

ML Committee

Meeting with indemnity insurers

	Natmed Medical Defence (Pty) Ltd
Type of business	Natmed is a leader in structuring and securing medical malpractice insurance for specialist healthcare practitioners and Obstetricians and Gynaecologists in particular. Natmed is an authorised Financial Services Provider, FSP 21144
Risk carrier	Constantia Insurance Company Limited, FSP 31111
Re-insurer	Swiss Re Corporate Solutions is part of Swiss Re Limited, who are one of the most reputable and reliable international reinsurers, and the primary reinsurer to Constantia Insurance Company Limited
Business model / philosophy	As a proudly South African company, with a significant track record and longevity in the medical malpractice industry, and as the most specialised independent medical malpractice insurance intermediary, Natmed has developed the most expertise in structuring and securing medical malpractice indemnity insurance for especially Obstetricians and Gynaecologists, whilst still assisting all other surgical disciplines. Natmed, as binder holder and not an insurer, calculates premiums for every obstetrics practice on an individual basis, allowing us to recommend cover benefits and costs specific to each practitioner’s performance, experience and needs; this adds significant stability to encourage new obstetricians entering the market at lower premiums, retaining those wishing to scale down to run a limited private practice and rewarding practitioners with consistent performance that supports peers (day-to-day work and lower claims). This results in a beneficially and competitively priced product by construction, that rewards of our significant obstetrics client base who have in majority been with us for almost 20 years. Natmed prides itself in not only ensuring market-leading and extremely competitive medical malpractice insurance cover to Obstetricians and Gynaecologists, but in providing superior support to its clients through our various medico-legal and insurance articles, such as http://www.medicaldefence.mobi/news.php?cat=medico-legal , our exclusive publications (http://www.medicaldefence.mobi/news.php?cat=what-if and http://www.medicaldefence.mobi/news.php?cat=ten-takeaways), accredited CPD seminars (http://www.medicaldefence.mobi/news.php?cat=seminars), an e-Learning platform (http://www.medicaldefence.mobi/news.php?cat=medical-defence-review), 24/7 legal advice and helpline from our experienced, internal attorneys, promotion of early alternative dispute resolution (including mediation),

	<p>promotion of and ability to facilitate periodic payments in settlements (especially with baby-related claims) and facilitate the financing of medical equipment. Natmed promotes good healthcare practices and is able to obtain for its clients expert guidance, advice and peer support in order to achieve that goal. We have and maintain and foster our relationships with healthcare industry leaders (political and commercial) and special entities like the South African Law Reform Commission to aide industry stability and to containing the unnecessary inflation of claims. This is all achieved through a team with more than 60 years' experience in South Africa including Natmed's Founder and healthcare consultant, Stephen Kellerman, and renowned litigator and CEO, Donald Dinnie, who has almost 30 years' experience in healthcare law and medical malpractice litigation in South Africa. Natmed developed the first complete online medical malpractice system for the convenience of clients, insurers, attorneys who defend doctors and various reinsurers; this remains a state-of-the-art client access platform</p>
Underwriting philosophy	<p>To secure affordable and comprehensive cover for our clients, we focus on pricing practitioners on an individual basis and in a manner that creates a sustainable liability portfolio, premium stability and the lowest premium inflation annually. This means that premiums start low enough to attract and support new obstetricians to the private sector, as well as retain those performing limited births (such as when a practice scales down towards retirement)</p>
Claims philosophy	<p>While Natmed does not approve or reject claims (insurers do in accordance with each specific policy wording), we promote and encourage the efficient and supportive defence of our clients and we promptly and confidentially assist them via our internal legal team and the expert panel of attorneys (as supported by insurers) who have successfully defended our clients from inception. We understand that dealing with a claim can be a traumatic experience for our clients, so we utilise our vast expertise and experience to ensure that everyone understands the claims process and remain supported from the start to finish of the claim. Natmed is signatory to the Memorandum of Understanding with the E O P and promotes the proactive mediation of appropriate disputes. All circumstances that might give rise to claims and claims themselves can all be reported conveniently using our online system, where all notifications, progress, electronic records and communications are managed electronically, further supporting the legal team and advice centre.</p>
Limits of indemnity	<p>Ranging from R20 million per annum in the aggregate to R50 million for each and every claim (all costs, expenses, interest and VAT inclusive) with options on the ability to obtain a reinstatement of chosen limits</p>

Products available:	
Occurrence based	Yes: Natmed writes Occurrence-Based indemnity via www.Natmed.mobi on the EthiQal product (underwritten by Constantia Insurance Company Limited), including a seamless transition for our Claims-Made clients to that cover where needed
Claims made	Yes: Natmed created and distributes its tailored Claims-Made indemnity cover as underwritten by Constantia Insurance Company Limited. As a result of Natmed's expertise and extensive experience in understanding the medical malpractice market for almost 20 years, we developed benefits to match the needs of our clients as identified by managing a vast number of very complicated claims over that period. Natmed's claims-made cover involves individual risk profiling and underwriting, supporting the evolution of the practitioners work and needs over the lifetime of the practice. Our client's also have the benefit of premium holidays (at zero payment monthly) in certain circumstances including pregnancy, temporary or permanent disability, emigration and with no payments by any estate in the event of a client's demise
Tail coverage	The Natmed Claims-Made policy provides (as specified in the policy wording) for a free three-year extended reporting period at retirement, disability, emigration and for our client's estate, which can be extended annually thereafter for as long as required (subject to prevailing market requirements and support). The Occurrence-Based cover provides for perpetual cover for incidents arising during paid premium periods. We also aim to ensure continuity of cover for all the clients on our portfolio, irrespective of insurers withdrawing from underwriting malpractice cover or the country, making Natmed the long-term supporter of its clients
Policy holder protection	Natmed is subject to and compliant with all financial, advisory and intermediary services laws and regulations including all policyholder protection rules. We are also compliant with all the relevant Treating Customers Fairly principles, the Consumer Protection Act and all other South African regulations relating to our insurance work
CEO	Donald Dinnie
Medical Professional	Natmed does not employ a single medical professional, but uses a panel of medical experts and consultants to assist our underwriting, claims and clients
Other stakeholders	Natmed is independent of Constantia Insurance Company Limited and all other role players
What happens with surplus funds if applicable	Insurers typically apply surplus funds to the benefit of malpractice insurance portfolios to bolster their reserves (as the exposure is highly volatile) or mitigate premium inflation; we advocate applying such funds in initiatives that improve patient safety and support for practitioners (training and education)
Disclosure of adverse events necessary	Yes, all occurrence-based and claims-made indemnity products in the market require disclosures and will be detailed in each policy wording or contract

<p>Are there guidelines available with regards to disclosures</p>	<p>Yes. Clients can access these at www.Natmed.mobi and general guidance is offered at www.MedicalDefence.mobi. Advice and guidance in this regard can also be obtained from our offices at 0860628633 or by requesting same from Legal@Natmed.mobi. Natmed also provides a spectrum of CPD lectures on understanding medical malpractice insurance and its importance for healthcare professionals. Natmed's Natmedipedia (http://www.medicaldefence.mobi/news.php?cat=natmedipedia) also provides technical guidance in this regard</p>
<p>What happens to the information provided through disclosure of adverse events</p>	<p>All client information of whatsoever nature is subject to and dealt with under the prevailing data privacy laws and is stored using our secure online system at www.Natmed.mobi. Notifications are provided to the insurer to ensure policy compliance and support of policyholder duties and obligations. Timeous notifications also ensure, to the benefit of our clients, that related future claims are covered under the initial notification, irrespective of the payment of premiums at a later date, retirement or other events, as defined in the policy wording</p>
<p>Can membership be terminated by the insurer?</p>	<p>Our policies are formal contracts and can only be terminated by the insurer (in compliance with and subject to South African laws that protect policyholders) where a policyholder or client is in breach of certain of the terms of that contract. For example, when there is failure to pay the premium timeously and outside the days of grace afforded to any client (under the relevant legislation and despite persistent communication from us), any industry insurance policy would lapse at renewal or be terminated by the insurer in the period of insurance. An insurer may decline to renew a policy or impose special terms for various reasons, typically relating to a deteriorating and unmanageable risk profile (the few practitioners who refuse support and guidance that could improve patient safety and reduce claims against them).</p>