

2024 medical malpractice statistical summary

Data submitted by insurers and self-insurers
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Introduction

In 2006, the Washington state Legislature enacted comprehensive health care liability reform that requires all insuring entities¹ and self-insurers² to report medical malpractice closed claim data to the Office of the Insurance Commissioner (OIC).³ The OIC, in turn, must post summary statistics about medical malpractice closed claims on its website.⁴

This statistical summary includes data for claims closed with an indemnity payment to a claimant and/or defense and cost containment expenses incurred by an insuring entity or self-insurer.⁵ Each closed claim is associated with one defendant.

This summary report includes data for medical malpractice claims closed in calendar years 2020 through 2024.⁶ There are three types of data summarized in this report:

1. **Defense costs:** These are expenses paid by the insuring entity or self-insurer to defend an insured and are also called defense and cost containment expenses. These are expenses allocated to a specific claim, such as court costs and fees paid to defense attorneys or expert witnesses. They do not include internal costs to settle claims, such as salaries for claims staff or operating overhead for a claims department.⁷
2. **Economic damages:** The vast majority of these amounts are an estimate of the claimant's economic damages⁸ by the insuring entity or self-insurer when a claimant receives an indemnity payment. In a few cases, a court specifies economic damages when issuing a verdict, and these economic damages are included in the totals.
3. **Paid indemnity:** These are amounts paid by an insuring entity or self-insurer to the claimant to resolve the claim.

¹ Insuring entities are defined in [RCW 48.140.010](#)(8) and include insurance companies, joint underwriting associations, and risk retention groups.

² Self-insurer is defined in [RCW 48.140.010](#)(11).

³ [House Bill 2292 – 2005-06 session](#) and [RCW 48.140.020](#).

⁴ [RCW 48.140.040](#)(2). On Feb. 5, 2025, Insurance Commissioner Patty Kuderer notified the Legislature that the OIC would post statistical summaries by July 1.

⁵ See [WAC 284-24D-060](#).

⁶ Data submitted on or before March 30, 2025, and audited through June 6, 2025.

⁷ See [WAC 284-24D-020](#)(1), [WAC 284-24D-330](#) and [WAC 284-24D-340](#).

⁸ See [RCW 48.140.010](#)(5), [WAC 284-24D-350](#), [WAC 284-24D-360](#), [WAC 284-24D-362](#), [WAC 284-24D-364](#) and [WAC 284-24D-370](#).

The OIC has also provided a summary of “incident-level”⁹ data. One medical incident may result in more than one claim, so incident-level data is the sum of two or more claims. Available incident-level data is incomplete for several reasons.

For example:

- Claims related to one incident may close over a period of years. An insuring entity or self-insurer may close some claims quickly and report them to the OIC, while other claims related to an incident may remain open and unresolved. When multiple claims are connected to a single incident, smaller claims tend to close more quickly than larger claims.
- Defendants may not be part of the same organization or be insured by the same company. In this situation, unrelated insuring entities or self-insurers do not have the means to link the claims together.

Despite the limitations, there is enough data available to show that incidents of medical malpractice involving more than one defendant are more costly to resolve than individual claims data suggests.

In addition to the closed claim data submitted by insurers and self-insurers, which is summarized in this report, the OIC also receives medical malpractice settlement data from attorneys that is summarized in a separate report. For several reasons, data in this statistical summary cannot be compared to data submitted by attorneys.

- First, insuring entities and self-insurers report all claims closed with a payment to a claimant or instances in which they have expenses to defend a claim. In comparison, attorneys report settlements only if they file a lawsuit against one or more defendants.
- Second, insuring entities and self-insurers report data separately for each defendant, as each claim is resolved. Attorneys submit one settlement report that includes payments made by all defendants whom the attorney sued. An attorney must wait until all claims are resolved. Consequently, the timing of their reports will be different from insurers and self-insurers.
- Finally, since attorneys report all payments made by all defendants, the average settlement will be higher than the average closed claim reported by insuring entities and self-insurers.

⁹ [RCW 48.140.030](#)(1) says insuring entities and self-insurers must provide an incident identifier for “companion claims,” which are defined as “separate claims involving the same incident of medical malpractice made against other providers or facilities.”

Key 2024 closed claim statistics

Claim counts

- As compared to 2023, the total number of closed claims increased by 8.7% to 624.
- The number of claims with indemnity payments increased by 5.3% to 297.
- The number of claims with defense costs increased by 9.4% to 584.

Indemnity payments

- The average indemnity payment continued to increase in 2024, reaching a new high of \$952,982. This represents a 5.7% increase from the previous year.
- The total paid indemnity increased by 11.3% to \$283 million.

Defense costs

- Following a significant decrease in 2023, the average defense cost increased by 6.8% to \$96,127.
- Total defense costs increased by 16.8% to \$56.1 million.

Overall reported cost

- As compared to 2023, the total sum of indemnity payments and defense costs increased by 12.2% to \$339.1 million.
- The average sum of indemnity payments and defense costs increased by 3.2% to \$543,548 per closed claim.

Calendar year comparison¹⁰

	Summary by year closed				
	2020	2021	2022	2023	
Claims closed	603	558	637	574	624
Number of indemnity payments	263	278	309	282	297
Total economic damages	\$98,547,791	\$60,457,224	\$155,870,575	\$144,158,828	\$144,331,285
Average economic damages	\$374,706	\$217,472	\$504,436	\$511,202	\$485,964
Claims with defense costs	557	495	586	534	584
Average defense cost	\$98,605	\$68,755	\$113,672	\$89,979	\$96,127
Overall reported cost	\$211,438,605	\$186,424,926	\$330,840,927	\$302,411,019	\$339,173,661
Average cost per closed claim	\$350,644	\$334,095	\$519,374	\$526,848	\$543,548

Claim counts

For calendar year 2024, insuring entities and self-insurers submitted 624 medical malpractice¹¹ closed claim reports to the OIC. Over the previous four years, the average closed claim count was 593.

Overall reported cost

For calendar year 2024, the average sum of indemnity payments and defense costs increased to \$543,548 per closed claim. Over the previous four years, the average was \$434,703 per closed claim.

¹⁰ [RCW 48.140.040](#) requires the commissioner to provide a calendar year summary of data.

¹¹ See [RCW 48.140.010](#)(9).

Defense costs

Defense costs by year closed					
	2020	2021	2022	2023	
Claims closed	603	558	637	574	624
Claims with defense counsel	472	437	528	510	547
Average paid to defense counsel	\$82,092	\$59,526	\$101,201	\$77,778	\$81,109
Claims with expert witnesses hired	310	272	319	260	258
Average paid to experts witnesses	\$15,020	\$17,874	\$26,610	\$20,123	\$23,612
Claims with other defense costs	341	266	278	229	249
Average paid for other defense	\$33,780	\$11,875	\$16,867	\$13,754	\$22,810
Claims with defense costs (all types)	557	495	586	534	584
Total paid defense cost (all types)	\$54,922,741	\$34,033,583	\$66,612,052	\$48,048,646	\$56,138,119
Average paid defense cost (all types)	\$98,605	\$68,755	\$113,672	\$89,979	\$96,127

In 2024, insuring entities and self-insurers paid \$56.1 million to defend 584 claims. As compared to 2023, the average defense cost increased by 6.8% to \$96,127 per claim defended. Insuring entities and self-insurers reported defense and cost containment expenses for 93.6% of all claims closed in 2024, as compared to 91.6% for all claims closed over the previous four years.

Insuring entities and self-insurers report three categories of defense costs for each closed claim. As compared to 2023, the average defense cost increased in 2024 for all three categories. The average amount paid:

- To defense counsel increased by 4.3% to \$81,109.
- To expert witnesses increased by 17.3% to \$23,612.
- For other defense costs increased by 65.8% to \$22,810.

Million-dollar claims

Claims closed for \$1 million or more					
Item	2020	2021	2022	2023	2024
Number of indemnity payments	46	44	77	65	69
Total paid indemnity	\$118,999,537	\$103,869,568	\$215,061,543	\$200,642,454	\$220,507,278
Average indemnity payment	\$2,586,946	\$2,360,672	\$2,793,007	\$3,086,807	\$3,195,758

Claims closed for less than \$1 million					
Item	2020	2021	2022	2023	2024
Number of indemnity payments	217	234	232	217	228
Total paid indemnity	\$37,516,327	\$48,521,775	\$49,167,332	\$53,719,919	\$62,528,264
Average indemnity payment	\$172,886	\$207,358	\$211,928	\$247,557	\$274,247

Insuring entities and self-insurers closed 297 claims in 2024 with an indemnity payment to the claimant. Of those claims, 69 closed with paid indemnity of \$1 million or more, while the remaining 228 claims closed with paid indemnity of less than \$1 million.

As compared to 2023, for claims closed with paid indemnity of \$1 million or more, the average payment increased by 3.5% to \$3.2 million. For claims closed with paid indemnity of less than \$1 million, the average payment increased by 10.8% to \$274,247.

Comparison of individual claim data and incident-level data

One medical incident¹² can result in multiple claims against different medical providers or facilities. If this is the case, the insuring entity or self-insurer links these claims together so the OIC can total the costs to settle all claims related to the medical incident. This table shows how individual claim data compares to “incident-level” data for incidents involving more than one medical provider or facility over the 17-year period ending Dec. 31, 2024.

Comparing individual claim data to incident-level data		
Category	Individual claim data	Incident-level data
Number of claims/incidents	14,492	1,707
Number with indemnity payments	6,843	918
Total paid indemnity	\$2,697,263,944	\$735,489,757
Total economic damages	\$1,582,072,951	\$430,066,250
Average indemnity payment	\$394,164	\$801,187
Median indemnity payment	\$75,000	\$368,750
Average economic damages	\$231,196	\$468,482
Number with defense costs	12,616	1,686
Total defense costs	\$802,730,447	\$269,361,105
Average defense cost	\$63,628	\$159,763

For claims against more than one medical provider or facility, compensation to the claimant is much higher. Average paid indemnity at the incident level is 103.3% higher than average paid indemnity per claim, and the median indemnity payment is almost five times as high.

Since there can be a significant period of time between when the first claim related to an incident is closed and when the last claim related to that incident is closed, incident-level data will always be incomplete. For example, based on the reported number of defendants for the 1,707 incidents, 15% of the individual claims related to these incidents have not yet been reported. Since incident-level data is incomplete, the true average indemnity payments and defense costs at the incident level are likely to be higher than the averages from reports received by the OIC.

¹² See [RCW 48.140.030](#)(1)(b).

Claim data by type of settlement

Results for calendar years 2020-2024 by settlement method					
Settlement method	Reported claims	Paid claims	Average paid indemnity	Claims with defense costs	Average defense cost
Settled by parties	1,077	919	\$668,544	878	\$121,445
Abandoned by claimant	887	47	\$48,719	856	\$28,129
Court disposed claim	548	22	\$1,175,966	545	\$103,915
Settled by ADR	484	441	\$1,061,182	477	\$151,811
Total	2,996	1,429	\$777,141	2,756	\$95,188

For claims closed from 2020 to 2024, the parties negotiated a settlement for 64.3% of claims that resulted in an indemnity payment, and these settlements comprised 55.3% of total payments. Average paid indemnity for these types of settlements was \$668,544.

Claimants agreed to use alternative dispute resolution (“ADR”), including arbitration, mediation, or private trials, to resolve 30.9% of claims with paid indemnity, and these settlements comprised 42.1% of the total paid indemnity.

Claims disposed by courts had the highest average paid indemnity (\$1.2 million), while claims settled by ADR had the highest average defense cost (\$151,811).

Calendar-incident year comparisons

Insurers report several dates associated with each claim. The tables below show data sorted by the year the claim was closed and the year of the incident that led to the medical malpractice claim. These tables¹³ show that the longer a claim remains open, the more expensive it is to defend and settle.

Year closed	Closed claim count										
	Incident year										
	Prior	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
2020	91	93	127	111	93	76	12				
2021	94		90	127	79	79	72	17			
2022	147			82	125	121	75	73	14		
2023	111				119	136	67	81	47	13	
2024	118					100	145	115	86	47	13

Year closed	Average paid indemnity (in thousands)										
	Incident year										
	Prior	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
2020	\$1,127	\$1,006	\$453	\$612	\$354	\$236	\$37				
2021	\$659		\$416	\$758	\$427	\$865	\$293	\$8			
2022	\$1,637			\$1,299	\$961	\$400	\$772	\$201	\$8		
2023	\$1,396				\$1,063	\$1,044	\$891	\$540	\$273	\$40	
2024	\$692					\$1,475	\$1,391	\$1,134	\$621	\$144	\$12

Year closed	Average defense cost (in thousands)										
	Incident year										
	Prior	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
2020	\$159	\$90	\$43	\$235	\$31	\$7	\$1				
2021	\$130		\$76	\$65	\$48	\$40	\$20	\$3			
2022	\$247			\$157	\$77	\$58	\$28	\$12	\$3		
2023	\$181				\$111	\$64	\$53	\$36	\$21	\$9	
2024	\$190					\$114	\$83	\$63	\$50	\$9	\$2

¹³ [RCW 48.140.040](#) requires the OIC to summarize calendar-incident year data. The amount of data the OIC can display in these tables is limited by confidentiality laws.