

Bulletin



Flying to new heights with our Qantas partnership

Earn Qantas Points on policies with MIGA

MIGA is excited to announce a new partnership with Qantas!

As an MIGA client, you will soon have the opportunity to earn Qantas Points on payment of your medical/professional indemnity insurance with MIGA. From 10 May 2017, if you renew or first insure with MIGA, for the new financial year beginning 1 July 2017, you can earn one Qantas Point for every eligible \$1 paid to MIGA¹.

MIGA is proud to have entered into an arrangement with one of Australia's most respected and recognised national brands. We know that many of you are frequent travellers for business and pleasure, so Qantas Points are a reward you can readily utilise. We believe it is a valuable way of recognising your loyalty and giving you something in return.

Points earned via MIGA's partnership will be in addition to Qantas Points you might already be earning by paying your insurance premium with a Qantas Points-earning credit card².

Qantas Points can be used for flights, upgrades, hotels, vouchers, shopping at the Qantas Store or Qantas epiQure, the Qantas food and wine store.

The key benefits offered by MIGA are:

- You will earn **one Qantas Point for every eligible \$1 paid** to MIGA on eligible insurance and, where applicable, MIGA membership¹
- From 30 June 2017, Qantas Points can be earned by clients renewing with MIGA and for those who first insure with MIGA
- The Qantas Points earned with MIGA will be credited to either your Qantas Business Rewards Program or Qantas Frequent Flyer Program account as soon as practicable after payment to MIGA and in any event within 30 days of payment
- MIGA clients can access complimentary membership to the Qantas Business Rewards Program or the Qantas Frequent Flyer Program.

To earn Qantas Points with MIGA you must be a Qantas Business Rewards or Qantas Frequent Flyer member when you renew or first insure. If you are not yet a member, you can join for free as an MIGA client.

The Qantas Business Rewards program offers ABN holders rewards and savings when flying for work and rewards on everyday business expenses with more than 40 partners.

April 2017

What do the new amendments to the Privacy Act mean for health practitioners?

Managing complaints
Changes in Victoria

Am I covered when working overseas?

The perils of silence
Communicating for safety

Your health matters
NMBA Nurse & Midwife Support Service



In our busy lives things can change quickly. When they do, think about who should be informed. If your medical practice has changed over the last 12 months it is important that you contact us, as the change may impact your insurance cover. In this Bulletin we outline some of the circumstances where you should notify us of changes to your practice.

Insurance renewals are fast approaching and if you are not currently paying your premium by direct debit, now is the ideal time to contact us and put the arrangement in place. With direct debit you can spread your payments over the year at no extra cost and of course with our new partnership earn Qantas Points on each payment!

Our Risk Management Team have created a new Conference Hypothetical for 2017, 'Who dunnit? – A poisonous pill'. Read on to find out more about this and one of our new risk management workshops.

We are here to help, so if you need assistance or advice please call us.

Jade Rowe
Client Relationship Officer

Flying to new heights with our Qantas partnership

Earn Qantas Points on policies with MIGA

(continued from front cover)

In readiness for your next insurance renewal, we will contact you soon with further information on the partnership and ask you to send us your Qantas Frequent Flyer number so you can earn points. If you are not already a member of the Qantas Business Rewards or Qantas Frequent Flyer program, you can join using the free join link included in our email and via MIGA's website.

Please watch your inbox for this communication in early May.

If you are thinking about insuring with MIGA, then our new partnership with Qantas is another great reason to sign up. We look forward to rewarding you at your next renewal or when you insure with MIGA!

Mandy Anderson
CEO and Managing Director



1 A business must be a Qantas Business Rewards Member and an individual must be a Qantas Frequent Flyer Member to earn Qantas Points with MIGA. Qantas Points are offered under the MIGA Qantas Rewards Program Terms and Conditions www.miga.com.au/qantas-tc. Qantas Business Rewards Members and Qantas Frequent Flyer Members will earn 1 Qantas Point for every eligible \$1 spent (GST exclusive) on payments to MIGA for Eligible Products. The amount paid to MIGA is calculated on the total of the base premium and membership fee (where applicable) and after any government rebate, subsidies and risk management discount, excluding charges such as GST, Stamp Duty and ROCs. Qantas Points will be credited to the relevant Qantas account after receipt of payment for an Eligible Product and in any event within 30 days of payment by You. Any claims in relation to Qantas Points under this offer must be made directly to MIGA by calling National Free Call 1800 777 156 or emailing clientservices@miga.com.au.

2 Card products referred to are not MIGA or Qantas products and not offered or issued by MIGA or Qantas but by the relevant card partners. The applicable card partner is the credit provider and credit licensee under the National Consumer Credit laws. Points are offered by the relevant card partner and partner reward program and can only be earned on eligible purchases.



Understand your risks and reduce the chance of a claim or complaint

Utilise the activities in our Risk Management Program to learn about risk in your practice. Understanding how risk can present in your practice is the first step in managing it! When you complete two education activities you also earn College CPD points and a 10% discount on next year's insurance premium¹.

To make it even easier, we have bundled some of the activities into one 10 Point Activity.

Doctors

10 POINTS

Complete 1 activity

MIGA Conference: Hypothetical & Workshop
Practice Review: Self-Assessment & Action Plan
 (3 to choose from)

Workshop & Action Plan

Ophthalmology Clinical Practice Review: Audit, Seminar & Action Plan

5 POINTS

Complete 2 activities

Workshop

Questionnaire

Doctors' Health Assessment
 (1 per Program Year)

External Accredited Activity
 (1 per Program Year)

Midwives

10 POINTS

Complete 1 activity

Workshop & Action Plan

Practice Review: Self-Assessment & Action Plan

5 POINTS

Complete 2 activities

Workshop

Questionnaire

External Accredited Activity
 (1 per Program Year)

Risk Management Conferences

Our next round of 8 Conferences around Australia will commence with Adelaide 1 on 12 August 2017 and will kick off a new Hypothetical session:

Who dunnit? A poisonous pill

Our interactive Claims Hypothetical moderated by Professor Guy Maddern, with the support of an expert panel, will de-mystify a coronial inquest through a mock court scenario. Participants will have access to Coroners Court representatives, legal assistance and the views of the lawyer for the family of the deceased. Join us as we deconstruct the Coronial process and see how the elements come together when medicine and the legal process collide.

Conference Session 2

Choose a Workshop (2 hours)

After the Hypothetical, conference participants have a choice of two new workshops:

The anatomy of a claim **NEW**

- Follow the pathway of a claim from notification of the incident, the collection of evidence, the defence of allegations and the judicial process
- Unravel the complexities of the adversarial process and expose the critical stages that can influence the ultimate outcome.

The perils of silence - Communicating for safety **NEW**

- Communicating effectively with patients and colleagues is just as important as providing the best clinical treatment
- Explore the role of poor communication in medical errors and discuss strategies for empowering practitioners to communicate for the safety of the patient.



For more details visit our new and exciting website

¹ The Terms and Conditions for the premium discount allocation can be found on the website or in the Risk Management Booklet 2017/2018 distributed at renewal around May 2016.

Liz Fitzgerald
 National Manager – Risk Services



Case Study

What do the new amendments to the Privacy Act mean for health practitioners?



Key issue

The recently passed Privacy Amendment (Notifiable Data breaches) Bill 2016 is expected to come into effect later this year.

Key takeaway

As private health service providers are regulated under the Privacy Act, the Amendment will require providers to notify the Privacy Commissioner of data breaches in certain circumstances and you should be aware of your obligations.

Belinda Cullinan

Solicitor – Claims & Legal Services

In light of the increasing risk of security breaches associated with technological advances, the Federal Government introduced the Privacy Amendment (Notifiable Data breaches) Bill 2016 to Parliament in October last year. On 13 February 2017 the Senate passed the Bill and it is expected to come into effect later this year.

The Bill amends the Privacy Act 1988 (Cth) to introduce a long-anticipated mandatory data breach notification scheme.

All 'APP entities' that are regulated by the Privacy Act are required to provide notice to the Office of the Australian Information Commissioner and affected individuals of certain data breaches that are likely to result in serious harm.

Who needs to comply?

'APP Entities' that are regulated under the Privacy Act must comply. Generally, these entities include:

- all private sector and not-for-profit organisations with an annual turnover of more than A\$3 million;
- most Australian and Norfolk Island Government agencies;
- all private health service providers; and
- some small businesses;
- credit reporting bodies and credit providers;

who handle, use, and manage personal information and who are required to keep that information secure under the *Privacy Act*.

All private health service providers are affected by this.



When do you need to notify?

An 'eligible' data breach occurs if (1) there is unauthorised access to, unauthorised disclosure of, or loss of personal information held by an entity; and (2) a reasonable person would conclude that the access, disclosure, or loss is likely to result in **serious harm** to any of the individuals to whom the information relates.

The Bill's explanatory memorandum confirms that serious harm could include serious physical, psychological, emotional, economic, reputational, identity theft and financial harm, as well as other forms of serious harm that a reasonable person would identify as a possible outcome of the data breach.

The test for determining whether serious harm has occurred is an objective one and an affected person suffering personal distress on its own would not be considered 'serious harm'.

We will gain a better understanding of the Privacy Commissioner's interpretation of 'serious harm' as the mandatory breach obligation becomes operational.

The Privacy Commissioner (on its own motion or application) has a public interest power to exempt an entity from the obligation to formally notify the Commissioner or affected individuals or to specify a date by which affected individuals are to be notified.

How do you notify?

If there is an eligible data breach the organisation must carry out an investigation within 30 days. The Privacy Commissioner and all affected individuals must be informed of the eligible data breach as soon as reasonably practicable. In notifying, the APP entity must advise:

- its identity and contact details;
- a description of the eligible data breach believed to have occurred;
- the kind of information which has been disclosed;
- recommendations as to the steps that the affected individual should take in response to the data breach.

Penalties

If an APP entity fails to comply with the notification requirements, the Commissioner may conduct investigations, make determinations, seek enforceable undertakings, order compensation and /or impose significant fines on organisations and individuals.

Are you covered?

Subject to the terms and conditions of the medical indemnity insurance policy, MIGA provides cover to doctors, midwives and corporate health practices for legal liability arising from a privacy breach. It also provides cover for legal expenses associated with a complaint, investigation or proceeding by the OAIC in connection with any matter relating to privacy or confidentiality pursuant to the Privacy Act. Intentional or reckless acts giving rise to a breach are not covered under the relevant policies.

If you have a query about how to treat a privacy breach, please contact the Claims & Legal Services Department for further advice.



Case Study

Managing complaints Changes in Victoria



Key issue

A new Health Complaints Act 2016 was introduced in Victoria and began operation on 1 February 2017.

Key takeaway

Complaints are now referred to the Health Complaints Commissioner who will work closely with AHPRA. The Commissioner has some new and important powers which Doctors in Victoria should make themselves aware of. The legislation sets out a Complaint Handling Standard which provides useful tips for health practitioners.

Anthony Mennillo

Manager – Claims & Legal Services

It is often said that a practitioner should consider themselves very fortunate, rather than particularly skilled, if they go through their career without receiving a complaint of some sort. A complaint can be made to the practitioner directly, to the practice, to AHPRA or to the local health care complaints entity.

While this may sound deflating, data from AHPRA and the Health Complaints Entities indicates that most complaints are closed with no further action against the practitioner.

Unfortunately there is very little consistency in the management of complaints in the jurisdictions of Australia, with each having a slightly different procedure.

The Victorian complaints process has recently changed and provides a good example.

A new *Health Complaints Act 2016* was introduced in Victoria and began operation on 1 February 2017.

Previously complaints were referred to the Health Services Commissioner but that entity has been replaced by the Health Complaints Commissioner. One of the prime reasons for the change was to provide a much broader definition of health service which captures a wider range of non-registered providers that the Health Services Commissioner was previously unable to deal with.

The new legislation includes a Code of Conduct for non-registered practitioners or those practising outside of their area of registration, which provides minimum standards for those practitioners.

One of the Commissioner's new and important powers is to issue an interim and/or final prohibition order prohibiting a general health

service from providing all or part of its service. Such an order could prohibit a health service provider from providing a service for a period of up to 12 weeks while an investigation takes place. Before making such an order, the Commissioner must believe on reasonable grounds that the provider has contravened a code of conduct, been convicted of an offence or that it is necessary in the interest of life, health, safety or welfare of the public to make such an order.

The new legislation also sets out a Complaint Handling Standard which all health providers must comply with. A copy of the Complaint Handling Standard which all practitioners in Victoria should become familiar with, can be found at <http://www.hcc.vic.gov.au/healthcare-providers/handling-complaints>.

This resource provides useful tips for health practitioners across the country for managing complaints.

The Health Complaints Commissioner will still work closely with AHPRA to identify the most appropriate body to investigate a complaint. Generally, any complaint regarding the professional competency of a medical practitioner will be referred to AHPRA for assessment and/or investigation.

If you are the subject of a complaint, it is very important to be proactive in managing it. Often that will mean contacting one of the solicitors in the Claims and Legal Services team to discuss the complaint and the best way to respond. This is part of our core business and we are here to help.

Our records show that every day we receive, from our clients notification of a complaint. Our team has extensive experience in assisting practitioners with complaints and are only too happy to assist.

Make your renewal payment by direct debit at no extra cost!



With MIGA you have the convenience of paying your insurance premium by monthly or annual direct debit payments from your bank account or credit card at no extra cost!

This arrangement is very convenient and removes the worry of paying on time and will make it easier to finalise your annual renewal or new insurance with MIGA.

How you benefit

- ✓ Spread the cost of your insurance across the year, smoothing your cash flow
- ✓ No additional costs or charges for payment by the month
- ✓ Earn points from your credit card reward scheme if you pay by credit card
- ✓ Once in place your insurance can be automatically renewed each year, and you won't have to worry about late payments or risking cancellation of your cover.

Quick and easy set-up over the phone

If your renewal is coming up, it's easy to set up a direct debit arrangement over the telephone. Simply call your friendly Client Services Officer on 1800 777 156 and they will take your details and put the arrangement in place ready for your next renewal.

Carolyn Norris National Manager – Client Services

The perils of silence

Communicating for safety

Doctor Taupe is writing up a script for anticoagulation, observed by a trainee. The trainee pulls out his smartphone and confers with his medication app. He realises that the dosage being prescribed is too high. Doctor Taupe is notoriously moody. Just that morning he ripped into a nurse for raising a concern. The trainee starts to second guess whether Dr Taupe is wrong or his app is wrong. "It's not my concern, is it? I'm just the trainee."

Betty the receptionist has asked Dr Jeff to ask Dr Robert if he has called the patient about their abnormal results. "Can you do it? I don't think he has and I've already raised it twice. He's going to be really snappy if I ask again. Yes, I know you don't want to tackle him either, but...."

"Well, Your Honour, while I fully appreciate I also have a duty of care to the patient as her surgeon, Dr Davis was the anaesthetist. While I did think at the time that Dr Davis had placed the patient's arm in a position that may have rendered the ulnar nerve vulnerable to injury it was not my decision to make. Dr Davis had made it clear on a number of occasions that he made the decisions in relation to the procedures within his area of responsibility."

Medical errors can and do occur when medical professionals are not playing nicely in the sandpit.

The new Communication workshop explores difficult clinical interactions and how best to respond to them. Real life scenarios are worked through and strategies for communicating for safety are discussed including:

- How do I communicate the tough message respectfully?
- Dealing with things going wrong starts long before anything goes wrong
- Becoming attuned to non-verbal vibes you may be sending that inhibit others speaking out
- Speaking out can be really hard – it needs practice
- Don't just use graded assertiveness – create an environment around you that allows (encourages) others to use it on you
- How do I de-escalate verbal aggression? Does a raised hand work?

Join our medical presenters for a lively discussion on the right and wrong ways to tackle the difficult conversations. Book online in the Client Area of the website www.miga.com.au

Keryn Hendrick
Risk Education Manager



Claims against practice companies are not limited to direct patient claims

Individuals who own or part own companies which in turn own and control medical or healthcare practices should always ensure that the company is adequately protected against patient claims as they can be made against companies in their own right.

Whilst claims are generally made directly against practices (entities/companies) by patients there is growing evidence of claims against practices being lodged by third parties.

A couple of examples of third party claims against practices are:

1. The medical indemnity insurer of a doctor dealing with a patient claim may take the view that there is some negligence on the part of the practice e.g. the breakdown of procedural matters set by the practice, actions of the staff (vicarious liability which attaches to the employer) and that this has contributed to the patient outcome
2. The medical indemnity insurer of another practice could take the same view as in 1) above where, although a claim may be directed against their client – say a Radiology practice, the insurer handling the claim may consider there has been some miscommunication on the part of a GP practice which has contributed to the patient outcome.

These are only a couple of examples where claims against practices do not necessarily emanate directly from patients.

The reality is that a practice which is owned and controlled by individuals within a structured entity is exposed to medical indemnity claims should the entity not be adequately insured in its own right.

If you own, or part own a medical or healthcare business we can provide you with advice and assist you to ensure your business entity is adequately protected. Our Healthcare policy for medical businesses is designed to provide exactly this type of protection and with flexible cover options can be tailored to suit the needs of your business.

Call us for advice particular to your circumstances.

Trent Woodward
Business Development Manager - Healthcare

Protection for you and your practice

MIGA can offer you protection for both you and your medical business.

It is important to have the right protection in place for your practice or medical business and it should reflect your unique needs.

MIGA can offer:

- ✓ Individual or packaged arrangements covering the medical indemnity liability of your doctors
- ✓ Professional indemnity liability cover for your medical business
- ✓ MIGA Plus Business Insurance covering your business for burglary, damage, public liability, business interruption and more.

Information is available on our website, but we encourage you to talk to us about your situation and unique insurance needs. Call us on 1800 777 156.



Have your circumstances changed?

As your career evolves your practice circumstances can change frequently, particularly in the early stages of your career. Whether you are entering your initial fellowship training program, heading into private practice, moving interstate or retiring, your insurance with MIGA provides you with broad coverage. There are however some instances where changes need to be notified to MIGA to ensure that you remain appropriately covered.

Commencing training as a GP Registrar in private practice

Have you recently commenced training as a GP Registrar in private practice? If so, you need to contact MIGA to check your level of cover. Doctors covered under our Salaried Medical Officer in Training category are not covered for work as a GP Registrar in a private practice, but we offer GP Registrar categories designed specifically for doctors undertaking GP Registrar training in private practice.

Completing a specialist training program

Have you recently completed a specialist training program and commenced work as a specialist? If so, you may need to contact MIGA to check your level of cover. We offer a wide variety of categories for both public sector and privately practising specialists and we can assist you with amending your cover to the best category to suit your needs as a specialist.

Commencing private practice

Have you been practising in the public sector and recently commenced private practice? If so, you may need to contact MIGA to check your level of cover. Many of our Hospital Doctor categories offer cover for limited private practice, however, depending on the amount of your private practice billings you may require a change in your level of private practice Gross Income or category of practice. We can assist you with determining if any changes are needed.

Moving interstate or undertaking additional practice interstate

Have you recently moved interstate or commenced any additional practice in another state? If so, you may need to contact MIGA to check your level of cover. Your principal state, or states, of practice are recorded on your policy and appear on your Certificate of Insurance. If you are now practising in another state, be sure to let us know so that we can update your principal state of practice and also update your contact details. If you are undertaking frequent work in more than one state, we can assist you with adding additional states of practice to your policy.

Ceasing private practice

Have you recently ceased private practice and commenced working in the public sector? If so, you may need to contact MIGA to check your level of cover. We offer a range of Hospital Doctor categories that may be better suited to your needs. If you are no longer undertaking any private practice, we can assist you determine if any changes are required to your policy.

Going on maternity leave

Have you recently commenced maternity leave, or intending to commence maternity leave? If so, you may need to contact MIGA to check your level of cover. We can assist you with temporarily suspending your policy whilst you are not practising and arranging Run-off cover for any claims that may be made against you whilst you are on leave and not practising. The Federal Government provides Run-off cover free of charge to doctors on maternity leave under their Run-Off Cover Scheme (ROCS) policy and we can help you put this in place.

Retiring from medical practice

Have you recently retired from either private practice or all medical practice, or are intending to retire either private practice or all medical practice? If so, you may need to contact MIGA to check your level of cover. If you have retired from private practice, we can assist you with amending your cover to a more suitable category. If you have retired from all medical practice, we can assist you with retiring your policy and arranging Run-off cover for any claims that may be made against you after you have retired. The Federal Government provides Run-off cover free of charge to doctors who retire from either private practice or all medical practice over the age of 65 and we can put this in place for you.

Change in contact details

Have you moved house recently or changed your email address? Be sure to let us know so that we can update your file and ensure that we can continue to provide you with up to date information on MIGA and your Medical Indemnity Insurance policy.

If you need to change your details at any time or are not sure if you are appropriately covered, you can call MIGA on 1800 777 156 and speak with our friendly Client Services Officers or you can send an email to clientservices@miga.com.au.

Carolyn Norris

National Manager – Client Services



Am I covered when working as a doctor overseas?

For many doctors at some point in their career, an opportunity arises for them to work overseas either to train in their field, join a medical aid mission, or as part of their extra-curricular activities such as accompanying a group or sporting team.

To provide our clients with maximum flexibility MIGA's medical indemnity insurance policy automatically covers doctors for any work they undertake within their practice category outside the Commonwealth of Australia, provided:

1. The period worked outside the Commonwealth of Australia does not exceed 120 days during the term of the insurance,
2. Work is not conducted in:
 - i. the United States of America, or
 - ii. a jurisdiction to which the laws of the United States of America apply, and
3. Proceedings are not commenced or maintained in the United States of America.

Cover is also provided for Volunteer Practice, including in relation to aid programs or disaster response work.

So provided the work you will be undertaking overseas meets these criteria, there is no need for you to notify MIGA of your intention to work overseas.

If you wish to work outside the Commonwealth of Australia for a period longer than 120 days, we can arrange this cover at an additional cost.

It is important to note that cover is only provided for work for which you are insured (i.e. your category of insurance e.g. general surgery) and, if there is a requirement to be registered or licensed to practise in the relevant jurisdiction, you will need to be appropriately registered or licensed in order to be covered.

Overseas practice can be beneficial in so many ways and we are very pleased we can readily support you. If you have any questions about cover for overseas practice, please contact your Client Services Officer and they will be happy to assist.

Maurie Corsini

National Manager – Underwriting

Your health matters


NMBA - Nurse & Midwife Support Service now available

In early March 2017 the Nursing and Midwifery Board launched the first national support services for Nurses and Midwives.

Nurses and midwives now have 24 hour access to confidential health support anywhere in Australia. The new service, which is a Nursing and Midwifery Board of Australia (NMBA) initiative, is run independently by *Turning Point*, a leading addiction treatment, research and education organisation in Australia.

Nurse & Midwife Support will offer a round the clock telephone service as well as online support, providing advice and referral on health issues for Australia's nurses, midwives and nursing and midwifery students. The service will provide education and support on health impairment as defined in the National Law for nurses, midwives, students, education providers and employers.

The website has been designed specifically for nurses and midwives so that you can easily find health services and information online, such as:

 <p>Tips for staying healthy</p> <ul style="list-style-type: none">• Mindfulness• Sleep• Exercise• Diet	 <p>How to ask for help</p> <ul style="list-style-type: none">• 24 hour telephone support service• Email support• Referral support services	 <p>Advice for managers and employers</p>
--	---	---


The initiative will serve an important role in helping midwives to stay healthy. It will help to ensure that you are supported to practice safely so that you can continue to support the healthcare needs of your clients and patients.

To access *Nurse & Midwife Support*, call **1800 667 877** or visit www.nmsupport.org.au.

MIGA also provides 24/7 assistance should you require urgent advice about a potential incident, complaint or claim. Having support and reassurance at the time you need it helps alleviate stress or anxiety related to client care. We are here to help. Please call us on 1800 839 280.

Liz Fitzgerald

National Manager – Risk Services




Secrets of the claim files... Last chance to attend!

If you are a Practice owner or manager, don't miss your last chance to attend our 'Secrets of the claim files' breakfast exploring common practice risks through our claim files. The circumstances in which claims arise can defy belief, but they also offer learnings that will be of benefit to your practice.

Only two sessions remaining:

Adelaide Thursday, 18 May 2017
Online Thursday, 22 June 2017

It's only \$25.00 to attend the Adelaide session and free to attend online.

 **For more information and to book visit miga.eventbrite.com**

Always the first choice for your Medical Indemnity Insurance and protection



National General Enquiries and Client Service

Free Call 1800 777 156
Facsimile 1800 839 284

National Claims and Legal Services

(Office hrs and 24hr emergency legal support)

Free Call 1800 839 280
Facsimile 1800 839 281

miga@miga.com.au
www.miga.com.au

Letters to the Editor

We encourage clients to contact us with their views by email to mandy.anderson@miga.com.au or follow the links on our website at miga.com.au.

Note: Insurance policies available through MIGA are issued by Medical Insurance Australia Pty Ltd (AFSL 255906). The terms and conditions of the insurance provided by Medical Insurance Australia Pty Ltd are fully contained in the Policy Wording and any applicable endorsements. This document does not form part of the Policy Wording. MIGA has not taken into account your personal objectives or situation. Before you make any decisions about our policies, please read our Product Disclosure Statement and consider your own needs. Call MIGA for a copy or access the document via our website at www.miga.com.au.

Information in this Bulletin does not constitute legal or professional advice. Call us if you need advice on any of the issues covered in this Bulletin.