

Consider this before you work for a Locum Tenens Staffing Organization...

Is the organization invested in protecting you?

As a Medical Protective insured, you already know how important it is to protect your reputation and assets, that's why you've chosen the best professional medical liability insurance available. Now you're thinking about working for a Locum Tenens organization that arranges your scheduling, credentialing, paperwork and insurance - sounds easy... but there are some important facts you should know:

Are they protecting your best interests in terms of your professional liability insurance?

Are they using a lesser product that could put you, your reputation and your assets at risk?

Ask questions. Compare Locum Tenens staffing organizations. In evaluating Locum Tenens organizations, it is equally important to understand not just the pay scale but also the overall benefits. There are locum tenens organizations that may choose to cut corners on their medical professional liability insurance as a cost-savings measure. It is in your best interests to make sure the organization you decide to work with values not only your skills, but also your protection.

1) **Ask to see their medical malpractice insurance policy.**

If they refuse, or avoid providing you with a copy of their current policy, this may be a warning sign. Once you obtain a copy, take the time to review it carefully. Compare it to your current Medical Protective policy. What does it cover? How is your current policy different?

2) **What kind of coverage are they offering – is it claims-made or occurrence? Do they offer occurrence?**

An occurrence policy is the best solution for a locum tenens doctor. You don't need to worry about tail coverage or whether or not the staffing organization is still with the same carrier. You likewise will not be dependent on the staffing organization doing "the right thing" by continuing to maintain coverage for your prior activities into the indefinite future. With an occurrence policy, the coverage trigger is whether the incident in question took place during the policy effective dates, making it much less complicated for the doctor in the long run.

3) **If they only offer claims made coverage, what assurances do you have that they will offer you a tail? How much will the tail cost and what limits will it offer?**

If you decide to go with a Locum Tenens staffing organization that only offers claims made coverage, it is in your best interests to know the details of the tail coverage. Are the limits sufficient? Is the tail coverage shared by a large number of doctors? Will coverage cease before the statute of limitations expires?

(over)

4) Does each healthcare provider have his/her own limits of liability, or does everyone share a single limit?

With your own limits you are assured that they will not be exhausted through payment of someone else's claims. However, if you are "sharing" limits, it's a "first come-first served" situation. There is the risk of a situation where there are not adequate remaining limits to cover additional claims and defense costs, possibly leaving your personal assets exposed. It is equally important to know if the limit is "expense depleting" (i.e., the cost of defense lowers the available policy limit).

5) How do the insurance carrier's financials rate compared to Med Pro?

Do the Rating Agencies deem the carrier financially secure and able to withstand adverse business conditions? It is in your best interests to have the backing and financial security of a carrier rated AAA, Excellent by S&P or A+, Superior by A.M. Best.

6) Is it a self-insured policy? Is the company that is providing coverage a risk retention group, captive or do they require deductibles?

If so, we highly suggest obtaining a copy of their financial reports for the last five years and reviewing them with your accountant. Does the company truly have the financial strength to cover all future claims?

7) Who's "on the hook" for the insurance in the event of closure or insolvency?

If the staffing organization closes its doors or the insurance carrier leaves the market, it is important to know who will provide the coverage for your prior activities and if your assets are exposed to current or future claims.

8) Is the insurance provider an admitted carrier in your state?

A licensed and admitted carrier is subject to the state's insurance regulations. Admitted carriers are subject to reviews of their financial viability and practices.

9) Is the insurance carrier an expert in medical malpractice? How long have they been in the medical malpractice field?

Should you have a claim, it is comforting to know that a medical malpractice claims expert will be leading your defense team—not someone who handled a worker's compensation case yesterday and will be handling a general liability case tomorrow. Make sure the claims staff focuses exclusively on medical liability claims.

10) Does their carrier utilize only the best local defense teams?

Superior local defense teams are critical to the success of any claim. Ask to see the list of the local firms they utilize. Ensure that they not only use the best law firms, but also employ experienced claim staff, and have access to a nationwide network of expert witnesses, public adjusters, reconstructionists and private investigators.

We recommend that any physician considering working with a locum tenens staffing organization do their homework up front.

Beware that there are those organizations that cut corners on medical malpractice insurance, because it cuts directly into their bottom line. There are also many fine staffing organizations that truly understand the importance of protecting its members professional reputations and assets – and address it accordingly.

Ask questions. Be your own advocate.

We care about you and want to make sure you are protected, even when you're out of our reach.