



DEPARTMENT OF FINANCIAL SERVICES

Office of Insurance Regulation – Bureau of Life and Health Insurer Solvency

ANNUAL REPORT

MANAGED

CARE

COMPANY: _____

YEAR ENDING: _____

The number and amount of damage claims for medical injury initiated against the health entity and any providers engaged by it during the reporting year.

[HMOs-641.26(1)(e), F.S.; PHCs-641.41(1)(e); PLHSOs 636.043(2)(d)]

Number of Claims _____

Total Dollar Value of Claims _____

Number of Claims Without Legal Process _____

Number of Claims Disposed (Settled, or Otherwise Discharged) _____