

Medical indemnity claim—medical indemnity claim finalisation mode, code N[N]

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Medical indemnity claim—medical indemnity claim finalisation mode, code N[N]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Mode of medical indemnity claim finalisation
METEOR identifier:	330111
Registration status:	Health , Standard 07/12/2011
Definition:	The process by which a medical indemnity claim was finalised, as represented by a code.
Data Element Concept:	Medical indemnity claim—medical indemnity claim finalisation mode
Value Domain:	Medical indemnity claim finalisation mode code N[N]

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N[N]	
Maximum character length:	2	
	Value	Meaning
Permissible values:	1	Settled through state or territory-based complaints processes
	2	Settled through court-based alternative dispute resolution processes
	3	Settled through statutorily mandated compulsory conference process
	4	Settled—other
	5	Court decision
	8	Discontinued commenced claim
	9	Discontinued potential claim
Supplementary values:	99	Not stated/inadequately described

Collection and usage attributes

Guide for use:	CODE 1 Settled through state or territory-based complaints processes
	'Settled through state or territory-based complaints processes' includes proceedings conducted in state or territory health rights and health complaints bodies.
	CODE 2 Settled through court-based alternative dispute resolution processes
	'Settled through court-based alternative dispute resolution processes' includes mediation, arbitration, and case appraisal provided for under civil procedure rules.
	CODE 3 Settled through statutorily mandated compulsory conference process
	'Settled through statutorily mandated compulsory conference process' includes settlement conferences required by statute as part of a pre-court process.
	CODE 4 Settled—other
	'Settled—other' includes instances where a medical indemnity claim is settled part way through a trial or a negotiated settlement.
	CODE 8 Discontinued commenced claim
	'Discontinued commenced claim' means the discontinued medical indemnity claim has already commenced and now has the status of 'Commenced—claim file closed'.
Comments:	Discontinued medical indemnity claims include claims which have been closed due to withdrawal by the claimant, or operation of statute of limitations, or particularly with potential claims where the claim manager decides to close the claim file because there has been a long period of inactivity on the matter. Discontinued medical indemnity claims also include instances where a commenced claim is discontinued part way through a trial.
	CODE 9 Discontinued potential claim
	'Discontinued potential claim' means the discontinued medical indemnity claim has not yet commenced and now has the status of 'Not yet commenced—claim file closed'.
	CODE 99 Not stated/inadequately described
Comments:	'Not stated/inadequately described' should be used for medical indemnity claims that have not yet been closed or a structured settlement has not yet been agreed. Code 5, 'Court decision', in this value domain maps to Code V, 'Case was settled by court judgement', in the Australian Prudential Regulation Authority National Claims and Policies Database 'Litigation status' data item (APRA 2006).

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
Steward:	Australian Institute of Health and Welfare
Reference documents:	APRA (Australian Prudential Regulation Authority) 2006. Data Specifications National Claims and Policies Database document number 3.1. Canberra: APRA

Data element attributes

Collection and usage attributes

Guide for use:	Finalisation of a medical indemnity claim refers to the process by which a claim became closed.
-----------------------	---

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
---------------------------------	--

Steward: [Australian Institute of Health and Welfare](#)

Relational attributes

Related metadata references: See also [Medical indemnity claim—medical indemnity claim status, code NN Health](#), Standard 07/12/2011

Implementation in Data Set Specifications: [Medical indemnity DSS 2012-14 Health](#), Superseded 21/11/2013
Implementation start date: 01/07/2012
Implementation end date: 30/06/2014
[Medical indemnity NBPDS 2014- Health](#), Standard 21/11/2013
Implementation start date: 01/07/2014