

Medical Indemnity Master Insurance Policy

(Policy number PHPMI2025V1)

Issued to clients of VMIA

For the period 1 July 2025 to 30 June 2026

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VMIA is the Victorian Government's insurer and risk adviser Level 10 South 161 Collins Street Melbourne VIC 3000 P (03) 9270 6900 contact@vmia.vic.gov.au ABN 39 682 497 841

vmia.vic.gov.au

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Victorian Managed Insurance Authority (VMIA) acknowledges the Traditional Custodians of the land on which we do business, and we pay our respects to Elders past and present. We acknowledge the important contribution that Aboriginal and Torres Strait Islander peoples make in creating a thriving Victoria.

Medical Indemnity Master Insurance Policy

This **Policy** incorporates the **Schedule**, Extensions, Memoranda and Endorsements (if any) which are to be read together, and any word or expression to which a specific meaning has been given in any part of this **Policy** shall bear this meaning wherever it may appear.

1. Insuring clauses

Victorian Managed Insurance Authority ('VMIA') hereby agrees subject to the limitations, terms and conditions hereinafter mentioned or endorsed hereon:

1.1. Claims

To pay up to the Limit of indemnity on behalf of the Insured, any amount for which the Insured becomes legally liable to pay (less any GST that forms part of that amount and for which the Insured is entitled to claim an Input Tax Credit or Adjustment) in respect of Claims made against the Insured seeking compensation for Personal injury and which Claims arise directly out of a Health care incident that occurred during the Period of insurance.

1.2. Costs and expenses

In addition to the Limit of indemnity, to pay the reasonable costs and expenses (less any GST that forms part of that amount and for which the Insured is entitled to claim an Input Tax Credit or Adjustment) incurred at the discretion of and with the prior written consent of VMIA:

- a. in the investigation, defence or settlement of any such Claim, or
- b. in the investigation into matters, facts or circumstances which are likely in the opinion of VMIA to give rise to a **Claim**,

provided that if a payment in excess of the amount of indemnity available under this **Policy** has to be made to finalise a **Claim**, the liability of **VMIA** for such costs and expenses incurred with its consent shall be such proportion thereof as the amount of indemnity available under this **Policy** bears to the amount paid to finalise the **Claim**.

1.3. Multiple Claims

Where the one act, error or omission results in more than one **Claim** against the **Insured** which is the subject of indemnity, all those claims together shall constitute one **Claim** under the **Policy** when determining the **Limit of indemnity** pursuant to this **Policy**.

1.4. Specific coverage for Good Samaritan Acts

VMIA will indemnify the **Insured** in respect of **Health care services** or first aid services provided by the **Insured** at the scene of a medical emergency, accident or disaster during the **Period of insurance**, provided that when doing so the **Insured** was not acting in a personal professional capacity or for any other entity or person and provided the services without charging a fee or expecting payment of any kind.

1.5. Coronial Matters

The VMIA will pay the reasonable costs, charges and expenses of legal representation, incurred with VMIA's prior written consent, for any Coronial matter in relation to which the **Insured** is legally compelled to provide evidence, which directly relates to matters, facts or circumstances directly arising from a **Claim**, or to matters, facts or circumstances which are likely in the opinion of VMIA to give rise to a **Claim**.

2. Definitions

Adjustment, GST and Input Tax Credit have the meanings given in the A New Tax System (Goods and Services Tax) Act 1999 and any related Act imposing such tax or legislation that is enacted to validate, recapture or recoup such tax.

Appropriately Credentialed means **Credentialing** in accordance with the Department of Health Guidelines as are current from time to time.

Australian resident means Australian resident as specified in Section 3 of the Health Insurance Act 1973 (Cth) as amended from time to time but also includes a person who, by virtue of an agreement entered into by the Commonwealth of Australia, is to be treated as an Australian resident for the purposes of the provision of medical, hospital and other Health care services.

Claim or Claims means a claim for compensation made against the Insured in relation to a Health care incident.

Clinical trials and health and medical research means participation in trials or research projects, that have been approved by a properly constituted Human Research Ethics Committee in accordance with National Health and Medical Research Council guidelines and where such trial and/or health and medical research has been conducted in accordance with any conditions or approvals made by such Human Research Ethics Committee.

Covered Event means a matter, fact or circumstance which is likely in the opinion of VMIA to give rise to a Claim and for which an indemnity has been provided under this Policy.

Credentialing means the formal process used to verify the qualifications, experience, professional standing and other relevant professional attributes of a **Health Practitioner** for the purposes of forming a view about their competence, performance and professional suitability to provide safe, high quality **Health care services** within specific organisational environments.

Health care incident means an act, omission or circumstance that occurs during the course of, or in connection with, the provision of Health care services.

Health care services means any care, treatment, counselling, advice, service or goods provided in respect of the physical or mental health of a patient or person, including **Clinical trials and health and medical research** activities unless otherwise excluded by this policy. For the purposes of this definition the **Health care services** can be provided in person, via telephone, videoconference, facsimile, email or other electronic format.

Health Practitioner means a practitioner in one of the health professions regulated by a responsible Board pursuant to the Health Practitioner Regulation National Law (Victoria) Act 2009.

Honorary appointee means a Registered medical practitioner who holds an Honorary appointment.

Honorary appointment means an appointment of a **Registered medical practitioner** to a health service or organisation named in the **Schedule** whereby that **Registered medical practitioner** is credentialed to provide services to patients of the health service or organisation at no charge to either the patient or the health service or organisation.

Insured means and includes:

- 1. The health service or organisation or individual named in the **Schedule**.
- 2. Employees of the health service or organisation named in the **Schedule** whilst:
 - a. providing Health care services to Public patients of the health service or organisation;
 - b. providing Health care services to Private patients of the health service or organisation where such Health care services were provided by the employee in that employee's capacity as an employee of the health service or organisation;
 - c. providing Health care services to patients of the health service or organisation who are non-Australian residents;

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d. providing advice to another Victorian Public Health Service about the treatment of a patient of that Victorian Public Health Service;

but does not include any employee who at the time of the **Health care incident** was required to be registered pursuant to the Health Practitioner Regulation National Law (Victoria) Act 2009 but was not so registered or who was so registered but was in breach of a term or condition of their registration.

- 3. Employees of the health service or organisation named in the **Schedule** who are **Registered medical practitioners** whilst providing advice to another health service or **Registered medical practitioner** in respect to the care or treatment of a patient of that health service or **Registered medical practitioner**.
- 4. Persons for whose conduct the health service or organisation named in the **Schedule** is liable at law whilst providing **Health care services** to **Public patients** of that health service or organisation, but does not include any person who at the time of a **Health care incident** was required to be registered pursuant to the Health Practitioner Regulation National Law (Victoria) 2009 but was not so registered.
- 5. A **Registered Health Practitioner** or other natural persons whilst providing **Health care services** to patients of the health service or organisation named in the **Schedule** in accordance with the exercise of a right of private practice granted to the **Registered Health Practitioner**, in their capacity as a fulltime or part-time employee of the health service or organisation provided that the terms of the **Registered Health Practitioner's** employment contract require the **Registered Health Practitioner** to:
 - 5.1. remit all or part of the fees earned in respect of such patient to a Dillon Fund, special purpose fund, trust or like arrangement established by or in conjunction with the employing health service or organisation, or
 - 5.2. remit all of the **Registered Health Practitioner's** income to the employing health service or organisation.
- 6. Any student and / or practitioner of a University, TAFE, College of Advanced Education or like institution appointed to or undertaking an examination or assessment at a health service or organisation named in the **Schedule** and whilst providing **Health care services** to patients of such health service or organisation.
- 7. A **Registered medical practitioner** holding an appointment to a health service or organisation named in the **Schedule** whilst providing **Health care services** after 30 September 1993 at any premises associated with the health service or organisation named in the **Schedule**, always provided that the patient to whom the **Health care services** were rendered was referred to the **Registered medical practitioner** either from: (i) the emergency department of the health service or organisation or for ongoing care following discharge as an inpatient from the health service or organisation; and (ii) that any such patient when so treated at the emergency department, or as an inpatient, at the health service or organisation to the extent that the patient maintains to be a **Public patient**.

The Registered medical practitioner maintains to be an Insured provided they:

- 8. A **Registered medical practitioner** holding an appointment to a health service or organisation named in the **Schedule** whilst providing **Health care services** to patients of the health service or organisation who are non-**Australian residents** but only in respect of those services for which the **Registered medical practitioner** does not render and is not entitled to render a fee to the patient.
- 9. A **Registered medical practitioner** holding an **Honorary appointment** to the health service or organisation named in the schedule whilst:
 - a. providing Health care services to Public patients of the health service or organisation;
 - b. providing Health care services to Private patients of the health service or organisation where such services were provided by the Registered medical practitioner in that Registered medical practitioners capacity as an Honorary appointee and in circumstances where that Registered medical practitioner did not, and, was not entitled to, render to the patient a fee for his/her services.
- 10. A **Registered medical practitioner** who refers a patient to a public hospital elective Surgery waiting list of a health service or organisation named in the **Schedule** but only to the extent that any legal liability arises from or in respect of placement of the patient on the public hospital elective surgery waiting list and not for any legal liability arising from or in respect of any private consultation between the **Registered medical practitioner** and the patient prior to the placement of the patient on the public hospital elective surgery waiting list and provided that:
 - a. the **Registered medical practitioner** has referred the patient in accordance with the guidelines of such health service or organisation; and
 - b. the patient had, at or before the time of placement on the public hospital elective surgery waiting list, indicated an intention to be admitted to such health service or organisation as a **Public patient**.

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- 11. A **Registered medical practitioner** who obtains a patient's consent to a procedure and refers the patient to a public hospital or a health service or organisation named in the **Schedule** to have the procedure as a **Public patient** but only to the extent that any legal liability arises from the information or lack of information given by the **Registered medical practitioner** to the patient at the time of obtaining the patient's consent to the procedure about the risks of the procedure and provided that:
 - a. the **Registered medical practitioner** has admitting rights to the public hospital to which the patient is referred.
 - b. the **Registered medical practitioner** both obtains the patient's consent and refers the patient in accordance with the guidelines of such health service or organisation.
 - c. the patient had, at or before the time of referral to the public hospital, indicated an intention to be admitted to such health service or organisation as a **Public patient**.
 - d. the health service or organisation accepts the referral and the procedure is performed at the public hospital whilst the patient is a **Public patient**.
- 12. Persons who participate in **Multidisciplinary Meetings** under the control and/or auspices of an **Integrated Cancer Service** in Victoria but only in respect of **Health care incidents** that arise out of their participation in such **Multidisciplinary Meetings**.

Insured person means any of the people included in the definition of Insured.

Integrated Cancer Service means a cluster of hospitals and associated health services that deliver services for people with all types of cancer within a geographical area and which operate as part of the Victorian state-wide system for the delivery of cancer treatment and care.

Limit of indemnity means the Limit of indemnity specified in the Schedule.

Multidisciplinary Meeting means a deliberate, regular, face-to-face (or videoconference) meeting of a team of people comprising a range of health professionals with expertise in the diagnosis of cancer. The purpose of the meeting is to facilitate best practice management of patients with cancer.

Period of insurance means the period of insurance specified in the Schedule.

Personal injury means bodily injury, death, sickness, disease, disability, shock, fright, mental anguish and/or mental injury including loss of services resulting therefrom.

Policy means this policy wording.

Policy Schedule or Schedule means the schedule issued with this Policy wording.

Private patient means all patients other than Public patients.

Public patient means an **Australian resident** in respect of whom a health service or organisation named in the Schedule has agreed to provide **Health care services**, including all necessary medical, nursing and diagnostic services (and if they are available at such health service or organisation, dental and paramedical services), by its own staff and contractors at the expense of the named **Insured**.

Registered Health Practitioner means a **Health Practitioner** registered by a responsible board pursuant to the Health Practitioner Regulation National Law (Victoria) Act 2009.

Registered medical practitioner means a medical practitioner registered with the Medical Board of Australia.

Registered nurse means nurse or midwife registered with the Nursing and Midwifery Board of Australia.

Victorian Public Health Service means a registered funded agency or a privately operated hospital within the meaning of the Health Services Act 1988 (Vic).

VMIA means the Victorian Managed Insurance Authority ABN 39 682 497 841.

3. Exclusions

This **Policy** does not apply to and does not provide indemnity in respect of:

- 3.1. Health care incidents that did not occur during the Period of insurance.
- 3.2. The transmission by an **Insured person** of a contagious disease or virus carried by the **Insured person** which at the time knew or ought reasonably to have known that the disease or virus was being carried.

This exclusion does not operate against:

- 3.2.1. any **Insured person** which at that time knew that the disease or virus was being carried and the **Insured person** complied with the requirements of the Australian national guidelines for the management of healthcare workers living with blood borne viruses and healthcare workers who perform exposure prone procedures at risk of exposure to blood borne viruses;
- 3.2.2. any **Insured person** who, while taking all reasonable precautions to prevent the transmission of the COVID-19 virus, unknowingly carries and transmits the virus while providing **Health care services**;
- 3.2.3. any **Insured person** who tests positive for the COVID-19 virus and is required to return to work under a Department of Health Ministerial Order and, while taking all reasonable precautions to prevent the transmission of the COVID-19 virus, transmits the virus whilst providing **Health care services**;
- 3.2.4. any **Insured** or **Insured person** who did not carry and transmit the disease or virus.
- 3.3. Any defective equipment and/or product supplied:
 - a. by an **Insured person**; or
 - b. by a health service or organisation named in the **Schedule** to another person or entity other than a **Victorian Public Health Service**.
- 3.4. Fines, penalties, punitive, aggravated and/or exemplary damages.
- 3.5. **Personal injury** to any person alleged to have been caused or contributed to by, or arising from, the use of blood (including any product derived from blood or any part thereof):
 - 3.5.1. infected or allegedly infected with Hepatitis C taken from a blood donor prior to 1 July 1998;
 - 3.5.2. infected or allegedly infected by any form of human immunodeficiency virus taken from a donor prior to 1 May 1985.
- 3.6. The condition of the premises owned and/or occupied by the **Insured**.
- 3.7. Actual or alleged sexual harassment, sexual misconduct or unlawful discrimination.
- 3.8. Health care incidents occurring whilst the Insured person is under the influence of an intoxicant or narcotic.
- 3.9. Liability assumed by an **Insured** under any contract, agreement, guarantee or warranty unless the liability would have attached to the **Insured** in the absence of such contract, agreement, guarantee or warranty.
- 3.10. Any legal liability of whatever nature directly or indirectly arising:
 - i. out of any act, error or omission committed or alleged to have been committed within the territorial limits of the United States of America, its territories or protectorates, or Canada; or
 - ii. in accordance with and pursuant to the laws of the United States of America, or Canada.
- 3.11. Any **Claim** brought against the **Insured** in a court of law outside the Commonwealth of Australia, Papua New Guinea or New Zealand, or in respect of any action brought in a court of law within the Commonwealth of Australia, Papua New Guinea or New Zealand to enforce a foreign judgment whether by way of reciprocal agreement or otherwise.

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- 3.12. Injury to or death of an employee of the **Insured** arising out of or in the course of the employee's employment with the **Insured** or to **Claims** made against the **Insured** by any injured person or the dependent of any injured person under the provisions of any workers' compensation law or any other obligations for which the **Insured** may be held liable under any workers' compensation law.
- 3.13. **Personal injury**, loss, damage or liability directly or indirectly occasioned by, or:
 - 3.13.1. happening through or in consequence of war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition or destruction of or damage to property by or under the order of any government or public or local authority;
 - 3.13.2. directly or indirectly arising from or in conjunction with any act of terrorism.
 - 3.13.3. caused by or arising from or in consequence of or contributed to by nuclear weapons, materials, or
 - 3.13.4. arising from or in consequence of or contributed to by ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. Combustion shall include any self-sustaining process of nuclear fission.

This exclusion does not apply to any **Health care incident** arising out of **Health care services** provided as a result of those events described in 3.13.

- 3.14. Costs incurred in respect of any disciplinary tribunal hearing or inquiry, board of inquiry, investigation or hearing, criminal investigation, trial or proceeding.
- 3.15. Any **Claim** where the **Health care incident** occurred before midnight on 31 December 1994, in relation to the operations of the hospital formerly known as the Heidelberg Repatriation Hospital, including any of the following;
 - 3.15.1. the Commonwealth of Australia;
 - 3.15.2. the Repatriation Commission;
 - 3.15.3. the successor in law of the Repatriation Commission or the Heidelberg Repatriation Hospital; or
 - 3.15.4. any person for whose conduct the Repatriation Commission or the Heidelberg Repatriation Hospital is liable at law.
- 3.16. The policy will not indemnify the **Insured**, or any person the **Insured** is legally responsible for, who commits any dishonest, fraudulent, criminal or malicious act.
- 3.17. Health care incidents arising out of the provision of Health care services to patients of a health care facility other than a Victorian Public Health Service named in the Schedule unless:
 - a. such Health care services have been agreed to by the VMIA and the health service or organisation named in the schedule prior to their commencement; or
 - b. the Health care incident arises directly out of advice given by the Insured to another Victorian Public Health Service about the treatment of a patient.
- 3.18. Any amount of **GST** in respect of which the **Insured** is entitled to claim an **Input Tax Credit** or **Adjustment**.

4. Conditions

4.1. Defence and settlement of Claims

For any **Claim** for which the **Insured** is entitled to indemnity under this **Policy**, **VMIA** will defend any such **Claim** in the name of and on behalf of the **Insured** and, subject to the **Limit of indemnity**, will pay the costs and expenses (less any **GST** that forms part of that amount and for which the **Insured** is entitled to claim an **Input Tax Credit** or **Adjustment**) incurred in defending the **Claim**. **VMIA** shall have full discretion in the conduct of any negotiations, proceedings or settlement of any **Claim**.

4.2. Conduct of Covered Events

For any **Covered Event**, **VMIA** will have full discretion in the conduct of any investigation or matter relating to the **Covered Event** and, subject to the **Limit of indemnity**, will pay the costs, charges and expenses (less any **GST** that forms part of that amount and for which the **Insured** is entitled to claim an **Input Tax Credit** or **Adjustment**) incurred in the conduct of the **Covered Event**.

4.3. Subrogation

VMIA is entitled to all of the **Insured's** rights of recovery (before or after a **Claim** has been paid) and the **Insured** will co-operate with **VMIA** and provide such information and assistance (including but not limited to the signing of documents) which **VMIA** may reasonably require in the exercise of such rights of recovery.

VMIA shall have a full discretion in the conduct of any negotiations, proceedings or settlement when exercising such rights of recovery.

4.4. Co-operation with Claims

The **Insured**, at its own expense, shall give such information and assistance as **VMIA** may reasonably require to determine liability under the **Policy** and investigate, defend and settle a **Claim**.

4.5. Co-operation with Covered Events

The **Insured**, at its own expense, shall give such information and assistance as **VMIA** may reasonably require in the conduct of any investigation or matter relating to a **Covered Event**.

4.6. Notice of Claims and potential Claims

The Insured must give VMIA:

- 4.6.1. Notice by email or in writing as soon as practicable after becoming aware of any incident, occurrence, complaint, investigation, inquiry or disciplinary proceeding which may give rise to a liability under this **Policy**; and
- 4.6.2. Notice by email or in writing as soon as practicable after becoming aware of any **Claim** against the **Insured** in respect of a **Health care incident**.

In the event of the **Insured** failing to give notice to **VMIA** as required, to the extent of loss caused to **VMIA** by virtue of that failure to give notice, **VMIA** shall be entitled to deny indemnity to the **Insured** under the policy.

- 4.6.3. For the purposes of clauses 4.4.1 and 4.4.2 a health service or organisation named in the **Schedule** is deemed to have become aware of an incident, complaint, investigation, inquiry, disciplinary proceeding or **Claim** on the date which any of the persons holding the following positions, or equivalent positions (whether permanently or temporarily) in the health service or organisation first became aware of the incident, complaint, investigation, inquiry, disciplinary proceeding or **Claim**:
 - i. Chief Executive Officer;
 - ii. Chief Medical Officer;
 - iii. Director of Clinical Services;
 - iv. Director of Medical Services;
 - v. Director of Nursing;
 - vi. Corporate Counsel;
 - vii. Risk Manager;

- viii. Manager;
- ix. Medico-Legal Officer;
- x. Freedom of Information Officer.

4.7. Suitable employees

The health service or organisation named in the **Schedule** shall at all times exercise reasonable care to ensure that:

- 4.7.1. only **Registered Health Practitioners** are employed and/or engaged by the health service or organisation if they are employed and/or engaged to provide **Health care services**;
- 4.7.2. all **Registered Health Practitioners** who have independent responsibility for patient care and who are appointed by the health service or organisation must be **Appropriately Credentialed** and have their scope of clinical practice defined in accordance with both their level of skill and experience and the capability of the health service or organisation;
- 4.7.3. students and/or **Registered Health Practitioners** undergoing training or qualification with the health service or organisation, act only under the supervision of suitably experienced **Registered medical practitioners**;
- 4.7.4. trainee nurses, state enrolled nurses, nurse assistants and the like of the health service or organisation act only under the supervision of suitably experienced **Registered nurses**;
- 4.7.5. properly qualified ambulance attendants are employed and/or engaged by the health service or organisation;
- 4.7.6. trainee ambulance attendants and the like act only under the supervision of suitably experienced and qualified ambulance attendants.

4.8. Reasonable safeguards

The **Insured** shall ensure that reasonable safeguards and precautions are taken to avoid injury to patients.

4.9. Alteration to risk

The **Insured** must give **VMIA** notice in writing as soon as practicable within the **Period of insurance** of any material change to the risk.

4.10. Governing Law

The construction, interpretation and meaning of this **Policy** will be determined in accordance with the laws of the Commonwealth of Australia. All disputes relating to this **Policy** must be submitted to the exclusive jurisdiction of the courts of the Commonwealth of Australia.

Privacy Statement

We are committed to protecting any information and data, including personal information and health information we collect, handle, store or disclose about you through our services. We manage all information and data, including personal and health information in accordance with the *Victorian Managed Insurance Authority Act* 1996 (**Act**), the *Privacy and Data Protection Act* 2014, the *Health Records Act* 2001, the *Freedom of Information Act* 1982, and our <u>Privacy Policy</u>.

From time to time, in accordance with our legislative and regulatory frameworks and applicable laws, we may be required to disclose information concerning policies or claims to government bodies authorised by Victorian or Commonwealth legislation.

Collection and use of Personal Information

Personal information means information or an opinion that is recorded in any form, and whether true or not, about an individual whose identity is apparent, or can reasonably be ascertained, from the information or opinion.

We collect and record personal information through our client data collection processes which include our website, online forms and surveys. Some examples of when we may collect your personal information are when you:

- send us an email;
- use our online services, such as completing a form or survey electronically;
- register to attend training and events; and
- access our secure client portal on our website.

Personal information we collect can only be used for the purpose of performing functions under our Act and in accordance with all applicable laws and regulations.

Access and Correction

Please contact our Information Privacy Officer at privacy@vmia.vic.gov.au if you:

- want to access personal information (if any) that we hold about you;
- want to know more about what sort of information we hold, for what purposes and how we deal with that information;
- believe that personal information that we hold about you is not accurate, complete and up to date; or
- have concerns about your privacy rights.