

**THE INSURANCE CODE OF 1956 (EXCERPT)**  
**Act 218 of 1956**

\*\*\*\*\* 500.2477 THIS SECTION IS REPEALED BY ACT 102 OF 2016 EFFECTIVE AUGUST 1, 2016 \*\*\*\*\*

**500.2477 Submission of data and information by insurer providing professional liability insurance; retention of data and information as confidential records; release of records; liability.**

Sec. 2477. (1) Every insurer providing professional liability insurance to a person licensed by the Michigan board of medicine, the Michigan board of osteopathic medicine and surgery, the Michigan board of podiatric medicine and surgery, the Michigan board of dentistry, the Michigan board of optometry, the Michigan board of chiropractic, and the hospitals licensed by the department of public health in this state shall submit the data prescribed in this section at the times prescribed to the state insurance commissioner. All data shall be provided with respect to any complaint filed against the insured in any court, if the complaint seeks damages for personal injury claimed to have been caused by the negligence of the insured relating to the insured's professional services, or the performance of professional services by the insured without consent or informed consent, or a breach of warranty or contract for a medical result relating to the insured's professional services.

(2) The following data and information shall be furnished to the commissioner within 30 days of the filing of an answer on behalf of the insured:

- (a) The name and license number of the insured.
- (b) The date of the injury.
- (c) The date of the filing of the complaint.
- (d) The nature of the complaint.
- (e) Any other information the commissioner may require.

(3) The following data and information shall be furnished to the commissioner, the appropriate licensing board in the department of commerce, and, if the insured or person is a hospital, to the state department of public health within 30 days from any judgment, settlement, or other dismissal involving the insured:

- (a) The date of any judgment, settlement, or other dismissal.
- (b) The amount of any judgment against the insured.
- (c) The amount of any settlement paid on behalf of the insured, whether the settlement was negotiated by suit or without the filing of a complaint for damages.
- (d) Of the amounts provided in subdivisions (b) and (c), the amount attributable to economic damages and the amount attributable to noneconomic damages.
- (e) Any other information the commissioner may require.

(4) The insurance commissioner, the licensing board, and the department of public health shall retain the information obtained under this section and maintain the files in the form and for a period as he or she shall determine necessary in his or her sole discretion. The commissioner, the licensing board, and the department of public health shall maintain the data and information filed in accordance with this section as confidential records and shall not release the data and information except for bona fide research, educational, licensing, actuarial, department of social services subrogation, or legislative purposes; however, the name of the insurer shall be omitted. The commissioner, the chairperson of the licensing board, and the director of public health in his or her sole discretion shall determine the validity of any request for the information.

(5) There is no liability on the part of and a cause of action of any nature shall not arise against an insurer reporting under this section or its agents or employees, or the commissioner or his or her representatives, for any action taken by them pursuant to this section.

**History:** Add. 1975, Act 44, Imd. Eff. May 12, 1975;—Am. 1986, Act 173, Imd. Eff. July 7, 1986;—Am. 1994, Act 438, Eff. Mar. 30, 1995.

**Popular name:** Act 218