

# Membership classification guide

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This is a Supplementary Product Disclosure Statement (SPDS) issued by MIPS Limited ABN 64 007 067 281 AFSL 301912.

This SPDS supplements the *Membership Benefits Handbook Combined FSG and PDS* prepared on 8 May 2019. The PDS incorporates the *Membership Classification Guide* and the *Members' Insurance Covers Handbook* both of which were prepared on 8 May 2019.

This SPDS should be read together with the PDS and any other SPDS issued for this PDS. Information in the PDS is subject to change from time to time and any updates can be found at [mips.com.au/publications](http://mips.com.au/publications). Paper copies of the *Membership Benefits Handbook*, *Membership Classification Guide* and *Insurance Covers Handbook* and this statement are available on request free of charge by contacting [info@mips.com.au](mailto:info@mips.com.au)

## Purpose of this SPDS

The purpose of the *Membership Benefits Handbook Combined FSG and PDS* is to summarise the features and benefits of MIPS membership. The purpose of this SPDS is to update the *Membership Benefits Handbook* and *Insurance Covers Handbook* to:

1. clarify that international students will incur a membership fee.
2. make a correction to the 'Dentists in training' basis description about the limits of cover.
3. make a correction to the 'Gratuitous services outside of Australia' endorsement description.
4. clarify the product liability for dental members who manufacture, distribute or sell products.

## International students

In the *Membership Benefits Handbook* on page 2 it states:

An annual membership fee applies for members other than students.

This should read and is replaced with the following:

An annual membership fee applies for practitioners and international students. Membership is free for students enrolled in an AHPRA [approved program of study](http://www.ahpra.gov.au) (see [www.ahpra.gov.au](http://www.ahpra.gov.au)) from an Australian Institution that qualifies the graduate for registration as a Medical, Dental or Nuclear Medicine Technologist healthcare practitioner.

## Dentists in training

In the *Membership Benefits Handbook* on pages 38 and 39 it states:

Dentist in training applies if you are a general dentist and you have commenced a specialist dental qualification. Cover is provided for additional non-employer indemnified (private) practice outside of your training program, covered under your category, as long as that practice does not constitute more than 50% of your hours worked per week (annualised) and is commensurate with your training, qualifications and experience with appropriate supervision arrangements in place (if applicable).

This basis will exclude non-employer indemnified (private) practice if 'Employer indemnified only' is appended to your basis. This basis is not eligible for the 'Minor cosmetic extension' endorsement.

Members who already hold an Australian specialist qualification are not eligible for the 'Dentist in training' basis.

This should read and is replaced with the following:

Dentist in training applies if you are a general dentist and **you are currently enrolled in an AHPRA approved program of study for dental specialist registration. Cover under this classification is provided for non-employer indemnified (private) practice as long as that practice does not constitute gross billings of more than \$100,000 in a 12 month period and is commensurate with your training, qualifications and experience with appropriate supervision arrangements in place (if applicable).**

This basis will exclude non-employer indemnified (private) practice if 'Employer indemnified only' is appended to your basis. This basis is not eligible for the 'Minor cosmetic extension' endorsement.

Members who already hold an Australian specialist qualification are not eligible for the 'Dentist in training' basis.

## Gratuitous services outside of Australia

In the *Membership Benefits Handbook* on page 41 it states:

Gratuitous services outside of Australia is required if you have been approved for an extension of cover for practice outside of Australia to provide gratuitous aid work services to disadvantaged locals. Refer to 'Gratuitous Services' for further information.

- Indemnity insurance cover is capped at 6 calendar months or 184 days (the same as the travel cover)
- Excludes matters within the USA, US territories or where US law applies
- Cover is extended to you and a limit of one employee accompanying you

These dot points are omitted and accordingly this paragraph is replaced with the following:

- Gratuitous services outside of Australia is required if you have been approved for an extension of cover for practice outside of Australia to provide gratuitous aid work services to disadvantaged locals. Refer to 'Gratuitous Services' for further information.

## Product liability

In the *Members' Insurance Covers Handbook* on page 11 it states:

We will not insure you:

12.5.7 for any claim, investigation or proceeding arising out of the importation, manufacture, distribution or sale of any product with the exception of prescribing products on the Australian Register of Therapeutic Goods. However, Dental members are covered for the use of products not on the Register that are not required to be to be registered under the Therapeutic Goods Act 1989.

This should read and is replaced with the following:

We will not insure you:

12.5.7 for any claim, investigation or proceeding arising out of the importation, manufacture, distribution or sale of any product, **however we will insure you for:**

- a) **prescribing a product listed on the Australian Register of Therapeutic Goods (ARTG);**
- b) **the manufacture, distribution or sale of a product, including a dental product, if you are a dental practitioner and that product is listed on the ARTG or is a material not required to be registered on the ARTG.**

## Your membership classification

Your MIPS membership classification is made up of your **category**, practice **basis** and **endorsements**. This determines the extent of your practice that is indemnified. For example:

**Category:** General practitioner

**Basis:** Gross private billings/salary

**Endorsements:** Gratuitous services outside of Australia, Minor cosmetics

**You should ensure your membership classification best describes the healthcare services you provide currently as well as for any prior practice in your risk history. If your membership classification is incorrect or you do not provide the necessary information for MIPS to determine your membership classification you may prejudice the membership entitlements available to you including insurance covers.**

You are not entitled to the benefits of membership, including cover under the Indemnity Insurance Policy, for the provision of healthcare outside your membership classification or where you do not hold appropriate recognised qualifications, training and experience.

The benefits of MIPS membership apply throughout all Australian states and territories. Your **practice location** should reflect where you generate the majority of your non-employer indemnified (private) practice gross billings/ and or salary in a membership period or where you undertake the majority of your practice (hours) if you are employer indemnified. If you undertake work (eg locums) in multiple locations, you should provide the state where you intend to undertake the majority of your work in a membership period. You may submit all queries regarding your membership classification and/or nature of practice to [info@mips.com.au](mailto:info@mips.com.au)

## General requirements

Members must practice within the constraints of any restrictions or practice conditions imposed by AHPRA or its healthcare practitioner boards and comply with guidelines and requirements issued by their registration body and colleges.

There is a general requirement that every member has the appropriate training, qualifications and experience for the healthcare services they provide or supervise and if required have appropriate supervision. This applies even if such services are normally provided by the majority of practitioners in the category.

Members are expected to undertake the provision of healthcare services in a facility that holds appropriate accreditation and have available appropriate resources for the range of services that will be provided.

## Changing your practice type or location

You are required to notify MIPS of any change in the nature of healthcare services you provide or practice location as soon as you become aware of the change to ensure you do not prejudice your membership benefits including insurance covers.

Any change to your membership details may result in an amendment (additional fee or refund) to your membership fee.

You may also be required to sign a disclaimer confirming that you have notified or otherwise disclosed to MIPS all material matters when you seek retroactive changes to your membership.

## Your category

Your category should reflect your AHPRA registration or the specialty in which you are undertaking an accredited training program (or unaccredited registrar position). Members who hold multiple healthcare registrations or specialties must select a category that appropriately reflects the highest risk practice. Contact MIPS to determine the higher risk category.

Some categories will be determined by the description of the level of practice within your specialty in a non-employer indemnified (private) setting, for example **procedural or non-procedural**. Where a category includes a **list of treatments and procedures** these are not intended to be exhaustive and may vary from year to year dependent upon our claims experience, treatment developments and innovations, views of colleges, professional associations and AHPRA, claims expectations and views of insurers and reinsurers.

Some types of practice may be excluded when undertaken in a non-employer indemnified (private) setting. Categories may contain exclusion(s) and you should check these carefully.

## Your practice basis

You will be required to provide information regarding the level and type of practice you undertake to determine an appropriate practice basis.

The type of information we require to determine your practice basis includes but is not limited to your level of training, the amount you bill annually for non-employer indemnified (private) services, the type of non-employer indemnified (private) services you undertake or if you are fully employer indemnified for all your practice.



**Clinical training / study** applies if you are a Healthcare Student or you are undertaking 'pre-registration' activities before obtaining your AHPRA registration.



**New graduate** applies if you have graduated within the current membership period (ie financial year) and you have not yet commenced a registrar or specialist training program or position. International graduates should not declare as their year of graduation the year they were awarded their AMC certificate, but rather the year they first obtained their equivalent of Australian healthcare qualification (eg MBBS, BDSc, etc).

Non-employer indemnified (private) practice covered under your category is included as long as that practice is commensurate with your training, qualifications and experience with appropriate supervision arrangements in place (if applicable). Cover and benefits will be limited for medical practitioners to practise only as allowed under their Provisional Registration.

This basis excludes non-employer indemnified (private) practice if 'Employer indemnified only' is appended to your basis. This basis is not eligible for the 'Minor cosmetic extension' endorsement.



**Recent graduate** applies if you have graduated within the last 5 years and you have not yet commenced a registrar or dental specialist training program or position.

Non-employer indemnified (private) practice covered under your category is included as long as that practice is commensurate with your training, qualifications and experience with appropriate supervision arrangements in place (if applicable).

This basis excludes non-employer indemnified (private) practice if 'Employer indemnified only' is appended to your basis. This basis is not eligible for the 'Minor cosmetic extension' endorsement.



**Registrar** applies if you are undertaking an accredited registrar training program or practise in a non-accredited registrar position.

International practitioners who are undertaking a period of supervised practice prior to obtaining AHPRA recognition as a specialist or undertaking a period of supervised practice as a specialist who may not be working towards AHPRA recognition may also be eligible for the 'Registrar' basis.

This basis extends to additional non-employer indemnified (private) practice outside of your training program or registrar position, covered under your category, as long as that practice does not constitute more than 50% of your hours worked per week (annualised) and is commensurate with your training, qualifications and experience with appropriate supervision arrangements in place (if applicable).

This basis does not apply to obstetric services (other than 'shared care' antenatal consulting), bariatric surgery, spinal surgery and neurosurgery when undertaken in a non-employer indemnified (private) setting.

This basis does not apply to non-employer indemnified (private) practice if 'Employer indemnified only' is appended to your basis. This basis is not eligible for the 'Minor cosmetic extension' endorsement.

Members who already hold, or obtain, an Australian specialist qualification are not eligible for the 'Registrar' basis.



**Employer indemnified only** applies if you are fully indemnified by your employer for all your healthcare practice regardless of whether you are in a public or private setting. This basis will not provide indemnity for civil claims.

Refer 'Employer indemnified practice' for further information. Refer to 'Run-off basis' if you have 'ROCS past private practice' appended.



**Dentist in training** applies if you are a general dentist and you have commenced a specialist dental qualification. Cover is provided for additional non-employer indemnified (private) practice outside of your training program, covered under your category, as long as that practice does not constitute more than 50% of your hours worked per week (annualised) and is commensurate with your training, qualifications and experience with appropriate supervision arrangements in place (if applicable).

This basis will exclude non-employer indemnified (private) practice if 'Employer indemnified only' is appended to your basis. This basis is not eligible for the 'Minor cosmetic extension' endorsement.

Members who already hold an Australian specialist qualification are not eligible for the 'Dentist in training' basis.



**Gratuitous services only** applies if you are no longer undertaking remunerated (paid) healthcare practice in Australia and your membership provides run-off cover for your previous practice. In addition to this, you undertake gratuitous (unpaid) healthcare activities in Australia, such as prescribing and referral services, where you continue to hold appropriate AHPRA registration (where required).

This basis does not apply to remunerated (paid) healthcare activities.

Refer to 'Run-off basis' and 'Ceasing practice in Australia' for further information.



**Gross private billings/salary** applies if you undertake non-employer indemnified (private) practice and your type of practice means you are ineligible for another basis.

Refer to 'Estimating hours, billings and/or salary' for further information.



**Hours per week** applies if you are a dental hygienist, prosthetist or therapist or oral health therapist and you undertake non-employer indemnified (private) practice.

Refer to 'Estimating hours, billings and/or salary' for further information.



**MIPS Protections Plus** applies if you have an indemnity arrangement in place with a provider other than MIPS that meets your AHPRA registration indemnity requirements but wish to access the other benefits of MIPS Membership including:

- 24/7 advice and support from experienced practitioners
- MIPS Protections discretionary cover for non-healthcare professional and personal matters arising from your clinical activities
- Accredited professional development education and resources
- Personal accident and travel cover
- other membership benefits

This membership basis excludes indemnity cover for civil claims and you cannot make a claim through the MIPS Members' Indemnity Insurance, or MIPS Members' Practice Entity policies. Cover is not available under the Cyber Private Enterprise Policy.



**Non-operating surgeon** applies if you are a surgeon and your non-employer indemnified (private) practice is limited exclusively to consultations for example seeing patients for second opinions, clinico-legal assessments and examinations for those purposes.

You may also undertake surgical assisting in this basis.

If you undertake any procedures in your consultations, you should refer these for assessment by MIPS.



**Non-practising** applies if you have ceased all healthcare practice in Australia and your membership provides run-off cover for previous practice. The type of run-off cover you are eligible for will be appended to this basis.

This basis does not provide any cover for employer indemnified practice or volunteer services.

Refer to 'Run-off basis' and 'Ceasing practice in Australia' for further information.



**Reciprocal** applies if you are practicing in Australia under the MPS/MIPS reciprocal arrangement and you are fully employer indemnified for all your healthcare practice regardless of whether you are in a public or private setting. This basis will not provide indemnity for civil claims.

Refer 'Employer indemnified practice' for further information.



**Surgical assisting only** applies if you are a specialist (excluding general practitioners) and your non-employer indemnified (private) practice is limited exclusively to surgical assisting.

## Run-off cover basis

There are different types of run-off cover, ERP (extended reporting period) or ROCS (Run-Off Cover Scheme), which will depend on your eligibility. A run-off cover basis will be appended to your membership classification.



**ERP** applies if you have ceased healthcare practice (temporarily or permanently) in Australia.



**ERP loyal** applies if you have ceased ALL healthcare practice permanently and have been a MIPS member for five continuous years.



**ROCS** applies if you have met the Australian Government Scheme eligibility criteria.



**ROCS past private practice** applies if you have met the eligibility criteria for ROCS for past private practice and you continue to work in an employer indemnified position.

Refer 'Ceasing practice in Australia' for further information.

## Your endorsements

Some types of practice you undertake may require an 'endorsement' to extend or restrict your coverage.



**Minor cosmetics extension** is required if you undertake, prescribe or supervise specified minimally invasive office-based cosmetic procedures and the billings relating to those services do not exceed 50% of your annual total gross private billings.

Minor cosmetic procedures include:

- botulinum toxin (Botox) injections
- injections of non-permanent dermal fillers (including collagen, fat)
- superficial chemical peels
- superficial dermal resurfacing, including laser procedures.

All other cosmetic procedures should be referred for assessment.

Refer 'Cosmetic procedures' for further information.



**Spinal surgery extension** is required if you are an orthopaedic surgeon and you undertake spinal surgery in a non-employer indemnified (private) setting.



**Non specialist undertaking procedural GP activities** is required if you are in either the 'Medical officer' or 'General practice' categories and you undertake unsupervised procedural GP activities

in a non-employer indemnified (private) setting.

Refer 'GP Procedural' for further information.



**Specified dental procedures extension** is required if you are a general dentist and you undertake the following 'specified dental procedures' in a non-employer indemnified (private) setting:

- surgical placement of dental implants
- bridgework, crowns or veneers in excess of three units on adjacent teeth including inlays and onlays
- conscious sedation as defined by AHPRA
- maxillo-facial or dento-alveolar surgery by non-specialists in high risk situations (high-risk situations include severe tooth impaction and where teeth are in close approximation to critical structures such as nerve supply and sinuses).

Contact MIPS if you have concerns regarding what is considered a 'high risk situation'.

If you undertake botulinum toxin (Botox) or non-permanent dermal fillers for cosmetic purposes refer to the 'Minor cosmetic extension' endorsement.



**Bariatric surgery extension** is required if you are a general surgeon and you undertake bariatric surgery in a non-employer indemnified (private) setting.

This endorsement is also required if you are undertaking locums or volunteering to cover for colleagues where you may have to manage postoperative care of bariatric surgery patients.



**Gratuitous services in Australia** is required if you are a fully employer indemnified practitioner for all your healthcare practice and you undertake gratuitous services in Australia that are not employer indemnified.

Refer to 'Gratuitous Services' for further information.



**Employer indemnified outside of Australia** is required if you have been approved for an extension of cover for practice outside of Australia to undertake an employer indemnified placement.



**Gratuitous services outside of Australia** is required if you have been approved for an extension of cover for practice outside of Australia to provide gratuitous aid work services to disadvantaged locals.

Refer to 'Gratuitous Services' for further information.

- Indemnity insurance cover is capped at 6 calendar months or 184 days (the same as the travel cover)
- Excludes matters within the USA, US territories or where US law applies
- Cover is extended to you and a limit of one employee accompanying you



**Sporting & cultural outside of Australia** is required if you have been approved for an extension of cover for practice outside of Australia to accompany an Australian sporting or cultural group. Cover will only apply when treating Australian nationals.

## Employer indemnified practice

You will receive cover and benefits for employer indemnified practice (unless you are in a non-practising classification).

Employer indemnified practice refers to practice where your employer has agreed to indemnify you (to meet your AHPRA registration indemnity requirements) for any civil claims as a result of your acts, errors and omissions in carrying out your duties. This type of practice is usually undertaken in a public hospital setting however you may also be indemnified by your employer in a private setting.

If you are employed as a contractor, and you have received confirmation from the hospital, clinic or locum agency that you are indemnified for civil claims that arise from your healthcare practice, then your practice is considered to be 'employer indemnified'.

If you are uncertain of your indemnity arrangements, you should seek confirmation from your employer as MIPS cannot provide that confirmation. Medical practitioners employed under contract in the public hospital system may contact the Australian Salaried Medical Officers Federation (ASMOF) for advice regarding the indemnity provided under their contract.

Cover and assistance can be provided by MIPS for a range of matters that may not be covered by your employer and may include:

- professional disputes with your employer (eg hospital)
- registration boards' complaints
- coroner's inquests
- healthcare services commissioners' matters (eg NSW Health Care Complaints Commission, Victorian Health Complaints Commission, Office of the Health Ombudsman Queensland)
- investigations by state drug and poisons services
- general assistance and clinico-legal advice on issues such as informed consent, testamentary capacity, whether a death needs to be reported to the coroner, release of medical records etc.

Members may also approach MIPS for assistance if they have concerns that their employer is not meeting or is unable to meet their obligations to them (eg due to conflict of interest).

MIPS will not provide indemnity for civil claims for any employer indemnified practice.

## Estimating hours, billings and/or salary

If you undertake non-employer indemnified (private) practice you may be required to provide an estimate of your gross private billings and/or salary or total hours worked per week.

If you are required to provide billings and/or salary for your non-employer indemnified (private) practice, MIPS will require you to estimate the:

- **billings** generated by you from **all** areas of your private practice whether retained by you or otherwise, and before any apportionment or deduction of any expenses and/or tax
- **salary** you receive for private practice where billings are not generated under your provider number (or billed by a third party of your behalf).

The salary amount excludes any amount already provided as estimated billings. If you are required to provide your total **hours** per week we will also request you nominate the percentage of hours that relate to non-employer indemnified (private) practice.

Where indemnity is provided by your employer the hours, billings and/or salary from that practice is not included in the above estimate(s).

Your estimated gross private practice hours, billings or salary will be annualised and applied to all pro-rata periods you require cover for, and a billings/salary or hours band may be appended to your practice basis.

Members are required to notify MIPS as soon as they become aware that their estimated hours, billings and/or salary does not accurately reflect the level of cover required for the membership period. Amending these details may result in an adjustment to your membership fee.

## Cosmetic procedures

A cosmetic/aesthetic treatment or procedure is defined as a procedure which has as its primary purpose the alteration of the non-pathological external appearance of a patient.

This does not apply to intra-oral dental procedures such as:

- teeth whitening/bleaching
- crowns/veneers.

If you undertake, prescribe or supervise any cosmetic services, you are required to have recognised qualifications, training and experience as well as maintain an appropriate level of indemnity cover, including if the services are undertaken by a third party. If you undertake 'minor cosmetic' procedures as defined by MIPS your membership must be endorsed. Refer 'Endorsements' for a list of procedures.

If you undertake any other cosmetic procedures (unless stated as included within your speciality) or if your cosmetic services will exceed 50% of your annual total gross private billings, you must provide details to MIPS.

All dental practitioners (including allied dental health) are required to comply with any policies or guidelines provided by the Dental Board of Australia. All queries regarding this should be referred directly to AHPRA.

Any additional membership fee charged reflects the very high risk associated with cosmetic work. Actions are more readily defensible where a procedure is performed by a healthcare practitioner who can demonstrate certified satisfactory completion (preferably by formal examination) of accredited postgraduate training.

## Shared antenatal care

Shared antenatal care includes uncomplicated low risk pregnancies when the patient has been referred to and accepted as a patient in writing at an early stage of pregnancy by either:

- a hospital for obstetric management as a public patient or
- a GP obstetrician or specialist obstetrician for obstetric management as a private patient.

Shared care arrangements require that you have recognised qualifications, training and experience and work collaboratively under the direction (that may include protocols and supervision) of the practitioner or hospital responsible for the patient's obstetric care. You must not become involved, or have the intention of becoming involved, in the induction or management of labour or delivery. The only exception is for public patients in a public setting where you are indemnified by the hospital.

## Supervising other practitioners

If you are supervising other practitioners (including students, nurses and trainees) you are required to have the recognised qualifications, training and experience for the services you supervise as well as maintain an appropriate level of indemnity cover for those services.

Appropriate supervision arrangements must be in place and may include both direct supervision and indirect supervision where there continues to be adequate access to communication, oversight, interaction, direction and support after initial instruction has been provided.

Queries regarding supervision arrangements should be directed to [info@mips.com.au](mailto:info@mips.com.au)

## Telehealth services

Telehealth is defined as healthcare provided over the internet, by video conference or telephone to patients in Australia in accordance with AHPRA, college and Medicare requirements.

Cover for telehealth requires the same standard of care as any other provision of healthcare and if the medium is not appropriate for a patient, members are expected not to offer telehealth consultations.

If you undertake non-employer indemnified (private) telehealth services, before MIPS can confirm cover you are required to provide further information for assessment by completing the *Practice Assessment Questionnaire* form at [mips.com.au/forms](https://mips.com.au/forms)

Under Australian law, the location of the patient is where the healthcare is considered to be provided. Any communication to patients via an electronic device is likely to constitute telehealth.

The benefits of MIPS membership do not extend to protect you for healthcare provided via telehealth to a patient located outside Australia. Professional registration or licensing may also be required for the jurisdiction in which your patient is physically located.

You should advise patients you are unable to provide telehealth advice if they are located outside of Australia.

## Gratuitous services

Gratuitous services are services where you receive no remuneration and patients or others are not charged for your involvement for the services you undertake. This may include services such as prescribing and writing referrals and volunteer services.

In general, gratuitous services are covered when provided in Australia if an appropriate membership classification is selected for the services you expect to provide.

You may require assessment if:

- you volunteer in a high-risk setting (for example motor or professional sport events) and you are not an emergency medicine specialist.
- you will undertake unsupervised activities for which you would normally require supervision.
- you will undertake activities not covered under your membership classification.

An endorsement is required if you are in an employer indemnified only classification and you undertake gratuitous services in Australia.

You must ensure that you hold the appropriate AHPRA registration for undertaking your proposed services.

## Clinical trials

This endorsement will apply if you undertake clinical trials. You must:

- Hold current AHPRA medical practitioner registration and have appropriate training, experience and qualifications for the healthcare activities undertaken
- Have an appropriate MIPS membership classification for the healthcare activities undertaken
- Have obtained ethics approval from a currently registered Human Research Ethics Committee with National Health and Medical Research Council (NHMRC) eg Bellberry
- Only treat patients located within Australia.

You **ONLY** need to apply for cover if you do not meet the above criteria, visit [mips.com.au/forms](https://mips.com.au/forms) to apply.

## Ceasing practice in Australia

If you have ceased practice (temporarily or permanently) you will need to maintain run-off cover to ensure that you remain covered for emerging claims from your prior practice in Australia and continue to meet your AHPRA requirements. The type of run-off cover will depend on your individual circumstances.

If you cease practice in Australia (permanently or temporarily) MIPS can offer run-off cover for your past practice in an extended reporting period (**ERP**) membership classification. The cost of ERP cover is calculated on your individual risk history and will vary for each member. If you have been with MIPS for five continuous years and you are permanently retiring from all healthcare practice you will be eligible for ERP loyal run-off cover which is offered at \$50 per annum.

After three years of no private practice in Australia, medical practitioners may become eligible for the Run-off Cover Scheme (**ROCS**), an Australian Government scheme that offers run-off cover at no cost to eligible practitioners. In some circumstances, such as maternity leave or retirement over the age of 65, medical practitioners may be immediately eligible for ROCS from the date they cease practice. See 'Government assistance schemes' for more information.

If have ceased practice in Australia (or will cease prior to 30 June), complete the *Ceasing Practice Form* online at [mips.com.au/ceasing](https://mips.com.au/ceasing)

## Student

A student membership category may apply if:

- You are a student currently studying a healthcare discipline (medicine, dentistry, oral health or nuclear medicine) at a recognised education provider in Australia.
- You are currently studying a healthcare discipline (medicine, dentistry, oral health or nuclear medicine) outside of Australia and you will undertake an Australian placement.
- You are undertaking any other pre-registration healthcare activities prior to obtaining AHPRA registration.

**Cover under the MIPS Members' Practice Entity Policy does not apply to the Student membership categories. Unless stated otherwise, students receive limited cover under the MIPS Members' Personal Accident Policy. See the *Members' Insurance Covers Handbook* for terms and conditions.**



### Healthcare student

This category is suitable for students currently studying a healthcare discipline (medical, dental science, oral health or nuclear medicine technology) at a recognised education provider in Australia and students currently studying an equivalent healthcare discipline at a recognised education provider outside of Australia undertaking a temporary placement in Australia. It includes cover for activities such as:

- observation, taking a history or performing the physical examination of a patient
- writing a patient management plan and interpreting investigations
- administration and principles of admitting and discharging patients
- communicating with patients, relatives and staff
- basic clinical activities (dressing wounds, venepuncture, cannulation, suturing, assisting in surgery)
- basic dental activities (scale/clean, oral health instruction, simple extractions, restorations).

You are automatically covered for placements/electives/clinical rotations (excluding the US or where US law applies) provided you meet the criteria. There is no need to notify us, cover is automatically provided if the activities undertaken are commensurate with the level of education, training and experience for a healthcare student and you are:

- appropriately supervised by a registered healthcare practitioner (which includes direct or indirect supervision that provides adequate access to communication, oversight, interaction, direction and support from your supervisor throughout the activity)
- not being remunerated for the healthcare activities undertaken
- not undertaking volunteer activities (eg St Johns, charity groups etc)

Cover for a placement that does not meet the above criteria is subject to approval and you can apply at [mips.com.au/placement](https://mips.com.au/placement).



### Pre-registration practice

This category is suitable for practitioners undertaking healthcare activities, including observerships, prior to obtaining AHPRA registration.

**If you have obtained AHPRA registration (or you will have obtained it by the time you commence practice) you are not eligible to select this category.**

Members in this category may undertake pre-registration activities under complete supervision of an Australian registered healthcare practitioner but must not provide any healthcare of a type required to be provided by a registered healthcare practitioner or be responsible in any way for patient management. Membership benefits including insurance covers for those undertaking pre-registration placements will extend to supervised healthcare activities (commensurate with their experience) listed below:

- observation, taking a history or performing a physical examination of a patient
- writing a patient management plan and interpreting investigations
- administration and principles of admitting and discharging patients
- communicating with patients, relatives and staff
- basic clinical activities (dressing wounds, venepuncture, cannulation, suturing, assisting in surgery)
- basic dental activities (scale/clean, oral health instruction, simple extractions, restorations).

Practitioners undertaking pre-registration placement activities are required to be appropriately supervised for any healthcare activities they undertake. Appropriate supervision includes direct or indirect supervision that provides adequate access to communication, oversight, interaction, direction and support from your supervisor throughout the activity.

## Medical

### Non specialists

These categories apply to medical practitioners that hold general, limited or provisional registration only and have not yet commenced an Australian registrar/training program, specialist recognition pathway or registrar position.

When selecting a category, it should reflect where you generate the majority of your non-employer indemnified (private) practice gross billings in a membership period or where you undertake the majority of your practice (hours) if you are employer indemnified only.



#### Medical officer

This category applies to practitioners who practice in a hospital (or non general practice) setting.

This category limited to unsupervised practice listed under the **GP non-procedural category**.

An endorsement is required if you are undertaking any services listed under the **GP procedural category** and/or any **minor cosmetic services** as defined by MIPS



#### General practice

This category applies to general registration practitioners who practice in a general practice setting.

This category is limited to unsupervised practice listed under the **GP non-procedural category**.

An endorsement is required if you are undertaking any services listed under the **GP procedural category** and/or any **minor cosmetic services** as defined by MIPS.

## General practitioners

These categories apply to practitioners that hold specialist registration, are vocationally registered or are permitted to practise as a specialist. These categories should also be selected if you are undertaking an accredited registrar training program or practise in a non-accredited registrar position. If you do not meet these criteria refer to category 'General practice' under Non specialists.



### GP non procedural

This category applies to general practitioners who undertake treatments, procedures or practice most GPs commonly perform in their rooms. It does not include all the treatments, procedures or practice that GPs *could* perform in their rooms.

Although such procedures or treatments are usually carried out in a GP's surgery/consulting rooms, they may also be performed in patients' residences, hospitals and other healthcare facilities.

Procedures include:

- repair of superficial lacerations of skin and subcutaneous tissue
- removal of superficial skin lesions, tumours and cysts
- biopsy of skin lesions (including punch biopsies)
- removal of foreign bodies, including superficial corneal and aural
- incision and drainage of superficial abscesses
- eyelid – excision/curettage of chalazion
- cautery and cryotherapy of superficial skin lesions
- electrocautery of nose bleeds
- drainage of thrombosed external haemorrhoids
- reduction of simple closed joint dislocations
- treatment of simple fractures – not requiring reduction or anaesthesia
- local anaesthesia (not including regional blocks)
- acupuncture (including laser acupuncture)
- aspiration of and/or intra-articular injections into peripheral joints (not spine)
- insertion of IUCDs when approved by MIPS (training documentation to be provided)
- removal of IUCDs
- avulsion of a toenail (may include wedge resection but excluding total removal of nail bed)
- Implanon NXT insertion and removal when approved by MIPS (training documentation to be provided)
- proctoscopy/sigmoidoscopy (without biopsy)
- syringing of the external auditory canal
- insertion of urinary catheters
- venepuncture and simple insertions of IV lines/IV drug therapy
- allergy testing/desensitisation

- arterial blood gas estimations
- blood transfusions
- surgical assistance
- skin flaps and grafts when approved by MIPS
- shared antenatal care in consultation with a hospital or specialist obstetrician or GP obstetrician (see 'shared antenatal care' definition)
- exercise ECG (with appropriate resuscitation facilities)
- post mortems
- lumbar puncture.

This list is not exhaustive. Queries should be directed to [info@mips.com.au](mailto:info@mips.com.au)

An endorsement is required if you undertake any **minor cosmetic services** as defined by MIPS.

The 'GP non procedural' category does not apply to the following practices when undertaken in a non-employer indemnified setting:

- obstetric services other than 'shared antenatal care' (see 'Shared antenatal care' definition)
- perinatal care
- procedures listed under GP procedural
- administering and monitoring sedation for procedures such as (but not limited to) gastroscopy and colonoscopy
- anaesthesia or intravenous/intravascular sedation (other than those performed under local anaesthesia including finger and toe blocks)
- neurosurgery, bariatric surgery and spinal surgery
- other procedures normally undertaken by medical specialists unless agreed in writing by MIPS.

### **After hours deputising services**

If you are undertaking after-hours activities, this category applies provided the activities are of a non-procedural GP nature.

Cover can apply for dispensing/supplying medications during after-hours consultations when approved by MIPS.

### **Skin flaps and grafts**

If you are performing small skin flaps and grafts in this category, you should advise MIPS of the size, location, types of patients and purpose of the flaps and grafts to ensure if this category is appropriate. This is to assess the level of risk involved. For example, small flaps on the face of a child are considered higher risk than larger flaps on the upper leg of an adult.



## GP procedural

This category applies to general practitioners who perform procedures not covered under the non-procedural category definition and/or procedures usually performed under regional or general anaesthesia or sedation or neurolept-analgesia. This category should be selected even if such procedures are performed without anaesthesia.

Procedures include:

- accident and emergency activities undertaken in rural and remote settings
- skin flaps and grafts
- arterial line insertion
- bronchoscopy
- vasectomy
- male circumcision
- colposcopy
- chest tube/drains
- sclerotherapy of varicose veins
- D&C uterus and termination of pregnancy (up to 20 weeks)
- syringing tear ducts
- hyperbaric medicine
- regional anaesthesia excluding spinal or epidural
- minor general surgical procedures (eg haemorrhoids and hernia repairs)
- IV Sedation using Fentanyl / Midazolam / Diazepam / Valium (other sedatives to be referred to [info@mips.com.au](mailto:info@mips.com.au) for approval).

This list is not exhaustive. Queries should be directed to [info@mips.com.au](mailto:info@mips.com.au)

An endorsement is required if you undertake any **minor cosmetic services** as defined by MIPS.

The 'GP procedural' category **does not** apply to the following practices when undertaken in a non-employer indemnified setting:

- obstetric services other than 'shared antenatal care' (see 'Shared antenatal care' definition)
- perinatal care
- sedation muscle relaxant or anaesthesia agents such as Diprivan
- neurosurgery, bariatric surgery and spinal surgery
- other procedures normally undertaken by medical specialists unless agreed in writing by MIPS.



### GP procedural including anaesthetics and/or obstetrics

This category applies to GP obstetricians (DRANZCOG or equivalent) or GP anaesthetists (JCCA or equivalent).

Procedures include:

- regional anaesthesia (beyond digital blocks)
- general anaesthesia
- administering agents other than narcotic/benzodiazepine combinations
- private obstetric services beyond shared antenatal care in a healthcare facility.

This list is not exhaustive. Queries should be directed to [info@mips.com.au](mailto:info@mips.com.au)

If you are training and undertaking unsupervised obstetrics or anaesthetic services in a non-employer indemnified (private) setting submit your details for assessment to [info@mips.com.au](mailto:info@mips.com.au)

An endorsement is required if you undertake any **minor cosmetic services** as defined by MIPS.

The 'GP procedural including anaesthetics and/or obstetrics' category **does not** apply to the following practices when undertaken in a non-employer indemnified setting:

- any involvement in planned home births
- neurosurgery, bariatric surgery and spinal surgery
- other procedures normally undertaken by medical specialists unless agreed in writing by MIPS.

## Other medical specialists

These categories apply if you hold the recognised AHPRA specialist registration and practice within the specialty. These categories should also be selected if you are undertaking an accredited registrar training program or practice in a non-accredited registrar position. If you do not meet these criteria refer to category 'Medical officer' under Non specialists.

An endorsement is required if you undertake any **minor cosmetic procedures** as defined by MIPS unless stated within your category that cover is provided for cosmetic services.

If you have any queries on the category description or if your specialty is not listed contact MIPS.



### Anaesthesia

Practice in this category also includes:

- intensive care medicine
- pain medicine when approved by MIPS.



### Cardiothoracic surgery



### Cosmetic proceduralist

This category applies if:

- your minor cosmetic services exceed 50% of your annual total gross private billings
- you are a plastic surgeon, dermatologist, ophthalmologist, otolaryngologist or vascular surgeon and your approved cosmetic services exceed 50% of your annual total gross private billings
- you are any other type of practitioner and you undertake any cosmetic procedures other than minor cosmetic procedures
- you have been advised by MIPS.

See 'Cosmetic procedures' definition



### Dermatology

This category also applies to dermatologists who perform cosmetic procedures provided those services:

- fall within the scope of your accredited training; and
- generate less than 50% of your gross private billings.

If your cosmetic procedures exceed 50% of your total gross private billings or you undertake laser blepharoplasty, meloplasty and similar procedures you will need to select the 'Cosmetic proceduralist' category.



### Emergency medicine

Practice in this also category includes:

- anaesthesia
- intensive care medicine
- pain medicine when approved by MIPS.



### General surgery

An endorsement is required if you undertake **bariatric surgery** in a non-employer indemnified (private) setting. Bariatric surgery, commonly referred to as weight loss surgery, refers to the various surgical procedures performed to treat obesity by modification of the gastrointestinal tract to reduce nutrient intake and/or absorption. This includes surgeons undertaking locums or volunteering to cover for colleagues where they may have to surgically manage postoperative care of bariatric patients.



### Gynaecology including IVF

This category **does not** apply to the management or induction of labour in a non-employer indemnified (private) setting. If you undertake these services, you are required to select 'Obstetrics and gynaecology'.

Gynaecologists who perform ultrasound (including diagnostic O&G imaging) only, should select the Radiology category.



### Intensive care medicine

Practice in this category also includes:

- pain medicine when approved by MIPS.



### Neurosurgery



### Medical administration

This category applies to practitioners that hold specialist registration in medical administration.

This category applies where your practice is restricted to medical administration activities.

This category does not apply to any clinical activities.



### Obstetrics and gynaecology

This category applies to the management or induction of labour in a healthcare facility in a non-employer indemnified (private) setting.

This category does not apply to any involvement in planned home births.



### Ophthalmology

This category also applies to ophthalmologists who perform cosmetic procedures provided those services:

- fall within the scope of your accredited basic training; and
- generate less than 50% of your gross private billings.

If your cosmetic procedures exceed 50% of your total gross private billings or you undertake refractive laser therapy, outside a peer-reviewed university department you will need to select the 'Cosmetic proceduralist' category.



### Oral and maxillofacial surgery

This category also applies to oral maxillofacial surgeons who perform cosmetic procedures provided those services:

- fall within the scope of your accredited training; and
- generate less than 50% of your gross private billings.

If your cosmetic procedures exceed 50% of your total gross private billings you will need to select the 'Cosmetic proceduralist' category.



### Orthopaedic surgery

An endorsement is required if you undertake **spinal surgery** in a non-employer indemnified (private) setting.



### Otolaryngology head and neck surgery

This category also applies to otolaryngologists (also known as ENT surgeons or otorhinolaryngologists) who also perform cosmetic procedures provided those services:

- fall within the scope of your accredited basic training; and
- generate less than 50% of your gross private billings

If your cosmetic procedures exceed 50% of your total gross private billings you will need to select the 'Cosmetic proceduralist' category.



### Paediatric surgery



### Pathology

This category also applies to pathologists who hold physician qualification AND 50% or more of their gross non-employer indemnified (private) billings relate to pathology reporting services.



### Physician rehabilitation and occupational

This category includes physicians who undertake:

- occupational medicine
- pain medicine when approved by MIPS
- pre-employment and fitness for work medicals
- rehabilitation medicine.



### Physician non procedural

This category includes consultant physicians who practise in the disciplines/perform minimally invasive, lower risk procedures including:

- bone marrow biopsy
- cardiology (non-interventional & non-invasive)
- chemotherapy
- gastroscopy (excluding ERCP & colonoscopy)
- geriatric medicine
- haematology
- immunology
- medical oncology
- nephrology
- neurology
- paediatric medicine
- pain medicine when approved by MIPS
- proctoscopy
- renal biopsy
- respiratory medicine (including endobronchial ultrasound-guided transbronchial needle aspiration (EBUS TBNA) and transbronchial lung biopsy)
- sigmoidoscopy.

If you are a physician who also holds a pathology qualification you may also select this category provided pathology reporting activities generate less than 50% of your gross non-employer indemnified (private) billings.



### Physician procedural

This category includes physicians who perform invasive procedures including but not limited to:

- cardiology – interventional (ie cardiac catheterisation)
- colonoscopy
- endoscopic retrograde cholangio pancreatography (ERCP)
- endoscopic procedures
- liver biopsy
- pain medicine when approved by MIPS.



### Plastic surgery

This category also applies to plastic surgeons who perform cosmetic procedures provided those services generate less than 50% of total gross private billings and:

- fall within the scope of your accredited basic training or
- are listed as a minor cosmetic service as defined by MIPS.

If your cosmetic procedures exceed 50% of your total gross private billings you will need to select the 'Cosmetic proceduralist' category.



### Psychiatry

Practice in this category includes:

- electroconvulsive therapy (ECT)
- medico-legal reporting
- pain medicine when approved by MIPS.



### Radiation oncology



### Radiology

Practice in this category also includes:

- gynaecologists who perform ultrasound (including diagnostic O&G) only.



### Sport and exercise medicine



### Urology



### Vascular surgery

This category also applies to vascular surgeons who perform cosmetic procedures provided those services:

- fall within the scope of your accredited basic training; and
- generate less than 50% of your gross private billings.

If your cosmetic procedures exceed 50% of your total gross private billings you will need to select the 'Cosmetic proceduralist' category.

## Dental

These categories apply if you hold the recognised AHPRA general or specialist dental registration and practice within the speciality or you are undertaking a dental speciality training program.

All dental categories (excluding the oral and maxillofacial surgery category) require endorsement if you undertake any **minor cosmetic services** as defined by MIPS.

Please contact MIPS, if your speciality is not listed or you practice in multiple specialities.



### Dental therapist



### Dental hygienist

Practice in this category also includes:

- dental therapy.



### Oral health therapist

This category applies to practitioners that hold oral health therapist registration with AHPRA.



### Dental prosthetist



### Dentist

Practice in this category also includes dental specialties where you practice and bill as a non-specialist including:

- endodontics
- orthodontics
- prosthodontics.

An endorsement is required in this category if you undertake **specified dental procedures** as defined by MIPS in a non-employer indemnified (private) setting. See the 'Endorsements' section at the start of this 'Membership classification guide' for the 'specified dental procedures' definition.

## Dental specialists

 **Dento-maxillofacial radiology**

 **Endodontics**

 **Forensic odontology**

 **Oral and maxillofacial surgery**

This category also applies to oral and maxillofacial surgeons who perform cosmetic procedures provided those services:

- fall within the scope of your accredited training; and
- generate less than 50% of your gross private billings.

If your cosmetic procedures exceed 50% of your total gross private billings you will need to select the 'Cosmetic proceduralist' category

 **Oral medicine**

 **Oral pathology**

 **Oral surgery**

 **Orthodontics**

 **Paediatric dentistry**

 **Periodontics**

 **Prosthodontics**

 **Public health dentistry (Community dentistry)**

 **Special needs dentistry**

## Other healthcare

 **Nuclear medicine technologist**

This category applies to practitioners that hold nuclear medicine technologist registration with AHPRA.

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