NUMBER	REPORT DATE	LOSS DATE	CLOSED DATE	INSURED NAME	PATIENT NAME	CURRENT FILE TYPE	CURRENT STATUS	
ES1942		Goldfish I	Policy Terms: 11/5/2017 - 11/5/2020						
Policy Start Date: 11	/5/2017								
ProAssurance Specialty Insurance Company, Inc.	224848	11/17/2017	07/27/2016		Muhammad Aly, M.D.	Bankovich, Albert J.	SUIT	OPEN	
Estate of 69-Ye	OM alleges fa	ilure to timely eva	luate cardiac	ssues in the ED	, resulting in the patient's dear	th.			
Claims Branch Office: E	BHAM	Claims Specialis	t: Robinson, N	/lindi	Disposition:	Disposition Date:			
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID	\$100,001 \$0 \$100,000.00 \$46,588.22		
ProAssurance Specialty Insurance Company, Inc.	227321	03/01/2018	10/07/2017	01/06/2020	Goldfish Locums, LLC	Kinsey, Karen	CLAIM	CLOSED	
_YOF seen by suffering.	insured for ge	enerally not feeling	g well, and pre	srcibed Tylenol	. Patient was diagnosed with s	epsis in ER next day. Patient is nov	requesting \$100,000 fo	r pain and	
Claims Branch Office: T	'AMPA	Claims Specialis	t: Grandon, Sl	nelley L.	Disposition: Dropped/	Dismissed Disposition	on Date: 1/3/2020	1/3/2020	
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID	\$0 \$0 \$0.00 \$0		
ProAssurance Specialty Insurance Company, Inc.	225701	01/05/2018	12/22/2015	08/29/2018	Scott Richards, M.D.	Hill, Daniel	SUIT	CLOSED	

Now 34 YOM, involuntarily admitted for psychiatric evaluation, alleges physical abuse by employees & staff resulting in torn left ACL.

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Claim Status: OPEN, CLOSED, REOPEN

ISSUE COMPANY	CLAIM NUMBER	REPORT DATE	LOSS DATE	CLOSED DATE	INSURED NAME	PATIENT NAME	CURRENT FILE TYPE	CURRENT STATUS		
Claims Branch Office: I	LASVEGAS	Claims Spec	ialist: Kiddoo,	Rochelle	Disposition: Dropped/	Dismissed Disposit	Dismissed Disposition Date: 8/28/2018			
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID				
ProAssurance Specialty Insurance Company, Inc.	226374	02/06/2018	12/27/2016		Galina B. Simkin, M.D.	McCaughey, Ann	SUIT	OPEN		
Estate of 67 YOF alleges failure to timely assess & dx spinal cord stenosis/ compression, resulting in delayed treatment, neuro. damage & death.										
Claims Branch Office: I	LISLE	Claims Specialist	: Siebeck, Lesl	ie L.	Disposition:	Disposition Date:				
					LOSS INCURRED \$1,000,000  LOSS PAID \$0  ALAE INCURRED \$150,000.00  ALAE PAID \$85,887.82					
Policy Start Date: 11  ProAssurance Specialty										
Insurance Company, Inc.	243465	10/28/2019	10/30/2017		Vivek Bhatt, M.D.	Bredehoeft, Pamela	SUIT	OPEN		
YOF alleges	s insured faile	d to diagnose and t	reat TTP in a ti	imely manner	resulting in left side paralysis.					
Claims Branch Office: M	MADISON	Claims Spec	ialist: Likens,	Karen	Disposition:	Disposition Date:				
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID	\$250,000 \$0 \$150,000.00 \$15,404.76			
ProAssurance Specialty Insurance Company, Inc.	236344	02/20/2019	12/24/2018	09/26/2019	Nathaniel Duke, M.D.	Frappy, Shirley	FIRST NOTICE	CLOSED		

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AS OF 9/30/2020



Policy Numbers: ES1942

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Includes: Claim, First Notice, Incident, Legal Defense, Med-Pay, Pre-Suit, Suit

Claim Status: OPEN, CLOSED, REOPEN

ISSUE COMPANY	CLAIM NUMBER	REPORT DATE	LOSS DATE	CLOSED DATE	INSURED NAME	PATIENT NAME	CURRENT FILE TYPE	CURRENT STATUS
61 YOF admireview.	itted with ESRI	O requiring daily o	dialysis. Patier	at complained of	left lower extremity pain. Pati	ent was provided care and expired	on 12/28/18. Case subm	nitted for peer
laims Branch Office:	TAMPA	Claims Specialis	t: Grandon, S	helley L.	Disposition: All Other	Disposition Date: 9		
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID	\$0 \$0 \$0.00 \$0	
roAssurance Specialty nsurance Company, Inc.	234337	12/03/2018	12/10/2015	02/18/2020	Bruce G Tatro, M.D.	Cumbra, Scott	SUIT	CLOSED
Then 53YOM	I alleges failure	to prescribe nece	essary antibioti	cs for pneumoni	a following his hospitalization	resulting in severe pulmonary infe	ction & other life-threa	tening injuries
Claims Branch Office:	LASVEGAS	Claims Spec	cialist: Palicha	at, Nicole M.	Disposition: Dropped/I	Dismissed Disposition		
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID	\$0 \$0 \$44,188.98 \$44,188.98	
roAssurance Specialty nsurance Company, Inc.	237698	04/02/2019	01/19/2017		Roland A. Torres, M.D.	Sargent, Terry	SUIT	OPEN
YOM alleg disabled.	ges a C/2-C/4 po	osterior decompre	ssion and fusio	on was performe	d instead of a C1 laminectomy	, which resulted in a revision decon	npression procedure and	l being declar
Claims Branch Office:	MADISON	Claims Spec	cialist: Likens	, Karen	Disposition:	Disposition Date:		
						LOSS INCURRED LOSS PAID ALAE INCURRED ALAE PAID	\$650,000 \$0 \$250,000.00 \$70,381.23	

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Claim Status: OPEN, CLOSED, REOPEN

ISSUE COMPANY			CLOSED DATE	INSURED NAME	PATIENT NAME	CURRENT FILE TYPE	CURRENT STATUS		
Policy Start Date:	11/5/2019							•	
ProAssurance Specialty Insurance Company, Inc.	251063	08/19/2020	01/20/2018		Nathaniel Duke, M.D.	Infinger, Judy	PRE-SUIT	OPEN	
58 YOF alleges failure to properly treat acute gastroenteritis w/intractable nausea/vomiting, & hyponatremia, resulting in development of osmotic demyelinating syndrome.									
Claims Branch Office	e: TAMPA	Claims Specialis	t: Grandon, Shelle	ey L.	Disposition:	Disposition Date:			
						LOSS INCURRE LOSS PAI		\$3,001 \$0	
						ALAE INCURI		000.00	
						ALAE P	AID	\$0	
		POLICY LOSS IN	ICURRED - \$2,003,	,002.00	POLICY LOSS PAID - \$0.00	POLICY ALAE INCURRED - \$71	7,345.04 <b>POLI</b>	<b>CY ALAE PAID -</b> \$280,607.07	
								Total File Count: 9	
		REPORT LOSS IN	ICURRED - \$2,003,	,002.00	REPORT LOSS PAID - \$0.00	REPORT ALAE INCURRED - \$71	7,345.04 <b>REPO</b>	RT ALAE PAID - \$280,607.07	

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Insured Name: Goldfish Locums, LLC Report Date: September 03, 2020

	Report Date	Loss Date	Involved Insured	Claimant	Category	Loss Type	Status	Indemnity Reserve	Indemnity Paid	Expense Reserve	Expense Paid	Total Incurred
Policy Number: GH- LOC-001- 161105 Effective Dates: 11/05/2016 - 11/05/2017	07/19/2017	08/28/2016	Dr. Dimpka	COHEN, ADAM	Coverage Inquiry	Death	CLOSED	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	02/07/2017	10/24/2013	Farnel Backer , M.D.	KILLION, KIMBERLY	Suit	Stroke	CLOSED	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Policy Number: GH- LOC-001- 151105 Effective Dates: 11/05/2015 - 11/05/2016	09/20/2016	12/27/2014	Dr. Dave Shea	HAYES, RONALD (Admin of Estate of Gail Hayes)	Notice of Intent; Suit	Death	Open	\$100,000.00	\$0.00	\$65,000.00	\$10,000.00	\$175,000.00
	10/20/2016	02/09/2015	Thomas Blume, MD	ANDERSON, MIA	SUIT	Alleged birth complication resulting in infant death.	Open	\$100,000.00	\$0.00	\$41,581.87	\$33,418.13	\$175,000.00
Policy Number: GH- LOC-001- 141105 Effective Dates: 11/05/2014 - 11/05/2015	01/19/2015	04/17/2013	Thomas Blume, MD	HOSTETTER, Estate of Theodore (by Katherine Duffy)	SUIT	Failure to Diagnose	CLOSED	\$0.00	\$400,000.00	\$0.00	\$177,630.97	\$577,630.97
					Policy GH	Policy GH-LOC-001-161105 Total			\$0.00	\$0.00	\$0.00	\$0.00
					Goldfi	sh Locums, LLC	Total	\$200,000.00	\$400,000.00	\$106,581.87	\$221,049.10	\$927,630.97

Completed by: Greenhill User

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