

Legislative Oversight Committee

South Carolina House of Representatives

Post Office Box 11867

Columbia, South Carolina 29211

Telephone: (803) 212-6810 • Fax: (803) 212-6811



Restructuring & Seven-Year Plan Report Guidelines

February 27, 2015

COMMITTEE INFORMATION

Committee Information

House Legislative Oversight Committee

Post Office Box 11867

Columbia, South Carolina 29211

Telephone 803-212-6810

Fax 803-212-6811

Also, the agency may visit the South Carolina General Assembly Home Page (<http://www.scstatehouse.gov>) and click on "*Citizens' Interest*" then click on "*House Legislative Oversight Committee Postings and Reports*". This will list the information posted online for the Committee; click on the information the agency would like to review.

<http://www.scstatehouse.gov/citizens.php> (Click on the link for "*House Legislative Oversight Committee Postings and Reports*.")

OVERVIEW: RESTRUCTURING & SEVEN-YEAR PLAN

Background

Pursuant to Section 1-30-10(G)(1), state department and agency governing authorities must submit the following to the Governor and General Assembly:

- “reports giving detailed and comprehensive recommendations for the purposes of merging or eliminating duplicative or unnecessary divisions, programs, or personnel within each department to provide a more efficient administration of government services.” (Annual Restructuring Report, Restructuring Report or ARR)

Pursuant to Section 1-30-10(G)(2), state department and agency governing authorities must submit the following to the Governor and General Assembly:

- “a seven-year plan that provides initiatives and/or planned actions that implement cost savings and increased efficiencies of services and responsibilities within the projected seven-year period.” (Seven-Year Plan)

These questions and instructions are provided for the purposes of fulfilling the agency’s requirement to the House Legislative Oversight Committee under these statutes. Please note the agency’s response will be published on the General Assembly’s website.

In completing these documents, having a copy of the Fiscal Year 2012-13 Accountability Report and Fiscal Year 2013-14 Accountability Report the agency submitted to the Executive Budget Office will be helpful.

Submission Process

Please complete the information and answer the questions included on the following pages. Please note at the end there is a request to complete an Excel document with the name of all personnel at the agency who were consulted or performed work to obtain the information utilized when answering the questions in these reports, their title and their specific role in answering the question (i.e., searched the agency documents, asked for information because they are in charge of the department, etc.). Therefore, for efficiency purposes, the agency may want to keep track of this information while answering the questions instead of waiting until the end.

All forms should be submitted electronically by **March 31, 2015**, to the House Legislative Oversight Committee (HCommLegOv@schouse.gov) in both the original format (Word and Excel) and saved as a PDF for online reporting. The signed copy of the Submission Form with a hard copy of the forms and attachments should be mailed to: House Legislative Oversight Committee, Post Office Box 11867, Columbia, South Carolina 29211. Please direct any questions about this process to Jennifer Dobson (jenniferdobson@schouse.gov) or Charles Appleby (charlesappleby@schouse.gov).

OVERVIEW: RESTRUCTURING & SEVEN-YEAR PLAN

Efforts to Avoid Duplication

Please note at the end of each page in this report, the Committee includes the following:

Does the agency already provide the information requested on this page, or similar information, in a report required by a legislative entity? If yes, add the appropriate information to the **Similar Information Requested Chart**. If the agency look in the Excel document attached, there is a template for the agency to complete for any questions which ask for the same information under the tab labeled, “Similar Info Requested.”

In the Excel document attached, there is a template to complete any questions which ask for the same information under the tab labeled, “Similar Information Requested.” The Committee asks this at the end of every page because if the questions on that page seek information similar to information sought in another report to a legislative entity, we want to know so we may communicate with the legislative entity who requires the other report and determine the most efficient way to avoid duplication in the future.

In addition, notice that one section of this report requests the agency list all other reports it has to submit. The Committee is seeking this information to analyze and determine whether there are any recommendations the Committee may make, in collaboration with the other entities which require reports, in an effort to minimize the burden of all the reporting requirements on the agency while still ensuring all appropriate information is provided.

Looking Ahead

The Restructuring Report, Seven-Year Plan and Oversight Study process are new for 2015. Each year the Committee will review information sought from agencies, the methods through which it is sought and any feedback received from agencies. Through this review, it is the Committee’s goal to continually improve its processes and obtain greater effectiveness and efficiency for agencies and the Committee through revisions and updates both in the information it receives and way in which it is collected. The Committee looks forward to working with agencies to provide the most effective and efficient state government for the people of South Carolina.

RESTRUCTURING & SEVEN-YEAR PLAN

SC Patients' Compensation Fund

Date of Submission: *March 31, 2015*

Please provide the following for this year's Restructuring and Seven-Year Plan Report.

	Name	Date of Hire	Email
Agency Director	Terry Coston	12/1/2001	Terry.coston@pcf.sc.gov
Previous Agency Director	Calvin Stewart	7/1/1986	None

	Name	Phone	Email
Primary Contact:	Terry Coston	803-896-5291	Terry.coston@pcf.sc.gov
Secondary Contact:	Mario S. Sipos	803-896-5293	Mario.sipos@pcf.sc.gov

Is the agency vested with revenue bonding authority? (re: Section 2-2-60(E))	No
--	----

I have reviewed and approved the enclosed 2015 Restructuring and Seven-Year Plan Report, which are complete and accurate to the extent of my knowledge.

Current Agency Director
(Sign/Date):

(Type/Print Name):

Terry A. Coston, SCLA, CPM

If applicable, Board/Commission Chair
(Sign/Date):

(Type/Print Name):

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Insert the appropriate page numbers once the agency has completed the report.

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EXECUTIVE SUMMARY

I. Executive Summary

A. Historical Perspective

1. **See attached spreadsheet**

B. Purpose, Mission and Vision

1. **See attached spreadsheet**

C. Key Performance Measure Results

1. After completing the Key Performance Measurement Processes Section of this Report, please come back to this question and provide a summary of the results (bullet style results only, explanations should be included in the Key Performance Measurement Processes Section).
 - **There are no other entities sufficiently comparable to the PCF in other states to perform the requested analysis.**
 - **The PCF's Executive Director, Terry Coston, monitors the PCF on an ongoing and quarterly basis.**
 - **The major trends that affect the PCF are national medical malpractice underwriting trends, and claims frequency & severity.**
 - **The PCF, which is completely self-funded, is meeting its financial obligations to its members while managing claims expenses. The PCF does not rely on appropriations out of the General Fund for either its operating or claims expenses. Instead, the PCF is funded entirely through its membership fees and, in the past assessments on its members. There has been no assessments since 2000.**
 - **The PCF is a very lean agency, having recently reduced its staff by one position from five FTE positions to four FTE positions**
 - **The annual budget of the PCF has not increased in 6 to 7 years.**
 - **The PCF's external customers are licensed healthcare providers and independent insurance agents.**
 - **The PCF's internal customers are basic carriers that provide the required minimum coverage to the PCF's members.**

- The PCF continues to automate some of its functions which may lead to additional efficiencies in the future. The recent automation of the PCF's member management system has improved the quality and speed of its services and operations.
- Enhancements to the existing PCF website has resulted in reduced processing and costs related to membership services.
- The PCF continues to maintain sufficient funds to administer the PCF and to deliver quality, fair and non-discriminatory medical malpractice liability coverage to its members.

Does the agency already provide the information requested on this page, or similar information, in a report required by another entity? If yes, add the appropriate information to the [Similar Information Requested Chart](#). If the agency looks in the Excel document attached, there is a template for the agency to complete for any questions which ask for the same information under the tab labeled, "Similar Info Requested."

ORGANIZATIONAL PROFILE

II. Organizational Profile

1. The agency's main deliverables (i.e., products or services) and the primary methods by which these are provided;
 - a. **Key Deliverables Chart – See attached spreadsheet**
2. The agency's key customers and their requirements and expectations;
 - a. **Key Customers Chart. See attached spreadsheet**
3. The agency's key stakeholders (other than customers);
 - a. **Key Stakeholders Chart. See attached spreadsheet**
4. Other state agencies which have the biggest impact on the agency's mission success;
 - a. **Key Partner Agency Chart. See attached spreadsheet**
5. The agency's performance improvement system(s);
 - **Document management system**
 - **PCFApplication**
6. The agency's organizational structure in flow chart format;

See attached PCF Organization Chart attached to this document
7. Details about the body to whom the Agency Head reports;
 - a. **Overseeing Body Chart. See attached spreadsheet**
8. **Major Program Areas Chart. See attached spreadsheet**
9. Emerging issues:
 - **Increase in medical malpractice lawsuits**
 - **Increase in claims severity**
 - **Risk Management resources**
 - **Reduction in PCF memberships**
 - **Hospital acquired physician groups**

ORGANIZATIONAL PROFILE

III. Laws (Statutes, Regulations, Provisos)

This section asks for state and federal statutes, regulations and provisos (“Laws”) which apply to the agency.

1. **Legal Standards Chart – See attached spreadsheet**

IV. Reports and Reviews

This section asks for information about reports the agency is required to submit to a legislative entity and the agency’s internal review process.

1. **Agency Reporting Requirements Chart - See attached spreadsheet**
2. **Internal Audit Chart. See attached spreadsheet. The PCF does not hire internal auditors. The agency undergoes its annual audit by an independent CPA firm. Every five years the contract is vetted and bids are awarded by the Office of State Auditor. We view this as an external audit.**
Office of Senate Oversight Report

Does the agency already provide the information requested on this page, or similar information, in a report required by another entity? If yes, add the appropriate information to the **Similar Information Requested Chart**. If the agency looks in the Excel document attached, there is a template for the agency to complete for any questions which ask for the same information under the tab labeled, “Similar Info Requested.”

RESTRUCTURING REPORT

V. Key Performance Measurement Processes

This category examines the agency's performance and improvement in key areas. Performance levels are examined relative to those of competitors and other organizations providing similar programs and services. Information is typically displayed by the use of performance measures. Quantitative measures may be supplemented by a discussion of qualitative measures where appropriate; however, every effort should be made to use appropriate quantitative measures that can be charted to show trends and comparisons to benchmarks.

Address only top-level results showing aggregate measures of agency-wide performance that are reflective of the value added to customers. Please include comparative data as applicable. These results are typically captured in performance goals and planning documents. When determining which processes are "key processes" consider the business impacts, and select those processes that are most important to the customer (both internal and external) to satisfy their requirements and/or those processes with problem areas identified by management.

Note: Results information (i.e., each chart, graph, table) reported for this category should be referenced to the specific question number (Ex. Chart 5.1-1, Graph 5.1-2, Table 5.1-3). The third digit identifies the sequential position of the specific chart, graph or table included in the agency's responses to each questions.

For each performance measurement included in response to the questions on the next page under Subsection A, please provide the following information:

- a. The performance goal(s)/benchmark(s) for the overall process output, and/or critical activities that produce the output.
 - i. Three agency/government entities in other states or non-government entities the agency considers the best in the country in this process or similar process and why. **There are no other entities sufficiently comparable to the PCF in other states to perform the requested analysis.**
 - ii. If the agency did not use results from an entity the agency listed in response to "i" as a performance goal/benchmark, why not and why did the agency choose the goal/benchmark it did? **There are no other entities sufficiently comparable to the PCF in other states to perform the requested analysis.**
 - iii. Individual(s) who are not employed by the agency (government or non-government, located anywhere in the country) whom the agency considers an expert in the process or similar process and their contact information, or if deceased, name of books authored. The SC Joint Underwriting Association; Tim Ward, 864-240-4366; PO Box 128, Greenville, SC 29601
- b. List the senior leaders who review the performance measure, their title and frequency with which they monitor it. **Terry Coston, Executive Director, monitors the performance of the PCF on a regular basis but more specifically quarterly.**
- c. Trends the agency has seen and the method by which it analyzes trends in these results.

Trends that affect the operations of the PCF would be national underwriting trends and claims frequency & severity. The underwriting trends are studied by Merlinos & Associates, the actuary for the PCF. These are researched and reviewed at least once a year and assist in the development of the PCF Rate Study. Also, the PCF reviews national periodical (Crittendon News, Advisen Insurance News, AON Benchmark study - yearly) daily to keep up with national insurance underwriting and claims trends.

- d. Whether the agency has reasonable control over this result (i.e., more than 50% or enough to be able to influence and accurately measure the result). **The PCF does not have reasonable control over this result. However, the PCF has instituted risk management services that it offers to its members and is developing additional educational risk management services.**
 - i. If the agency does not have reasonable control over this result, the other one or more agencies, who when combined with the agency, together have reasonable control over the result and names of those other agencies. **N/A.**

RESTRUCTURING REPORT

V. Key Performance Measurement Processes (cont.)

A. Results of Agency's Key Performance Measurements

Mission Effectiveness

1. What are the agency's actual performance levels for two to four of the agency's key performance measurements for mission effectiveness (i.e., a process characteristic indicating the degree to which the process output (work product) conforms to statutory requirements (i.e., is the agency doing the right things)?

The PCF continues to meet all financial obligations to our members and through settlement and payment of its medical malpractice claims. The claims expenses for the past three years are:

2012	\$17,718,272
2013	\$18,029,108
2014	\$10,340,473

Our experience recently has been tracking with the national trends in medical malpractice claims. Our number of claims is trending downward, however, severity is slightly up.

Mission Efficiency

2. What are the agency's actual performance levels for two to four of the agency's key performance measurements for mission efficiency (i.e., a process characteristic indicating the degree to which the process produces the required output at minimum resource cost (i.e., is the agency doing things right?)) including measures of cost containment, as appropriate? **The PCF is completely self-funded. The PCF's operations and claim payments are covered by its membership fees and investments. The PCF is authorized to extend payments over several periods and does so in order to manage its finances.**

Quality (Customer Satisfaction)

3. What are the agency's actual performance levels for two to four of the agency's key performance measurements for quality (i.e., degree to which a deliverable (product or service) meets customer requirements and expectations (a customer is defined as an actual or potential user of the agency's products or services)) for the agency as a whole and for each program listed in the agency's Major Program Areas Chart? **The PCF has a staff of four FTEs that provide customer service for over 3,000 members**

and 180 independent agents. Our external customers are licensed healthcare providers to a members of the PCF as well as 180 independent agents. Our internal customer would be the basic carrier who provides the primary coverage layer to our members. Each member is required to have a minimum of \$200,000 per claim and \$600,000 annual aggregate in primary coverage. Our service includes underwriting, membership services and claims. The PCF continues to provide service to our internal and external customers at a very high level and we consistently meet the expectations of our customer.

Workforce Engagement

4. What are the agency's actual performance levels for two to four of the agency's key performance measurements for workforce engagement, satisfaction, retention and development of the agency's workforce, including leaders, for the agency as a whole and for each program listed in the agency's Major Program Areas Chart? **The PCF currently has 4/5 full-time staff. Turnover rate is very low, as staff members tend to stay with the PCF for 7 years or longer once hired.**

Operational/Work System Performance

5. What are the agency's actual performance levels for two to four of the agency's key performance measurements for operational efficiency and work system performance (includes measures related to the following: innovation and improvement results; improvements to cycle or wait times; supplier and partner performance; and results related to emergency drills or exercises) for the agency as a whole and for each program listed in the agency's Major Program Areas Chart? **The recent automation of the PCF's member management system has both improved the quality of services offered to members, and improved the speed with which applications are submitted and approved. Members can both apply and pay on-line. Claims are handled more efficiently in the automated system. The PCF is in the process of going paperless. All membership files and claim files have been scanned and are accessed through our iaFolder. Our final initiative is to send all billing and correspondence electronically.**

RESTRUCTURING REPORT

V. Key Performance Measurement Processes (cont.)

B. Most Critical Performance Measures

1. **Maintain sufficient funds to administer the PCF**

C. Databases/Document Management

1. **Underwriting, claims and membership services database.**
2. **Document management system developed by TeamIA.**

D. Recommended Restructuring

The PCF is a very small agency that is completely self-funded and efficiently run with limited resources. There are no plans at this time to restructure.

SEVEN-YEAR PLAN

VI. Seven-Year Plan

A. General

1. The PCF does not have a written seven-year plan; however, the PCF has ongoing initiatives that will increase costs savings to the agency while continuing to provide adequate medical malpractice liability and litigation protection to its members.

B. Current/Recommended Actions

1. Going Paperless
2. Estimated \$20,000 per year
3. None
4. N/A
5. Outcomes:
 - a. Enhancements to current computer system to allow for electronic billing and correspondence
 - b. Website enhancements to provide for electronic payments and quotes
 - c. Risk Management program to help reduce risk exposures and expenses
 - d. Marketing initiatives
6. Timeline – Three years

SEVEN-YEAR PLAN

VI. Seven-Year Plan (cont.)

C. Additional Questions

1. What top three strategic objectives of the agency will have the biggest impact on the agency's effectiveness in accomplishing its mission?
 - Enhance Risk Management program to reduce claims expenses and exposure
 - Enhanced computer system to reduce time and expense in facilitating membership and underwriting expenses
 - Enhanced claims system to capture strategic data including venue, injury, types of claims that the current system does not capture.

2. What are the fundamentals required to accomplish the objectives?

Research, time and costs associated with the enhancements

3. What links on the agency website, if any, would the agency like listed in the report so the public can find more information about the agency? www.scpf.com
4. Is there any additional information the agency would like to provide the Committee or public? N/A
5. Consider the process taken to review the agency's divisions, programs and personnel to obtain the information contained in response to all the previous questions in the Restructuring Report and Seven-Year Plan ("Process"). State the total amount of time taken to do the following:
 - a. Complete the Process 20 hours
 - b. Complete this Report 17.5 hours
6. **Personnel Involved Chart.** See attached spreadsheet

CHARTS APPENDIX

VII. *Excel Charts*

Please send an electronic copy of the entire Excel Workbook and print hard copies of each of the Charts to attach here. Please print the charts in a format so that all the columns fit on one page. Please insert the page number each chart begins on below.

Similar Information Requested Chart _____	1
Historical Perspective Chart _____	2
Purpose, Mission Chart _____	3
Key Products Chart _____	4
Key Customers Chart _____	5
Key Stakeholders Chart _____	6
Key Partner Agency Chart _____	7
Overseeing Body Chart (General and Individual Member) _____	8 & 9
Major Program Areas Chart _____	10
Legal Standards Chart _____	11
Agency Reporting Requirements Chart _____	12
Internal Audits Chart _____	13
Personnel Involved Chart _____	14

Does the agency already provide the information requested on this page, or similar information, in a report required by another entity? If yes, add the appropriate information to the **Similar Information Requested Chart**. If the agency looks in the Excel document attached, there is a template for the agency to complete for any questions which ask for the same information under the tab labeled, "Similar Info Requested."



South Carolina Patients' Compensation Fund (R14) Board of Governors Chart

Seat: Dentist
James E. Mercer, D.D.S.
Chairman

Board of Governors

Seat: Public
Dixon C. Cunningham, D.B.A.

Seat: Dentist
William B. Farrar, D.D.S.

Seat: Attorney
Cheryl D. Shoun, Esq.

Seat: Physician
Richard M. Kennedy, M.D.

Seat: SCMA Physician
Steven E. Swift, M.D.

Seat: Public
Milon C. Smith

Seat: Hospital
Tiffni D. Shealy, Esq.

Seat: Hospital
Sarah G. Kirby

Seat: Attorney
Patrick W. Carr, Esq.

Seat: Insurance Rep.
D. Bruce Mackay, C.P.C.U.

Seat: Insurance Rep.
Jeffrey C. Miller

Seat: Physician
Larry L. Ware, M.D.

Approved by: _____
Terry Coston, Executive Director Date

M:/Organizational Charts/Board of Governors
Rev. 1/2015

Does the agency already provide the information requested on this page, or similar information, in a report required by another entity? If yes, add the appropriate information to the **Similar Information Requested Chart**. If the agency looks in the Excel document attached, there is a template for the agency to complete for any questions which ask for the same information under the tab labeled, "Similar Info Requested."

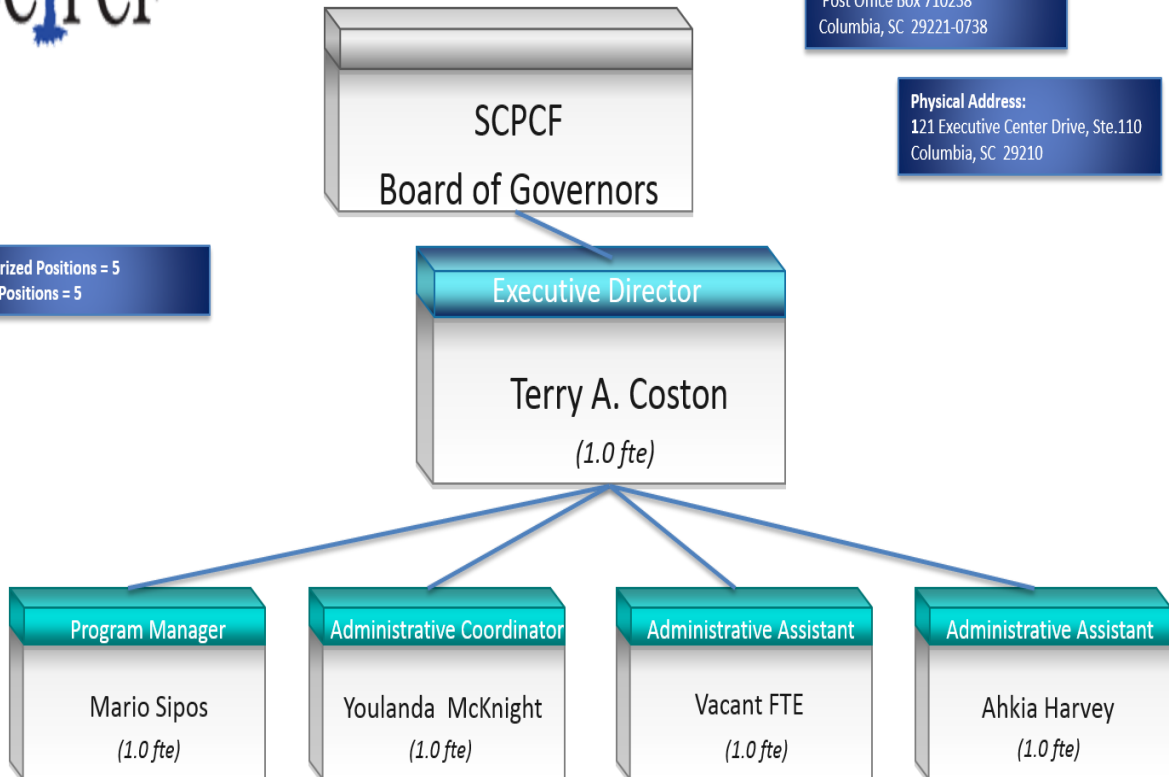


South Carolina Patients' Compensation Fund (R140)
Organizational Chart

Mailing Address:
Post Office Box 710238
Columbia, SC 29221-0738

Physical Address:
121 Executive Center Drive, Ste.110
Columbia, SC 29210

Authorized Positions = 5
Filled Positions = 5



Approved by: _____
Terry Coston, Executive Director Date

M:/Organizational Charts/Board of Governors
Rev.1/2015

Does the agency already provide the information requested on this page, or similar information, in a report required by another entity? If yes, add the appropriate information to the **Similar Information Requested Chart**. If the agency looks in the Excel document attached, there is a template for the agency to complete for any questions which ask for the same information under the tab labeled, "Similar Info Requested."

Agency Name: SC Patients' Compensation Fund
Agency Code: R140
Agency Section: Article 5 Section 38-79-410

Similar Information Requested Chart

INSTRUCTIONS: Please provide details about other reports which investigate the information requested in the Restructuring Report. This information is sought in an effort to avoid duplication in the future. In the columns below, please list the question number in this report, name of the other report in which the same or similar information is requested, section of the other report in which the information is requested, name of the entity that requests the other report and frequency the other report is required. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Restructuring Report Question #	Name of Other Report	Section of Other Report	Entity Requesting Report	Freq. Other Report is Required
Patients Compensation Fund, S.C.		Senate Oversight Restructuring Report		Senate Oversight Committee	Jan-15

Agency Name: SC Patients' Compensation Fund
Agency Section: R140
Agency Code: Article 5 Section 38-79-410

Historical Perspective Chart

INSTRUCTIONS: Please provide information about any restructuring or major changes in the agency's purpose or mission **during the last ten years**. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Year	Description of Restructuring that Occurred	Description of Major Change in Agency's Purpose or Mission
Patients Compensation Fund, S.C. (R140)	2001	Reconstituted Board; New Hire of Executive Director	The Mission of the PCF did not change. It has always been our mission to protect our licensed healthcare member if a medical malpractice action is filed against them.

INSTRUCTIONS: Provide information about the date the agency, in its current form, was initially created and the present purpose, mission and vision of the agency, with the date each were established in paranethesis. The Legal Standards Cross Reference column should link the purpose, mission and vision to the statutes, regulations and provisos listed in the Legal Standards Chart, which they satisfy.

Agency Submitting Report	Date Agency created	Purpose	Mission	Vision	Legal Standards Cross References
Patients Compensation Fund, S.C.	1976	<p>The South Carolina Patients' Compensation Fund was created for the purpose of paying that portion of a medical malpractice or *general liability claim, settlement, or judgment which is in excess of two hundred thousand dollars for each incident or in excess of six hundred thousand dollars in the aggregate year for one year. The Fund is liable only for payment of claims against licensed health care providers in compliance with the provisions of the Enabling Statute Title 38, Chapter 79, Article 5 and includes reasonable and necessary expenses incurred in payment of claims and the Fund's administrative expense.</p>	<p>The PCF's mission is to provide excess medical liability coverage to its members at an affordable cost. The objective is to serve the citizens of South Carolina through a viable and adequately funded excess medical malpractice insurance program for physicians, dentists, mid-level healthcare providers, hospitals, outpatient surgery center and other qualified healthcare providers. The PCF's Board of Governors is committed to strengthening and preserving the PCF in order to assure that the licensed healthcare providers of South Carolina have adequate medical malpractice liability and litigation protection.</p>	<p>To be the premier provider of excess professional liability insurance and risk management services in South Carolina.</p> <p>Our Values: •Focus on the needs of our members. •Support and respect all healthcare providers and related relationships. •Establish a culture of consistency and fairness in our performance. •Provide leadership with knowledge-based decisions and operate with integrity. •Embrace change through continuous improvement. •Work together as a team. •Make a difference in the community. •Utilize best business practices.</p> <p>The Fund provides customer services to its members through enrollment of new members, renewal of current members, collection of fees and assessments and payment of claims. It provides credentialing information to hospitals and managed care organizations.</p>	<p>Purpose: 38-79-410 Mission: 38-79-410 Vision: 38-79-410</p>

Agency Name: SC Patients' Compensation Fund
Agency Code: R140
Agency Section: Article 5 Section 38-79-410

Key Partner Agencies Chart

INSTRUCTIONS: List the names of the other state agencies which have the biggest impact on the agency's mission success (list a minimum of three); partnership arrangements established and performance measures routinely reviewed with the other entity. The Major Program Areas Cross References Column should link the Partner Agency to the major program area, in the Major Program Areas Chart, on which it has the biggest impact. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable and a minimum of three.

Agency Submitting Report	Agency w/ Impact on Mission Success	Partnership Arrangement Established	Performance Measures Routinely Reviewed Together	Major Program Areas Cross Reference
Patients Compensation Fund, S.C.	N/A	N/A	N/A	N/A

INSTRUCTIONS: Provide information about the agency's key deliverables (i.e. products or services); primary methods by which these are delivered; and, as applicable, actions that may reduce the general public and/or other agencies initial or repeatitive need for the deliverable. List each deliverable on a separate line. If there are multiple ways in which the deliverable is provided, list the deliverable multiple times with each delivery method on a separate line. In the "Three Greatest" column, indicate and rank the three most significant deliverables the agency brings to the people of South Carolina with #1 being the most significant. For the deliverables which are not one of three most significant, do not put anything in this column. The Major Program Areas Cross References Column should links the deliverable to the major program area, in the Major Program Areas Chart, within which that product or service is provided. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Item #	Deliverable (i.e. product or service)	Three Most Significant (#1, #2, #3)	Primary Method of Delivery	What can be done to reduce the general public and/or other agencies initial need for this deliverable? (i.e. preventive measures before the citizen or agency needs to come to the agency)	What can be done to reduce the general public and/or other agencies need to return for this deliverable? (i.e. preventive measures to ensure they do not need to come back to the agency for this service or product after already receiving it once)	If deliverable is identified as one of the three most significant, what would allow the agency to focus on it more?	Major Program Areas Cross Reference
Patients Compensation Fund, S.C.	1	Excess Medical Malpractice Coverage	1	Direct write	N/A	N/A	N/A	Operating Fund
	2							
	3							
	4							
	5							
	6							

Agency Name: SC Patients' Compensation Fund
 Agency Section: R140
 Agency Code: Article 5 Section 38-79-410

Key Customers Chart

INSTRUCTIONS: Provide information about the key customer segments identified by the agency and each segment's key requirements/expectations. A customer is defined as an actual or potential user of the agency's deliverables. Please be as specific as possible in describing the separate customer segments (i.e. do not simply put "public.") The Deliverables Cross References column should link customer groups to the deliverable listed in the Key Deliverables Chart, which they utilize. **NOTE:** Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Item #	Customer Segments	Requirements/Expecations	Deliverables Cross References
Patients Compensation Fund, S.C.	1	Licensed Physicians	Payment of membership fees/protection from excess medical malpractice claims	
Patients Compensation Fund, S.C.	2	Licensed Clinics & Hospitals	Payment of membership fees/protection from excess medical malpractice claims	
Patients Compensation Fund, S.C.	3	Licensed Dentist	Payment of membership fees/protection from excess medical malpractice claims	
Patients Compensation Fund, S.C.	4	Licensed Oral & Maxilofacial Surgeons	Payment of membership fees/protection from excess medical malpractice claims	
Patients Compensation Fund, S.C.	5	Licensed Advance Practice Registerd Nurs	Payment of membership fees/protection from excess medical malpractice claims	
Patients Compensation Fund, S.C.	6	Licensed Physicians' Assistant	Payment of membership fees/protection from excess medical malpractice claims	

Agency Name: SC Patients' Compensation Fund
Agency Section: R140
Agency Code: Article 5 Section 38-79-410

Key Stakeholder Chart

INSTRUCTIONS: Provide information about the agency's key stakeholder groups and their key requirements and expectations. A stakeholder is defined as a person, group or organization that has interest or concern in an agency. Stakeholders can affect or be affected by the agency's actions, objectives and policies. Please be as specific as possible in describing the separate stakeholder groups (i.e. please do not simply put "the public.") The Deliverables Cross References column should link stakeholder groups to the deliverable, listed in the Key Deliverables Chart, for which they group has the most interest or concern. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Item #	Stakeholder Group	Requirements/Expecations	Deliverables Cross References
Patients Compensation Fund, S.C.	1	Injured Patients	Licensed Healthcare provider must have a current membership with the PCF	Compensation if the individual member is negligent.
	2			
	3			
	4			
	5			
	6			

INSTRUCTIONS: Provide information about the body that oversees the agency and to whom the agency head reports including what the overseeing body is (i.e. board, commission, etc.); total number of individuals on the body; whether the individuals are elected or appointed; who elects or appoints the individuals; the length of term for each individual; whether there are any limitations on the total number of terms an individual can serve; whether there are any limitations on the number of consecutive terms an individual can serve; and any other requirements or nuances about the body which the agency believes is relevant to understanding how the agency performs and its results.

Agency Submitting Report	Type of Body (i.e. Board, Commission, etc.)	# of Times per Year Body Meets	Total # of Individuals on the Body	Are Individuals Elected or Appointed?	Who Elects or Appoints?	Length of Term	Limitations on Total Number of Terms	Limitations on Consecutive Number of Terms	Challenges imposed or that Agency staff and the Body have faced based on the structure of the overseeing body	Other Pertinent Information
Patients Compensation Fund, S.C.	Board of Governors	Four	13	Appointed	Governor	6 years	no limit	no limit	Set rates for the sufficient funding of the agency.	N/A

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Overseeing Body - Individual Members Chart

INSTRUCTIONS: Provide information about the individual members on the body that oversees the agency including their name, contact information, length of time on the body, profession and whether they are a Senator or House Member. The Major Program Areas Cross References Column should link the individual to the major program area, in the Major Program Areas Chart, in which the individual has a particular influence, if any, by way of serving on a subcommittee within the body, task force, etc. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Name of Individual on Body	Contact Information	Profession	Date First Started Serving on the Body	Last Date Served on the Body	Length of Time on the Body (in years)	Senator or House Member? (put Senate or House)	Major Program Areas Cross Reference
Patients Compensation Fund, S.C.	James E. Mercer, DDS	803-781-3321	Oral Surgeon	4/18/2000	current	15	No	
Patients Compensation Fund, S.C.	William B. Farrar, DDS	803-788-0861	Dentist	6/18/2014	current	1	no	
Patients Compensation Fund, S.C.	Patrick Carr	843-686-5432	Plaintiff Attorney	4/19/2012	current	3	no	
Patients Compensation Fund, S.C.	Dixon Cunningham	864-271-9350	Consumer	8/8/2007	current	8	no	
Patients Compensation Fund, S.C.	Sarah Kirby	803-607-1558	Hospital	1/13/2015	current		No	
Patients Compensation Fund, S.C.	Richard Kennedy, MD	803-738-7971	Physician	4/18/2000	current	15	No	
Patients Compensation Fund, S.C.	Bruce MacKay	803-936-4292	Insurance	4/18/2000	current	15	No	
Patients Compensation Fund, S.C.	Jeffrey Miller	803-739-6125	Insurance	10/20/2003	current	12	No	
Patients Compensation Fund, S.C.	Tiffni Shealy	843-229-8602	Hospital	5/16/2005	current	7	No	
Patients Compensation Fund, S.C.	Cheryl Shoun	843-720-1762	Defense Attorney	8/17/2009	current	6	No	
Patients Compensation Fund, S.C.	Milon Smith	843-284-1185	Consumer	12/29/2005	current	10	No	
Patients Compensation Fund, S.C.	Steven Swift, MD	843-792-6104	Physician	2/8/2012	current	3	No	
Patients Compensation Fund, S.C.	Larry Ware, MD	843-529-7489	Physician	2/2/2012	current	3	No	

a) List only the programs that comprise at least 80% of the total budget and include the % of total budget. The remainder of the programs should be "listed ONLY" in the box labeled "Remainder of Programs", with those program expenditures detailed in the box labeled "Remainder of Expenditures." If the agency has trouble understanding what is requested, refer to the 2012-13 Accountability Report, Section II, number 11.

b) The "Associated Objective(s)" column in the Program Template of the FY 2-13-14 Accountability report has been changed to "Key Performance Measures Cross References." The Key Performance Measures Cross References column should link major programs to charts/graphs in the Key Performance Measurement Processes Section (ex. Chart 5.2-1 or Graph 5.2-2). If the agency has trouble understanding what is requested, refer to the 2012-13 Accountability Report, Section II, number 11; and

c) An additional column, titled "Legal Standards Cross References," has been added at the end. The Legal Standards Cross Reference column should link major programs to the statutes, regulations and provisions listed in the Laws Section of this report, which they satisfy.

Included below is an example, with a partial list of past Major Program Areas from the Department of Transportation. The example does not include information in the columns under expenditures, key performance measures cross reference, legal standards cross references or remainder of expenditures, however the agency must complete these columns when submitting this chart in final form. Please delete the example information before submitting this chart in final form. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

-Key Performance Measures Cross References Column links major programs to the charts/graphs in the Key Performance Measurement Processes Section of the Restructuring Report.
-Legal Standards Cross References Column links major programs to the statutes, regulations and provisos they satisfy which are listed in the Laws Section of the Restructuring Report.

[illegible]

5050000	Land and Buildings
3000000	Toll Operations

[illegible]

Agency Section: Article 5 Section 38-79-410

INSTRUCTIONS: List all state and federal statutes, regulations and provisos that apply to the agency ("Laws") and a summary of the statutory requirement and/or authority granted in the particular Law listed. Included below is an example, with a partial list of Laws which apply to the Department of Juvenile Justice and Department of Transportation. The agency will see that a statute should be listed again on a separate line for each year there was an amendment to it. Please delete the example information before submitting this chart in final form. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

[illegible]

INSTRUCTIONS: List all reports, if any, the agency is required to submit to a legislative entity. Beside each include the following under the appropriate column: a) Name of the report; b) Legislative entity that requires the report; c) Law(s) that require the agency to provide the report; d) Stated legislative intent (from legislative entity, statute, regulation or other source) in providing the report; e) Frequency with which the report is required (i.e. annually, monthly, etc.); f) Approximate year the agency first started providing the report; g) Approximate cost to complete the report and any positive results from completing and submitting the report; and h) Method by which the agency receives, completes and submits the report (i.e. receive via emailed word document; log into or open program, enter data and click submit; etc.). Included below are examples of reports the agency may have to submit. The example does not include information in the columns under # of staff needed to complete the report; approx. total amount of time to complete the report and approx. total cost to complete the report, however the agency must complete these columns when submitting this chart in final form. Please delete the example figures before submitting this chart in final form, unless it applies to the agency, in which case ensure the information about those reports is complete. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Item #	Report Name	Legislative Entity Requesting Report	Law Requiring Report	Stated Intent of Report	Year First Required to Complete Report	Reporting Freq.	# of Days in which to Complete Report	Month Report Template is Received by Agency	Month Agency is Required to Submit the Report	Cost to Complete Report			Positive Results of Reporting	Method in which Report Template is Sent to Agency (i.e. via email;	Format in which Report Template is Sent to Agency	Method in which Agency Submits Completed Report (i.e. email; mail; click submit on web based form;	Format in which Agency Submits Completed Report (word, excel)
											# of Staff Members Needed to Complete Report	Approx. Total Amount of time to Complete Report	Approx. total Cost to Agency to Complete (considerin g staff time, etc.)					
Patients Compensation Fund, S.C.	1	Restructuring Report	House Legislative Oversight Committee	1-30-10(G)(1)	Increased Efficiency	2015	Annually	30	February	March	1	37.5	\$2,000	TBD	Email and Hardcopy	Word and Excel	Email and Hardcopy	Word and Excel

Note: All audits are not the result of suspicious activity or alleged improper actions. Often times regular audits are required by statute regulation or an agency's standard operating procedure simply as a method of ensuring operations are staying on track.

[illegible]

Agency Name: SC Patients' Compensation Fund
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Personnel Involved Chart

INSTRUCTIONS: List the name of all personnel at the agency who were consulted or performed work to obtain the information utilized when answering the questions in these reports, their title and their specific role in answering the question (i.e. searched the agency documents, asked for information because they are in charge of the department, etc.) Please delete the example information and instructions row before submitting this chart in final form. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Agency Submitting Report	Name	Phone	Email	Department/Division	Title	Question	Role in Answering Question
Patients Compensation Fund, S.C.	Terry A. Coston	803-896-5291	terry.coston@pcf.sc.gov	Underwriting/Claims/Membership Services	Executive Director		PCFA (Patients' Compensation Fund Application) Document management system was developed by Team IA General Counsel for the PCF
Patients Compensation Fund, S.C.	Helen Hiser	843-576-2930	helen.hiser@mgclaw.com	McAngus Law Firm	Partner		