

COMPREHENSIVE COVERAGE FOR PHYSICIANS



Broad Coverage Trigger	For claims-made, a claim is first made when MMIC receives notice of a claim or an event which may subsequently give rise to a claim. If occurrence, the insurance provided applies to services rendered during the policy period.
Consent to Settle	We will not settle any claim without your consent. This provision does not apply to Wisconsin due to state statute.
World-Wide Coverage	Coverage is provided anywhere in the world provided the suit or claim is first brought in the United States.
Limits of Liability	Limits apply separately to each provider listed on the Schedule of Insureds. The limits also apply separately to each injured person. For birth related claims, one limit will apply to the child and a second limit will apply to the mother, if injured. If shared excess limits of liability are indicated, they apply on a shared basis.
Defense Costs and Prejudgment Interest	Defense costs and prejudgment interest are paid in addition to the policy limits. The limits of liability are not eroded by these payments.
Administrative Proceeding Defense Coverage	Coverage is provided for the defense against administrative actions brought by the government, a third party payer or managed care organization. \$25,000 is available for each insured, with a \$100,000 total policy limit.
Reimbursement for Expenses	Up to \$400 per day (\$7,500 policy aggregate) is provided for reasonable expenses incurred due to your required attendance at the trial of a civil suit against you.
Legal Fees Responding to a Governmental Body Complaint	Up to \$5,000 is provided for reasonable legal fees incurred by you in defending against a complaint from a governmental body for licensure, regulation or professional discipline which alleges improper or inadequate performance of professional services.
Employee and Volunteer Workers Coverage	Coverage is automatically included for most employees and volunteer workers. For coverage to apply to nurse midwives, CRNAs, heart/lung perfusionists, podiatrists, interns, externs, residents and dental, osteopathic, chiropractic or medical doctors, they must be scheduled on the policy. Otherwise, they are excluded.
Locum Tenens (Substitute Physician)	Coverage is automatically provided to locum tenens on a shared limit basis, except in Indiana, Kansas, Nebraska and Wisconsin.
Vicarious Liability	Vicarious Liability Coverage is included for claims against you arising out of the acts or omissions of any person for whom you are legally responsible.
Reporting Endorsement Provisions – if Claims-Made	The reporting endorsement premium is waived in the event of death, total and permanent disability, attainment of age 60 with 15 years continuous coverage, attainment of age 62 with 10 years continuous coverage and permanent retirement with 5 years continuous coverage. For policyholders with less than 5 years continuous coverage who permanently retire, a 20 percent reduction in premium for each full year of coverage shall apply.
Reporting Endorsement Limits of Liability – if Claims-Made	The aggregate limit for the reporting endorsement applies separately to each of the reporting periods: 1) The first 12 months following the date coverage was cancelled or not renewed; 2) The second 12 months following the date coverage was cancelled or not renewed; 3) Any remaining policy period the reporting endorsement is in effect.

The coverage provisions included in this document are part of MMIC's standard policy form. The actual language of the policy issued will control the specific coverages available. In providing this summary, MMIC Insurance, Inc. does not waive any rights established by the policies it issues. State amendatory endorsements are not included in this summary.