

Medical Indemnity Forum

23rd August



Renewal Cycles

Advice & Support, Claims and Clinical Risk Management

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Outline



- Renewal cycles
- Advice and support to members
- Claims management
- Clinical Risk management

Renewal Cycles



Members renew:

- Not on their birthdays
- Not on their date of admission to practice
- Not on the date they get a Medicare number

BUT TYPICALLY ANNUALLY ON 1/1 or 1/7.

Members typically pay:

- Membership fee
- Insurance fee plus ROCS, stamp duty and GST.

Advice & Support



Members ring a 24 x 7 hotline:

- For general medico-legal advice
- For general risk management advice
- For specific risk management advice
- To report an “Incident Likely”
- To report a “Claim”

Claims Management



The key steps when a claim is notified are:

- Underwriting sign off
- Reinsurer notification, if relevant
- Appointment of lawyers and meeting with member
- Liability review by independent experts and Medical Experts Committees, if appropriate
- Decision/resolution following investigation review of facts, issues and evidence.

Clinical Risk Management



The question is not whether MIIs should deliver CRM programs for members, but what is a reasonable investment to make in CRM.

Why CRM ?



- **Member service**
 - duty to members (& their patients) to help them:
 - a) Prevent avoidable adverse events (Risk Control)
 - b) Manage adverse events (Loss Control)

Why CRM?



- **Claims cost minimisation**
 - remediation of high risk/cost members
 - mitigation of high risk/cost issues
 - risk management education
(targeted from claims data)

Why CRM?



- Assist members meet PSS requirements
- Statutory reporting (eg HCLA in NSW)
- Provide data on claims and their causes
- Highlight “bread and butter” issues
 - systems failures (eg follow up)
 - communication issues (pre & post treatment)
 - patient selection (eg cosmetics, ophthalmology)
 - changes in medical law

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24th August



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QUESTIONS?