

Bulletin



My Health Record and eHealth Practice Incentive Program

Practice owners and practice managers will be aware of the Federal Government's My Health Record System which replaces the Personally Controlled Electronic Health Record (PCEHR), a national digital health record system. This is a health record system owned and controlled by the patient which registered health providers can access. It is important for practitioners to note that it does not replace the medical records of the health service provider.

The day to day use of this new system may bring with it heightened privacy concerns particularly in relation to potential breaches of privacy by doctors and/or practice staff.

Significant breaches of privacy can lead to legal action. Your cover under MIGA's medical indemnity

insurance or MIGA's Professional Indemnity Insurance for Healthcare Companies and practices automatically provides cover in relation to allegations of privacy breach. You can rest assured that MIGA is here to protect you. Our solicitors can provide you with advice and help you to proactively manage any breach that may occur in your practice.

If your practice doesn't have its own cover, you may be exposed if your staff breach a patient's privacy. If you would like further advice or wish to consider protecting your practice and staff, please call us.

Mandy Anderson
CEO and Managing Director

June 2016

Case studies

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Applications now open!

MIGA's new Direct Debit

Don't forget this is now available – making your renewal with MIGA even easier

- No additional costs or charges for annual or monthly payments, even if you pay by credit card
- Earn points if you pay with your credit card (depending on your credit card reward scheme)
- Spread the cost of your insurance across the year, smoothing cash flow
- Automatic renewal – arranging a Direct Debit ensures your insurance is renewed annually with no risk of it lapsing.

Refer to your renewal information or call us on 1800 777 156.



For our many clients currently in the process of renewing their insurance with MIGA, we would like to remind you of the new Direct Debit payment option. It is a great way to streamline your future renewals, with no additional fees or charges applying to direct debit arrangements. If you pay by credit card you can still earn points on your credit card reward scheme. It's the ideal 'set and forget' payment option, designed to make your life easier.

Details have been provided with your renewal documentation, but if you have any questions or require assistance in relation to the Direct Debit payment option or your renewal generally, please don't hesitate to contact your Client Services Officer on 1800 777 156. We are here to help.

Madison Lovelady
Client Services Officer

MIGA advocacy

Representing your interests

MIGA has been advocating on a number of industry issues in the interests of our clients.

Review of the Assisted Reproductive Treatment Act – South Australia

We supported work towards a nationally consistent regulatory regime, raised concerns about how potential 'screening' procedures could realistically work in practice, argued against comparatively harsh financial penalties for 'lesser' breaches of the regime, and supported establishing an appropriate advisory body to guide regulators and practitioners involved in ART on its complex clinical, legal and ethical issues.

Reform of the Coronial system – New South Wales

We have had significant involvement in the development of procedures to make investigations and inquests work more efficiently and fairly. We are also part of the NSW Government review of the Coroners Act, working with the NSW Justice Department on potential areas of Coronial reform.

Advance Care Directives and Root Cause Analysis Investigations – New South Wales

We have given feedback to the NSW Department of Health and the NSW Clinical Excellence Commission on their work in these areas, drawing on our national experience to assist in developing documents and information and emphasising the need for further education and training.

Draft medicinal cannabis prescription regime – Queensland

We have made submissions focusing on the practical issues which might arise if the proposals become law. We raised concerns about the assessment process for prospective prescribers and patients. We also emphasised the need for review of the scheme in light of experience in other Australian states and territories, and clear guidance and education of the profession, patients and the public about how the scheme would work.

Use of electronic referrals – Victoria

We have provided input on medico-legal aspects of the Victorian Government's pilot projects in its public health system. We will be monitoring the implementation, particularly the interaction with practitioners referring patients to those hospitals.

Other work in progress or already undertaken includes:

- Federal Senate's Inquiry into the Medical Complaints Process - with the upcoming Federal Election this Inquiry has been terminated. However, MIGA continues to take up opportunities to engage with regulators over how the complaints process affects our clients
- Medical Board of Australia's consultations on registration standards
- NSW Law Reform Commission's review of the scope to sue insurers directly.

If you are interested in these or other medico-legal or insurance industry issues, and have a view you would like to share, we encourage you to contact us.

Timothy Bowen

Senior Solicitor – Advocacy, Claims & Education

Why cover for legal expenses is important

From 1 July 2016 MIGA has increased the cover for legal expenses for doctors to \$1,500,000. This is very important protection for you, and here's why.

When doctors think of medical indemnity insurance their first thought is compensation claims and the large sums that can be awarded to patients.

However for many of our members their reliance on their insurance cover doesn't just relate to compensation claims, it extends to the legal expenses cover needed to defend themselves in relation to a complaint or disciplinary action. This draws on the legal expenses cover provided under your policy.

Whilst this cover may not be your first thought in considering your insurance needs, our claims experience shows that it is becoming increasingly important for all of our members.

Complaints to Medical Boards, Healthcare Complaints entities, coronial investigations, Medicare audits and employment disputes have been on the rise. We have recent experience of two legal expense only matters where the legal costs have reached the current policy limit of \$1,000,000. The legal and expert fees in both cases were astronomical and the circumstances of the cases may surprise and dismay you.

Both cases illustrate the unpredictable nature of investigation and legal action, what can initially seem a simple case can grow well beyond those initial expectations.

Case 1 Snowballing legal proceedings

This case surrounded our representation of a doctor who was initially involved in a Coronial investigation. The Coronial Inquest was then followed by disciplinary action undertaken by the employer, and also an investigation by AHPRA. The defence and support of our member, who was under attack from all sides, was ultimately successful. The costs in this case reached the limit of the insurance cover. The progression of legal action in this case surprised even our experienced and battle-hardened solicitor.

Case 2 Searching for a needle in a haystack

This case was a Medicare investigation into a practitioner's management of 400 patients. The key issue was around billings and the justification of Medicare item claims. The investigation involved very detailed analysis of the 400 patient files – a laborious and time-consuming process which in itself incurred significant legal costs. Regrettably enquiry did not end there with the investigation escalated to a disciplinary matter questioning whether the practitioner was "practising to acceptable standards". The disciplinary matter went to hearing and then appeal.

MIGA offering you the best protection

Our role as a specialist insurer for our doctor members is to use our knowledge, particularly in relation to claims outcomes to ensure that we provide the protection you need. We are increasing our policy limit this year because we know our members need it.

As always, if you are involved in an incident, or concerned that a matter may be brewing, please contact us for assistance as we can provide advice and assist you to manage it proactively. Proactive management can help to prevent matters escalating. You can call us 24/7 for urgent medico-legal assistance on 1800 839 280.

In the meantime you can rest assured that your insurance cover is evolving with the medical landscape to provide the protection you need.

Maurie Corsini

National Manager – Underwriting



MIGA Plus Business Insurance

Now with MIGA Plus Business Insurance, MIGA can offer you insurance covers protecting both you and your medical business.

Here is how we can help insure your risks:



Healthcare companies insurance

This covers the professional indemnity liability of your medical practice or business. This type of insurance covers medical indemnity claims against the practice (i.e. privacy breaches, breakdown in systems or processes which contribute to an adverse outcome for a patient).



MIGA Plus Business Insurance

This covers the day to day insurance risks of running your business (i.e. damage to building, contents and stock, public liability, burglary, business interruption and tax audit).



Medical Indemnity Insurance for the doctors working in your practice

This covers individual doctors for the cost of legal expenses and compensation associated with complaints or claims made by their patients.

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 and the professional indemnity liability of your business. The new MIGA Plus Business Insurance product also enables you to tailor your business covers to suit the specific needs of your practice.

More information is available on our website, but we encourage you to contact us to discuss your situation and insurance needs.

We have been protecting doctors for over 115 years, putting our expertise to work for you and your business. Simply call us on 1800 777 156.

Neil Rankine

Business Development Manager – Healthcare Companies



Case Study

Testing times Let the doctor decide



Key issue

Balancing your duty as a practitioner with the wishes of your patient can be difficult.

Key takeaway

Working with the patient and/or the complimentary health provider it is your responsibility to access the clinical need for tests or treatment and if not indicated you should not proceed.

Anthony Mennillo

Manager – Claims & Legal Services

You see a patient, conduct an examination, order an investigation, make a diagnosis and prescribe medication. Sounds straightforward but we know there are areas of vulnerability in this process where something can go wrong and a patient can suffer an adverse outcome.

Add another layer of complexity to this process - where you have no involvement in the assessment of the individual and you are asked to order an investigation or prescribe treatment not knowing much about the test and/or treatment?

Add a further layer of complexity – the requesting party is not a health practitioner and the information comes second hand via your patient.

Adding these layers of complexity equates to increasing medico-legal risk. We have received enquiries from practitioners concerned about their medico-legal exposure in this increasingly common scenario.

For example, a patient consulted their general practitioner asking him to run a series of investigations at the request of a naturopath they had recently seen. Until that time the general practitioner was not aware the patient had been seeing a naturopath.

In another example a general practitioner who was no longer registered with the Medical Board of Australia intended to offer complementary health services, such that they would continue to prescribe a variety of hormone treatments and ask other registered practitioners to order pathology tests and prescribe medication.

Competing considerations

It may be tempting to please your patient and order a test or prescribe medication in these

circumstances. Your patient probably believes the request is simple (i.e. to order a test or secure a prescription for something that they have already agreed to with a third party). However it is not so simple.

The Medical Board's "Good Medical Practice, A Code of Conduct for Doctors in Australia" requires every medical practitioner to consider the benefit and harm to their patient in all clinical management decisions. That includes ordering tests and prescribing medications. Furthermore medical practitioners are required to give priority to investigating and treating patients on the basis of "clinical need" and effectiveness of the proposed investigations or treatment.

It is difficult to give due consideration to these requirements when you know little about the investigation and/or treatment.

There is a potential imbalance between the patient's request for what may be an uncontroversial issue in their mind with the doctor's own concerns about the merit of the treatment proposed by a non-health practitioner.

Recently, the Royal Australian College of General Practitioners (RACGP) issued a statement recommending their members refuse patient test requests from naturopathic practitioners. While the RACGP recognised the harm this may cause to the doctor/patient relationship ordering inappropriate pathology or medical imaging carries significant medico-legal risk including litigation.

The RACGP's position is consistent with the Medical Board's Code of Conduct which requires general practitioners to only order medical imaging and pathology tests that are clinically indicated.

Achieving the right balance

The patient's wellbeing must be the primary consideration in determining whether to order a particular test or prescribe treatment. If there is

any doubt in the practitioner's mind we recommend that caution be exercised. It may be that a further discussion with the patient and/or the complementary health provider may elicit further information that allows the practitioner to order a test or prescribe medication. It is for the practitioner to decide whether to have those discussions or not.

The Medical Board also respects the right of practitioners not to provide treatment in certain circumstances. The Code of Conduct requires practitioners to be aware of their right to "not provide or directly participate in treatments to which [they] consciously object, informing [their] patients and, if relevant, colleagues of [their] objection and not using [the] objection to impede access to treatments that are legal".

Where it can go wrong

In the event of an adverse outcome it is not a defence to state that you simply ordered a test or prescribed medication at the request of a third party. It is your responsibility to assess the clinical need and if you are not satisfied that it is in the patient's best interests to have the test carried out or treatment prescribed then you should not do so.

If a practitioner orders an investigation it is their legally recognised duty to take the necessary action based on the test result (including following up the patient if required). If the practitioner does not know the reason for the test and is unable to properly interpret the result this may lead to an error, an adverse outcome for a patient and adverse consequences for you.

Ordering a test which, in the practitioner's mind, is not clinically relevant also has potential adverse implications if any Medicare benefits are paid for that test.

The RACGP has a number of resources available to assist practitioners to communicate with their patients and complementary alternative medicine therapists on this sensitive topic which can be found at: www.racgp.org.au/support/policies/clinical-and-practice-management/appropriate-diagnostic-testing/.

If you require any further advice please call the Claims and Legal Services Team on 1800 839 280.





Case Study

Maintaining your own health

Make it a priority



Key issue

Your health and well-being can have a direct impact on the quality of care you provide your patients.

Key takeaway

Proactively managing your own health with the assistance of an independent GP benefits you, your family and your patients. Review our Doctors' Health e-book.

Marie-Clare Elder

Senior Solicitor – Claims & Legal Services

The Medical Council of NSW has recently reminded medical practitioners of the importance of engaging and ensuring regular visits to a General Practitioner following a recent disciplinary decision¹.

The Council frequently receives complaints from patients and others where it is suspected that a practitioner is suffering from cognitive impairment. An undiagnosed impairment at its extreme has the potential to result in a catastrophic outcome for a patient and could be career ending, as it was in this case².

A missed diagnosis

The complaint against the doctor followed the tragic death of an eight year old child on 28 March 2009. The doctor, a 71 year old general practitioner at the time, was the first to assess the young boy and failed to diagnose appendicitis. Although another general practitioner made the correct diagnosis when he re-presented a few days later, a series of avoidable failures in two hospitals resulted in his death³.

The prosecution

The HCCC prosecuted the general practitioner before a Professional Standards Committee (the PSC). During questioning, the PSC had concerns about the doctor's presentation and the manner in which he was answering the questions put to him. The inquiry was adjourned so the doctor could be assessed for possible impairment and consideration of his capacity to practise medicine⁴. As there were concerns about the risk to the public, the doctor's registration was suspended in the meantime.

The doctor was assessed by a psychiatrist who concluded that he had a "significant cognitive impairment". Before the New South Wales Civil and Administrative Tribunal, the HCCC alleged that the doctor was impaired, that he lacked the physical or mental capacity to practise as a medical practitioner and further alleged that the doctor was guilty of unsatisfactory professional conduct as he was self-prescribing and failed to keep appropriate medical records.

On the first day of the hearing, the doctor conceded that the complaints were proven and consented to his name being removed from the register⁵. Those orders were made by the Tribunal and the doctor's registration was cancelled.

Doctors' Health

In its decision, the Tribunal noted that the doctor admitted unsatisfactory professional conduct as he self-prescribed medication contrary to the Medical Council Policy guidelines on self-treatment and treating family members.

The Tribunal highlighted that the first principle in the guideline is:

*'All medical practitioners should have their own, Independent Medical Practitioner'*⁶

The Medical Council of NSW explains that medical practitioners are not immune to the reality that one's health and cognitive ability declines with age. Objective independent assessment ensures early detection and management of health concerns whether they be physical or cognitive. This allows the practitioner to manage his or her exit from, or modification of practice before it becomes unsafe for patients or the practitioner. This can prevent harm and avoid extremely stressful complaints and/or disciplinary action as demonstrated in this case.

Risk management tips

At MIGA, we regularly assist practitioners who are pro-actively disengaging from practice or when complaints have been made questioning a practitioner's ability to practise safely.

To avoid mandatory notifications by colleagues or complaints to the regulator we encourage the following:

- Consult an independent general practitioner at least annually
- Maintain regular specialist appointments if required
- Have frank and open discussions about your ability to practise with your treating practitioners
- Do not self-prescribe or prescribe to friends and family
- Have a plan in place for winding down your practice.

MIGA Doctors' Health e-book

MIGA has recently launched a Doctors' Health e-book which covers some of the key issues impacting doctors and their management of their own health. Incorporating videos and audio files, we hope the content is engaging and encourages you to consider your circumstances and take steps to make your own health a priority.

- 1 Health Care Complaints Commission v Khan [2016] NSWCATOD 32. A copy of the decision can be found here: <https://www.caselaw.nsw.gov.au/decision/56f0b0a1e4b0e71e17f5085a#>
- 2 Medical Council of NSW April 2016 Newsletter. A copy of the newsletter can be found here: <http://medicalcouncil.createsend1.com/t/ViewEmail/j/4BDA6B96AE6AECE9>
- 3 Findings of New South Wales Deputy State Coroner Mitchell in Jacob Belim of 15 August 2011 (0839/09)
- 4 HCCC v Khan above N1 at [5]
- 5 HCCC v Khan above N1 at [11] and [12]
- 6 Medical Council of NSW Guideline for self-treatment and treating family members 02 December 2014 97/008. Similar provisions exist in the Medical Board of Australia, Good Medical Practice: A Code of Conduct for Doctors in Australia, March 2014 <http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx>
- 7 HCCC v Khan above N1 at [76]

MIGA's Boards

Welcome to new directors

I am pleased to introduce and welcome two new directors to the Board of Medical Insurance Australia Pty Ltd, Ms Robyn Bateup and Ms Joan Fitzpatrick.



Ms Robyn Bateup



Ms Joan Fitzpatrick

Robyn joined the Board from 1 October 2015 and has over 23 years' experience in providing actuarial advice to the general insurance industry. A qualified actuary, Robyn resides in Victoria and has extensive knowledge of medical indemnity insurance in Australia and brings with her valuable awareness and experience in this field.

Joan joined the Board from 1 June 2016 and is a professional non-executive director with 35 years of commercial business experience. She has more than 20 years of director experience within the corporate, government and not for profit sectors. Also residing in Victoria, Joan has a background in law and brings with her a great deal of knowledge and experience to MIGA.

We welcome Robyn and Joan and look forward to their contribution to the Group in the years ahead.

More information about Joan and Robyn is available on our website.



Board awards

We are very pleased to acknowledge two members of our Boards who recently received industry awards.

Associate Professor Peter Cundy was awarded in person at the annual AMA Gala Charity Ball the 2016 AMA (SA) Medical Educator of the Year Award.

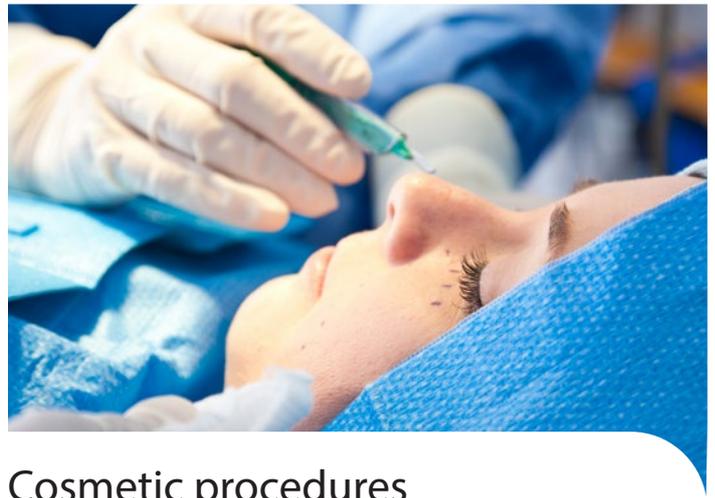
Peter has for many years combined busy private practice and public hospital consultancy with his dedication to teaching his orthopaedic specialty. He has held senior positions, examined for his college and contributes through the editorial boards of several major peer-reviewed journals in Europe and the United States. Through his contribution to the education of medical students, residents and surgical trainees and the sharing of his knowledge, he continues to build a lasting legacy. Peter is highly respected and we all enjoy working with him immensely.

Ms Juliet Brown was recently awarded the 2016 Trustee of the Year Award by the Australian Institute of Superannuation Trustees (AIST).

Juliet, who holds the positions of Independent Chair on the Board of Statewide Super and is a member of their Investment Committee, was presented with this highly regarded award which recognises superannuation trustee excellence by industry peers.

On behalf of members and clients we take this opportunity to congratulate Peter and Juliet on their awards and wish them both every success for the future.

Dr Martin Altmann
Chairman



Cosmetic procedures

New guidelines

Recently, the Medical Board of Australia issued new guidelines for cosmetic medical and surgical procedures that will take effect on 1 October 2016.

The guidelines apply to all medical practitioners, including specialist plastic surgeons, cosmetic surgeons and cosmetic physicians regardless of their qualifications.

The Medical Board of Australia defines Cosmetic medical and surgical procedures as:

Operations and other procedures that revise or change the appearance, colour, texture, structure or position of normal bodily features with the dominant purpose of achieving what the patient perceives to be a more desirable appearance or boosting the patient's self-esteem.

In the guidelines:

- It is clear which procedures the guidelines apply to
- It is possible to refer a patient to a general practitioner, a psychologist or a psychiatrist for psychological evaluation - previously GPs were not included
- Different cooling off periods apply for major and minor procedures for patients under 18, with different requirements for psychological evaluation:
 - Mandatory evaluation and three month cooling off period for major procedures for under 18s, and
 - Evaluation if indicated and seven day cooling off period for minor procedures for under 18s
- In person or video consultations for doctors prescribing schedule 4 cosmetic injectables are allowed.

To ensure that you comply, the following must be in place in your practice by 1 October 2016:

- A seven day cooling off period for adults who are considering a major procedure (those that involve cutting beneath the skin, such as breast augmentation and rhinoplasty)
- A three month cooling off period before major procedures for under 18s and a mandatory evaluation by a registered psychologist, GP or psychiatrist
- A seven day cooling off period before minor procedures for all under 18s and, when clinically indicated, evaluation by a psychologist, GP or psychiatrist
- Emergency facilities when using sedation, anaesthesia or analgesia
- A mandatory consultation before prescribing schedule 4 cosmetic injectables (in person or by video consultation)
- Detailed written information about costs.

The guidelines also provide clear guidance on patient assessment and informed consent, and require doctors to provide clear information to consumers about the risks and possible complications of procedures before they are undertaken.

For more information you can read FAQs on the guidelines at <http://www.medicalboard.gov.au/Codes-Guidelines-Policies/FAQ/FAQ-guidelines-for-cosmetic-procedures.aspx>.

If you need any assistance don't hesitate to contact MIGA's Risk Management Department.

Liz Fitzgerald
National Manager – Risk Services

Medical indemnity renewal

Renewing your insurance with MIGA is quick and easy, particularly as most of our clients now receive their renewal by email. The email contains all of your renewal documentation and payment links for online credit card payment and the new direct debit option. Payment options are detailed on your Tax Invoice.

Don't be concerned if you have misplaced or forgotten your password for the Client Area, as you can now reset it from the log-in page.

If you intend claiming your renewal premium as a tax deduction in the current tax year, please ensure we receive your payment by 5pm on Friday 24 June 2016, as after this date we cannot guarantee our ability to process your payment before 30 June 2016.

If you have any questions about your renewal or if you wish to make any changes to your details please contact us. Our fantastic Client Services team can be contacted during business hours on 1800 777 156 and are happy to assist you.



Amanda Sharp
Senior Client Services Officer



Lesley Veber
Client Services Officer



Madison Lovelady
Client Services Officer



Jade Rowe
Client Services Officer



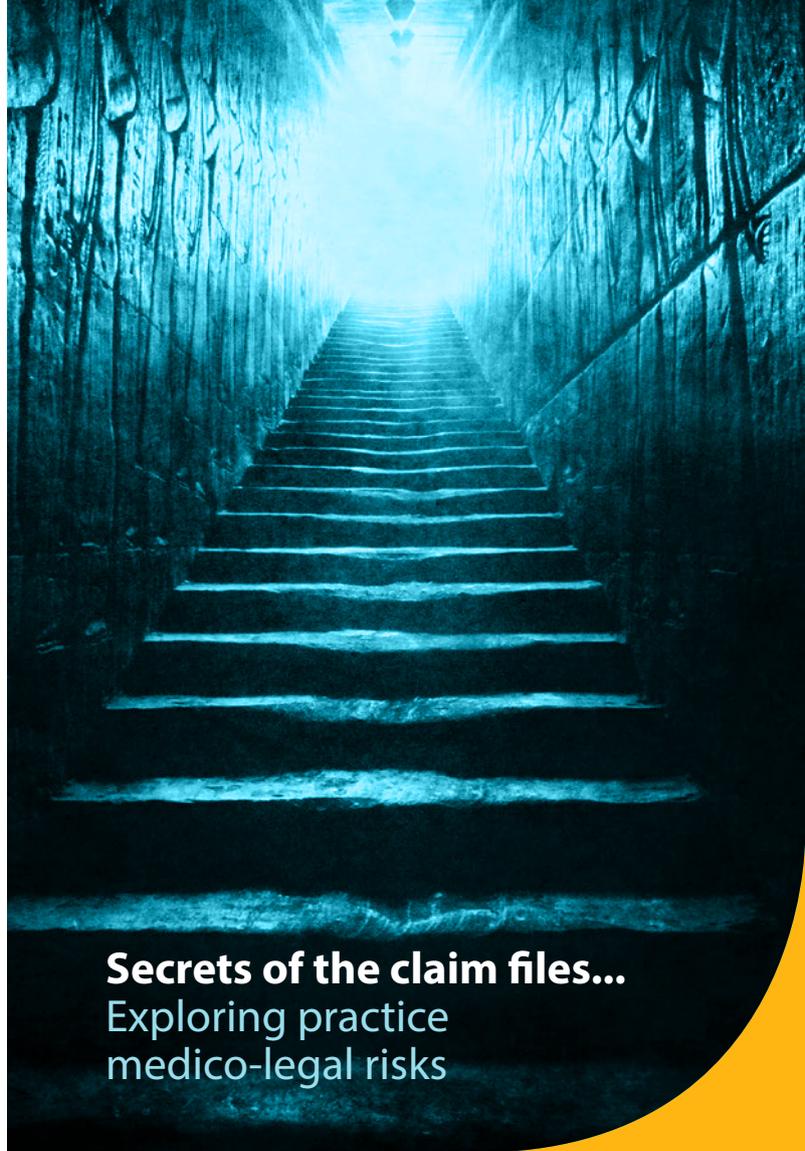
Ros Hoffmann
Senior Client Relationship Advisor



Phil Bowden
Senior Client Relationship Advisor



Lynda Slessor
Client Relationship Officer



Secrets of the claim files... Exploring practice medico-legal risks

Practice manager and owner breakfasts 2016 and 2017

Register now for our fourth breakfast series.

Medical practices face a number of common insurance risks which in many cases are well managed, but when a complaint or claim arises sometimes the circumstances can be surprising and even defy belief.

MIGA deals with many complaints and claims on behalf of insured practices and our claims files not only relate some interesting stories, but also highlight learnings that will be of benefit to your practice. Discover strategies to manage issues that may be bubbling under the surface of your practice and avoid being our next big story!

Breakfasts will be running around the country from 15 September 2016 until 22 June 2017.

Don't delay – places will fill fast!



Book your seat online today at
www.miga.eventbrite.com.au

Midwifery snapshot

Refunding and waiving fees



From time to time, you may be asked to waive the gap in fees or refund fees that have already been paid.

These requests usually arise in circumstances where there:

- Is a perception that care has been less than was expected
- Has been a misunderstanding about the care and the costs.

Seek advice

It is critical that these situations are well managed, so we recommend that you discuss any requests with one of our Claims Solicitors before you take any action. We will review the circumstances surrounding the situation with you to determine the fairest and most reasonable way of resolving the issue for the midwife and the woman.

If you decide to meet a request it is important that this is seen as an acknowledgement of the woman's dissatisfaction and as an expression of good faith and not an admission of any liability.

It is not to say that fees should be waived or expenses reimbursed every time there is a dissatisfied client. Each case must be considered on an individual basis.

We understand that you will want to deal with these requests quickly, but good management is the key to resolving any issues. Reimbursement does not always mean the end of a matter and it is important to talk to us about how to achieve the best conclusion.

Risk management tips

- There is no substitute for good ongoing communication
- Manage your client's expectations from the beginning
- Provide detailed financial information at the first consultation
- If possible meet with the client face to face to discuss the request
- Always document your discussions.

Liz Fitzgerald

National Manager – Risk Services



Doctors in Training Grants Program

2016 Applications open

Considering additional training? Don't miss your chance to access a Grant!

Now in its ninth year, the MIGA DIT Grants Program is again providing funding to assist doctors in training seeking to pursue specialist training opportunities in Australia and abroad.

The Grants

Four individual Grants of \$5,000 each are available. The funds are provided to assist doctors meet the expenses associated with their additional training, such as travel, accommodation and program fees.

A wealth of information about the Program is available from our website including:

- Eligibility criteria
- The application process (including the Online Application Form)
- Key Program dates
- Reports from past recipients (if you are looking for some ideas!).

Don't miss your opportunity to access a Grant.

Applications close 5.00pm (CDT) on Friday, 4 November 2016.

Always the first choice for your Medical Indemnity Insurance and protection



miga
ALWAYS

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