
A BILL FOR AN ACT

RELATING TO INSURANCE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The Hawaii Revised Statutes is amended by
2 adding a new chapter to be appropriately designated and to read
3 as follows:

4 **"CHAPTER**

5 **HAWAII MEDICAL MALPRACTICE INSURANCE RELIEF FUND**

6 § -1 **Definitions.** As used in this chapter:

7 "Board" means the board of directors of the Hawaii medical
8 malpractice insurance relief fund.

9 "Commissioner" means the insurance commissioner as defined
10 in section 431:2-102.

11 "Covered event" means a claim for a medical tort as defined
12 under section 671-1.

13 "Deductible" means the amount of loss assumed by the
14 policyholder that is not included in the coverages provided by
15 the fund.

16 "Department" means the department of commerce and consumer
17 affairs.



1 "Fund" means the Hawaii medical malpractice insurance
2 relief fund established by this chapter.

3 "Physician" means an individual licensed to practice
4 medicine or surgery pursuant to chapter 453 or 460 except for an
5 individual who is employed by a hospital as defined under
6 section 321-33 or a professional corporation as defined under
7 section 415A-2.

8 "Plan of operations" means the plan for providing medical
9 malpractice insurance as adopted by the board pursuant to
10 section -8, including any amendments thereto.

11 § -2 **Hawaii medical malpractice insurance relief fund;**
12 **establishment.** There shall be a Hawaii medical malpractice
13 insurance relief fund to be placed within the department of
14 commerce and consumer affairs for administrative purposes. The
15 fund shall be a public body and a body corporate and politic.
16 The fund shall offer policies of medical malpractice insurance
17 for sale to physicians pursuant to this chapter.

18 § -3 **Board of directors.** (a) The board of directors of
19 the fund shall consist of:

- 20 (1) The commissioner as an ex officio voting member; and
21 (2) Six members appointed by the governor pursuant to
22 section 26-34; provided that:



1 (A) Two of the members shall be appointed from a list
2 of nominations submitted by the president of the
3 senate; and

4 (B) Two of the members shall be appointed from a list
5 of nominations submitted by the speaker of the
6 house of representatives.

7 (b) The governor shall select a chairperson and
8 vice-chairperson from among the members.

9 (c) The board shall:

10 (1) Be the policy making body of the fund;

11 (2) Establish policies for the administration and
12 operation of the fund;

13 (3) Meet as often as necessary to formulate and implement
14 strategies and plans of operation in furtherance of
15 this chapter. Upon its appointment, the board shall
16 adopt an interim plan of operation within ninety days;
17 and

18 (4) Receive no compensation for services, but shall be
19 entitled to reimbursement of necessary expenses
20 incurred in the performance of duties.

21 (d) The board may:



- 1 (1) Appoint, not subject to chapter 76, an executive
2 director of the fund whose salary shall be set by the
3 board;
- 4 (2) Employ, not subject to chapter 76, technical experts
5 and officers, agents, and employees, permanent or
6 temporary, as required; and
- 7 (3) Contract with persons, not subject to chapter 76 or
8 78, when the board determines that the services are
9 essential to the execution of the functions of the
10 fund.

11 § -4 **Powers, duties, functions.** (a) The fund shall
12 have the general power to:

- 13 (1) Sue and be sued;
- 14 (2) Make and alter policies for its organization and
15 internal administration;
- 16 (3) Adopt rules in accordance with chapter 91 to
17 effectuate the purposes of this chapter;
- 18 (4) Borrow moneys, including moneys from state or federal
19 sources, and issue notes or other obligations of the
20 fund for any of its purposes as authorized by the
21 legislature from time to time;



1 (5) Pledge, assign, or grant a security interest in all or
2 any part of the moneys, rents, charges, assessments,
3 or other revenue, and proceeds thereof derived by the
4 fund; provided that any pledge, assignment, or grant
5 of security interest shall constitute a lien and
6 security interest on the moneys, rents, charges,
7 assessments, or other revenue, and proceeds thereof to
8 the extent and with the priority set forth in the
9 document establishing the pledge, assignment, or
10 security interest, without the necessity for physical
11 delivery, recording, or further act; and provided
12 further that in effectuating any pledge, assignment,
13 or grant of security interest, the fund may do either
14 or both of the following:

- 15 (A) Transfer possession of collateral to its secured
- 16 parties; or
- 17 (B) Execute and cause to be filed at the bureau of
- 18 conveyances, Uniform Commercial Code financing
- 19 statements for the purpose of providing notice to
- 20 third parties of a pledge, assignment, or grant
- 21 of security interest; provided that any failure
- 22 to file a financing statement or the filing of a



1 financing statement that contains incomplete or
2 inaccurate information shall not affect the
3 perfected lien and security interest of the
4 pledge, assignment, or grant of security
5 interest; and

6 (6) Enter into contracts as necessary to effectuate the
7 purposes of this chapter.

8 (b) The fund shall have the specific power to:

9 (1) Adopt and administer a plan of operation pursuant to
10 section -8, and a manual of rules and rates
11 thereunder;

12 (2) Authorize the provision of medical malpractice
13 coverage by the fund and establish limits of liability
14 for specific coverages within the range of authorized
15 coverage;

16 (3) Adopt actuarially sound rates based on reasonable
17 assumptions relative to expectations of medical
18 malpractice frequency and severity for all coverage
19 provided under policies or endorsements issued by the
20 fund. Rates adopted shall be subject to approval by
21 the commissioner pursuant to article 14 of chapter
22 431. Rates adopted shall provide for classification



1 of risks and shall include past and prospective losses
2 and expense experience in this State;

3 (4) Adopt any form of medical malpractice insurance policy
4 necessary for providing policies of medical
5 malpractice insurance by the fund, with the approval
6 of the commissioner;

7 (5) Issue policies of medical malpractice insurance and
8 pay claims for coverage over the mandatory deductible
9 or other deductible provided in the plan of operation
10 or any manual of rules and rates adopted under the
11 plan of operation;

12 (6) Require every insurer authorized to write and engage
13 in writing casualty insurance in this State on a
14 direct basis to act as a servicing facility, and by
15 contract with the insurer authorize the insurer to
16 service policies and policyholders of medical
17 malpractice insurance, provide claim services, and
18 perform any other duties as authorized by the fund for
19 applicants to the fund and those insured by it;

20 (7) Assess all insurers authorized to write and engage in
21 writing casualty insurance in this State on a direct
22 basis the amounts that together with the other assets



- 1 of the fund are sufficient to meet all necessary
2 obligations of the fund;
- 3 (8) Develop procedures regarding policies written by
4 unauthorized insurers comparable to the assessments,
5 surcharges, and other contributions made by insurers
6 authorized to do business in this State;
- 7 (9) Accumulate reserves or funds, including the investment
8 income thereon, to be used for paying expenses, making
9 or repaying loans or other obligations of the fund,
10 providing loss mitigation incentives, and paying valid
11 claims for covered events insured by the fund;
- 12 (10) Collect and maintain statistical and other data as may
13 be required by the commissioner;
- 14 (11) Impose fines for each incident of nonpayment of
15 amounts due to the fund under this chapter; provided
16 that the fines shall not exceed twenty-five per cent
17 of the amount then due;
- 18 (12) Create loss mitigation incentives, which may include
19 premium credits, premium rebates, loans, or cash
20 payments;
- 21 (13) Enter into claims financing transactions, including
22 reinsurance transactions, debt transactions, and other



1 transactions incorporating elements of reinsurance,
2 insurance, debt, or equity;

3 (14) Establish business and corporate entities or
4 organizations for the purposes of this chapter; and

5 (15) Perform any and all acts reasonably necessary to carry
6 out the purposes of this chapter.

7 § -5 Assessments. (a) Any assessment made pursuant to
8 section -4(b)(7) shall be made on the insurer's gross direct
9 written premiums for casualty insurance in this State for the
10 preceding calendar year. The rate of assessment in a year in
11 that a covered event has not occurred shall be per cent
12 and shall not include the insurer's gross direct written
13 premiums for motor vehicle insurance in this State; provided
14 that following a covered event, the rate of assessment may be
15 increased to an amount not to exceed per cent and may
16 include the insurer's gross direct written premiums for motor
17 vehicle insurance in this State. This increase shall remain in
18 effect until all claims and other obligations, including bonds
19 and notes, arising out of a covered event are fully discharged.

20 (b) In the event of a loss from a covered event, the fund,
21 in addition to the assessment in subsection (a), shall assess
22 those insurers that acted as servicing facilities during the



1 twelve months ended at the start of the month preceding the
2 month in which the covered event occurs. The total assessment
3 shall be a fixed percentage of the total coverage provided by
4 the fund under the policies of medical malpractice insurance
5 during the month preceding the month in which the covered event
6 occurs. A separate total assessment shall be made for each
7 covered event. The total assessment shall be allocated to each
8 servicing facility based on the proportion of the total amount
9 of the fund's gross direct written premiums for policies of
10 hurricane property insurance, in each case, during the twelve
11 months ending at the start of the month preceding the month in
12 which the covered event occurs. Assessments made under this
13 subsection and assessments made under subsection (a) in a year
14 in which a covered event has occurred are due from each insurer
15 based on assessment procedures established by the fund to meet
16 its obligations to policyholders in a timely manner. The
17 percentage to be used to calculate the total assessment shall
18 be:

19 (1) For calendar year 2008, a percentage as fixed by the
20 board in the plan of operation; provided that the
21 total assessment shall not exceed \$;

22 (2) For calendar year 2009, per cent;



1 (3) For calendar year 2010, per cent; and

2 (4) For calendar year 2011, and each calendar year
3 thereafter, per cent.

4 (c) The fund may exempt or defer, in whole or in part, the
5 assessment of any insurer if the assessment would cause the
6 insurer's financial statement to reflect amounts of capital or
7 surplus less than the minimum amounts required for a certificate
8 of authority in this State.

9 § -6 Accumulation of \$500,000,000 in funds and

10 commitments. (a) The commissioner shall provide the fund with
11 written confirmation if the director of finance secures
12 \$500,000,000, in the aggregate in the form of:

13 (1) Commitments from either the federal government or an
14 agency of the federal government or a financial
15 institution;

16 (2) Revenue bonds other than those issued or to be issued
17 in response to the occurrence of a covered event; or

18 (3) A combination of the commitments or bonds.

19 (b) Upon written confirmation from the commissioner
20 pursuant to subsection (a), the Hawaii medical malpractice
21 insurance relief fund shall:

22 (1) Control or freeze rates; and



1 (2) Continue accumulating premiums from policies of
2 medical malpractice insurance, net of any reinsurance
3 payments, operating expenses, and funds necessary for
4 the development of a comprehensive loss reduction
5 plan.

6 (c) When the balance of the net moneys accumulated totals
7 \$500,000,000, the fund may notify the commissioner of that fact.
8 Following the receipt of the notice, the commissioner may order
9 a reduction in the rates for policies of medical malpractice
10 insurance.

11 (d) In the event of a loss from a covered event, the net
12 moneys accumulated shall be used to settle claims and pay
13 current and ongoing expenses of the fund. The net accumulated
14 moneys, commitments, and bonds described in subsection (a)(2)
15 shall be used only in the event losses from a covered event
16 exceed the assessment pursuant to section -4(b)(7) and
17 section -5.

18 (e) In the event the balance of the net accumulated moneys
19 falls below \$400,000,000, the fund shall establish rates,
20 subject to the approval of the commissioner, necessary to
21 replenish the account balance to \$500,000,000 as promptly as
22 reasonably practicable. The director of finance shall seek to



1 arrange additional commitments whenever the account balance
2 falls below \$400,000,000.

3 (f) The fund shall be exempt from paying all taxes and
4 fees levied by the State on other insurers.

5 § -7 **Advisory committee.** (a) To assist the fund in
6 implementing this chapter, the fund may appoint an advisory
7 committee consisting of individuals:

8 (1) Who are members of the American Academy of Actuaries;
9 and

10 (2) Who have substantial experience in the area of medical
11 malpractice.

12 (b) The fund may appoint additional advisory committees as
13 the fund deems necessary in furtherance of this chapter.

14 § -8 **Plan of operation.** (a) The fund shall adopt a
15 plan of operation and a manual of rules and rates necessary to
16 ensure the solvency and the reasonable and equitable
17 administration of the fund. The adoption of, and any amendments
18 to, the plan of operation and manual of rules and rates shall
19 not be subject to chapter 91, except that the policy forms for
20 policies of medical malpractice insurance shall be adopted
21 pursuant to chapter 91.



1 (b) If the fund fails to adopt a plan of operation or
2 fails to adopt amendments to the plan of operation, the
3 commissioner shall adopt a plan of operation or make amendments
4 necessary to carry out the purposes of this chapter. Any plan
5 of operation, or amendment, adopted by rule of the commissioner
6 shall continue in full force and effect until the rule is
7 superseded by a plan of operation, or amendment, adopted by a
8 majority vote of all members of the fund's board, and approved
9 by the commissioner.

10 (c) The plan of operation shall:

11 (1) Establish procedures for performance of all powers and
12 duties of the fund;

13 (2) Establish procedures for providing notice to all
14 persons with interests insurable by the fund in the
15 State of the type of medical malpractice insurance
16 available from the fund in the event the fund offers
17 medical malpractice insurance;

18 (3) Provide for and adopt all necessary forms, including
19 insurance policies to be used by and on behalf of the
20 fund, for use by the fund and servicing facilities;

21 (4) Adopt actuarially sound rates, based on reasonable
22 assumptions relative to expectations of medical



- 1 malpractice frequency and severity, to be charged for
2 medical malpractice insurance provided by the fund, in
3 accordance with article 14 of chapter 431;
- 4 (5) Publish manuals of rules, rates, and rating and
5 classification plans, which shall address mandatory
6 deductibles, limits of coverage, and the
7 classification of risks and rate modifications based
8 on the exposure of insureds;
- 9 (6) Establish procedures for receiving and servicing
10 applications to the fund;
- 11 (7) Establish procedures for processing and maintaining
12 records of the fund relating to its financial
13 transactions, its agents, its employees, its
14 operations, and all transactions with any servicing
15 facility;
- 16 (8) Establish procedures for the collection and remittance
17 of the premiums and return of unearned premiums when
18 applicable;
- 19 (9) Establish procedures for the payment of valid claims;
- 20 (10) Establish procedures for prorating available funds
21 pursuant to section -15;
- 22 (11) Establish procedures for obtaining reinsurance;



1 (12) Establish procedures to borrow funds; and

2 (13) Develop a plan for the investment of moneys held by
3 the fund subject to the limitations in article 6 of
4 chapter 431.

5 § -9 **Annual statements.** (a) The fund shall submit to
6 the commissioner each year, no later than one hundred twenty
7 days after the end of the fund's fiscal year, a financial report
8 in a form approved by the commissioner.

9 (b) The commissioner may require other reports concerning
10 risks insured by the fund as the commissioner deems appropriate.

11 § -10 **Powers of the commissioner.** (a) For the purpose
12 of ascertaining the fund's condition or compliance with this
13 chapter, the commissioner shall examine the accounts, records,
14 documents, and transactions of the fund at least once every
15 three years commencing at the time the fund starts issuing
16 policies of medical malpractice insurance or more often if the
17 commissioner deems it necessary. The fund shall pay all
18 reasonable and actually incurred expenses of the examination in
19 accordance with section 431:2-306(b); provided that a detailed
20 estimate of the expenses to be incurred shall be approved by the
21 board prior to the examination. In the event the actual
22 expenses incurred are in excess of ten per cent of the estimate,



1 the commissioner shall communicate in writing to the board the
2 reason for the excess expenses.

3 (b) The commissioner may exercise all of the
4 commissioner's powers provided by law in the supervision and
5 regulation of the fund, any servicing facility, and any other
6 person or entity subject to the jurisdiction of the
7 commissioner.

8 § -11 **Coverage available from the fund; deductible.** The
9 fund, pursuant to the provisions of this chapter and the plan of
10 operation, shall have the power to provide policies of insurance
11 to physicians, including incidental coverages and subject to
12 limits as specified in the plan of operation but not to exceed
13 \$ for each claimant under one policy in any one year.

14 § -12 **Mitigation.** The fund shall develop a
15 comprehensive loss reduction plan for the risk of medical
16 malpractice.

17 § -13 **Appeals.** (a) Any applicant or policyholder
18 adversely affected by a decision of the fund shall have the
19 right to appeal to the board within thirty days after the
20 decision. The application for an appeal shall specify how the
21 applicant or policyholder making the appeal was aggrieved and



1 the grounds upon which relief is demanded. The decision of the
2 board shall be deemed final.

3 (b) Any final action, decision, or order of the board
4 under this chapter shall be subject to judicial review by the
5 circuit court.

6 § -14 **Immunity and limitation on liability.** (a) There
7 shall be no liability on the part of, and no cause of action of
8 any nature shall arise against, any servicing facility or its
9 authorized insurance producers; the fund or its agents,
10 employees, or board; the State; the commissioner; or the
11 commissioner's representatives for any action taken by them in
12 the performance of their powers and duties under this chapter;
13 provided that this section shall not be construed to prohibit
14 any exercise of the commissioner's power pursuant to this
15 chapter or any other law or rule adopted pursuant to law or
16 chapters 661 and 662, any other law to the contrary
17 notwithstanding.

18 (b) Nothing in this chapter shall create an obligation,
19 debt, claim, cause of action, claim for relief, charge, or any
20 other liability of any kind whatsoever in favor of any person or
21 entity without regard to whether that person or entity received
22 any benefits under this chapter, against the State, or its



1 officers and employees. The State and its officers and
 2 employees shall not be liable for the results of any
 3 application, denial of application, claim, loss, or other
 4 benefits provided by the fund pursuant to this chapter.

5 (c) Nothing in this chapter shall be construed as
 6 authorizing any claim against the State whatsoever, nor shall
 7 this chapter be construed as authorizing any claim against the
 8 fund in excess of any note, loan, liability, or other obligation
 9 incurred by the fund.

10 (d) Nothing in this section shall be construed to alter
 11 any obligation to pay assessments or charges authorized to be
 12 imposed or levied by the board pursuant to this chapter. The
 13 fund shall be subject to chapter 431 only as provided for in
 14 this chapter.

15 § -15 **Insolvency of fund.** If the total amount available
 16 at any time to the fund is insufficient to make all necessary
 17 payments, the moneys available shall be prorated and the unpaid
 18 portion shall be paid as soon thereafter as moneys become
 19 available.

20 § -16 **Establishment of trust funds.** (a) The fund shall
 21 establish, outside the state treasury, a medical malpractice
 22 insurance reserve trust fund, and any accounts thereunder, and



1 any other trust fund or account necessary to carry out the
2 purposes of this chapter. Moneys deposited in the medical
3 malpractice insurance reserve trust fund and any accounts
4 thereunder or any other trust fund or account shall be held by
5 the fund, as trustee, in a depository as defined in section 38-1
6 or according to a similar arrangement at the discretion of the
7 board, including trust or custodial accounts created for the
8 benefit of the fund's secured parties under contractual claims
9 financing arrangements. The moneys may be invested and
10 reinvested in accordance with the plan of operation.

11 Disbursements from the trust funds shall not be subject to
12 chapter 103D and shall be made in accordance with procedures
13 adopted by the board.

14 (b) The medical malpractice insurance relief fund shall
15 implement the assessments of all insurers authorized to write
16 and engage in writing casualty insurance in this State on a
17 direct basis, as authorized by section -4(b)(7) and
18 section -5, and the proceeds from the assessments shall be
19 deposited into the medical malpractice insurance reserve trust
20 fund or into trust or custodial accounts, created for the
21 benefit of the fund's secured parties, that are held inside or
22 outside the medical malpractice insurance reserve trust fund.



1 (c) If the fund offers to issue policies of medical
2 malpractice insurance, the premiums for the policies shall be
3 deposited into the medical malpractice insurance reserve trust
4 fund.

5 (d) After each covered event, if the board determines that
6 the moneys in the medical malpractice insurance reserve trust
7 fund, excluding moneys determined by the board to be needed to
8 continue fund operations following that covered event, will be
9 insufficient to pay claims and other obligations of the fund
10 arising out of that covered event, the fund is authorized to
11 levy a surcharge not to exceed seven and one-half per cent a
12 year on premiums charged for all medical malpractice insurance
13 policies issued for risks insured in this State. These moneys
14 may be deposited into the medical malpractice insurance reserve
15 trust fund or into trust or custodial accounts, created for the
16 benefit of the fund's secured parties, which are held inside or
17 outside the medical malpractice insurance reserve trust fund.
18 The formula to calculate the amount and period of the surcharge
19 for each covered event and the procedures and methodology for
20 payment of claims and other obligations of the fund shall be
21 provided in the plan of operation, and the surcharge may remain
22 in effect until all claims and other obligations of the fund,



1 including claims financing transactions, bonds, notes, and other
2 obligations arising out of that covered event, have been fully
3 discharged. The amount and reason for any surcharge made
4 pursuant to this subsection shall be separately stated on any
5 billing sent to an insured. The surcharge shall not be
6 considered premiums for any other purpose, including the
7 computation of gross premium tax or the determination of
8 producers' commissions.

9 (e) Any proceeds, experience refunds, or other return
10 funds under reinsurance shall be deposited into the medical
11 malpractice insurance reserve trust fund.

12 (f) Any proceeds from loans or other moneys from the
13 federal government, any proceeds from bonds issued pursuant to
14 this chapter loaned by the director of finance to the fund, and
15 other moneys as the State may make available from time to time
16 shall be deposited into the medical malpractice insurance
17 reserve trust fund.

18 (g) Moneys in the medical malpractice insurance reserve
19 trust fund or in trust or custodial accounts, created for the
20 benefit of the fund's secured parties, shall be expended by the
21 fund or its authorized designee and used solely for the purposes
22 of this chapter.



1 (h) Moneys in the medical malpractice insurance reserve
2 trust fund may be:

3 (1) Disbursed upon dissolution of the fund; provided that:

4 (A) The net moneys in the medical malpractice
5 insurance reserve trust fund shall revert to the
6 state general fund after payments by the fund on
7 behalf of licensed insurers or the State that are
8 required to be made pursuant to any federal or
9 state law; and

10 (B) If moneys are paid on behalf of licensed
11 insurers, payment shall be made in proportion to
12 the premiums from policies of medical malpractice
13 insurance serviced by the insurers in the twelve
14 months prior to dissolution of the fund; or

15 (2) Deposited to the loss mitigation grant fund
16 established under section 431:22-102;

17 provided that all interest earned from the principal in the
18 medical malpractice insurance reserve trust fund shall be
19 transferred and deposited into the general fund each year that
20 the medical malpractice insurance reserve trust fund remains in
21 existence.



1 § **-17 Transfer of funds; immunity.** There shall be no
2 cause of action, claim for damages or relief, charge, or any
3 other liability of any kind whatsoever created against the
4 State, the fund, the commissioner, or their respective agents,
5 employees, or board, by, or relating to, the transfer of any
6 moneys from the medical malpractice insurance reserve trust fund
7 to the loss mitigation grant fund or from the loss mitigation
8 grant fund to the medical malpractice insurance reserve trust
9 fund or involving the loss mitigation grant program.

10 § **-18 Additional notice requirement.** Thirteen months
11 prior to discontinuation of writing medical malpractice
12 insurance coverage, an insurer shall file an affidavit with the
13 commissioner stating the reasons for the discontinuation."

14 SECTION 2. Chapter 435C, Hawaii Revised Statutes, is
15 repealed.

16 SECTION 3. There is appropriated out of the general
17 revenues of the State of Hawaii the sum of \$ or so
18 much thereof as may be necessary for fiscal year 2008-2009 for
19 the medical malpractice insurance reserve trust fund.

20 SECTION 4. There is appropriated out of the medical
21 malpractice insurance reserve trust fund the sum of



1 \$ or so much thereof as may be necessary for fiscal
2 year 2008-2009 for the purposes of section 1 of this Act.

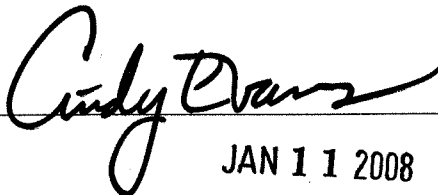
3 The sum appropriated shall be expended by the department of
4 commerce and consumer affairs for the purposes of this Act.

5 SECTION 5. The insurance commissioner shall submit an
6 interim report to the legislature no later than twenty days
7 prior to the convening of the 2009 regular session, and a final
8 report to the legislature no later than twenty days prior to the
9 convening of the 2010 regular session on the implementation of
10 this Act, including any recommended legislation.

11 SECTION 6. This Act shall take effect upon its approval;
12 provided that sections 3 and 4 of this Act shall take effect on
13 July 1, 2008.

14

INTRODUCED BY:


JAN 11 2008



Report Title:

Medical Malpractice Insurance

Description:

Establishes the Hawaii medical malpractice insurance relief fund to offer policies of medical malpractice insurance to physicians in the State. Repeals Hawaii medical malpractice underwriting plan (chapter 435C, HRS). Appropriates funds to the medical malpractice insurance reserve trust fund.

