

INTRODUCTION

PPS Health Professions Indemnity was launched late in 2018. Health professions, like you, remain the largest single membership grouping within the PPS Group. It is, therefore, important for us to cater to your evolving protection needs. A shortage of quality indemnity protection coupled to the increased cost of indemnity and the ever-increasing risk of litigation created the opportunity for PPS to enter this market. As a company operating under the ethos of mutuality, we are perfectly placed to provide this important safety net to you.

PPS Health Professions Indemnity is designed to provide comprehensive quality indemnity protection to you for liability stemming from your clinical practice. This protection is available both during your active career and thereafter, ensuring sustainable cover that gives you the freedom to concentrate on making your practice a success.



PPS VALUES

Our organisational values informs the behaviour we demonstrate at PPS.



We take extreme ownership

We take full responsibility for our impact, avoid blame-shifting, tackle problems with solutions and act as owners of resources. We focus on results and expanding influence and understand that success comes from decisions, not conditions.



We are eternally curious

We are not satisfied with the status quo and are driven to constantly improve the solutions we offer to our members. We are committed to innovation, giving staff the licence to innovate and experiment while recognising and responding to the complex and changing needs of our current and future members.



We do the right thing

We not only conduct our business with empathy, authenticity and care, but also with the highest standards of ethics, fairness, governance and respect for all.





The best way to describe the cover provided, is that it caters for any liability stemming from your insured clinical practice.

Financial security

Underwritten by PPS Group on our PPS Short-Term Insurance licence, the product comes with the security you trust from us serving the financial interest of our members for more than 80 years.

caters for any liability stemming from your insured clinical practice. This includes legal representation as appropriate and indemnity against any successful damages claim against you. The following incidents are covered:

- Medico-legal advice
- HPCSA complaints and investigations
- Judicial inquiries
- Patient claims for damages

For clinical work performed as employees or independent contractors in the public sector, the State is responsible for patient claims for damages and no policy benefits are available for this.

Active engagement

This aspect of our service delivery receives the most compliments from our existing insured professionals. You have direct access to our most senior employees and this is of great comfort in your time of need. We appreciate a personal relationship with our insured professionals and do not use a call centre for servicing.



From the outset, we recognised that the solution must provide sustainable indemnity protection both during your active years in clinical practice and thereafter. PPS Health Professions Indemnity is the leader in providing you with contract certainty over continuing cover after your active cover, no matter what the reason is for termination of active cover. For most typical life stage changes, such as death, disability and retirement, this benefit is provided at no additional cost to you, provided that certain conditions are met.

Technically the product provides cover on the claims-made basis of cover. This means that you need to be covered both at the time of providing clinical treatment and at the time that the claim is reported. However, the contractual Reporting Endorsement benefit - included in your active policy - provides cover for late reported claims after the termination of your active cover. This way you get the best of both worlds: the cost-benefit associated with the claims-made basis of cover and the contract certainty over cover for late reported claims.

No two clinical practices are ever the same and we remain the only indemnity provider that individually underwrites every policy application received. This underscores our commitment to charge risk-based premiums across the portfolio and minimise cross-subsidisation between different disciplines. Factors considered in our underwriting decision include education and experience, clinical practice details and past indemnity experience.

Although self-reporting of incidents that may reasonably be considered to have the potential to result in a claim or complaint against you is encouraged, it is not a requirement for cover. The benefit of self-reporting is that it allows us to intervene early to protect you as best as we can, and additionally it helps you to effectively manage the use of your annual cover limits.

Cover limits are set consistently across disciplines and reflect our commitment to keep our members as far as possible out of harm's way.

It is our responsibility to regularly review the offered cover limits for appropriateness with reference to market conditions. The only time that cover limits have a material impact on indemnity cost, is if it is set so low that risk is not materially transferred from you to us leaving you with the possible risk of cover exhaustion.

We follow an active annual renewal process to ensure that both parties are in full agreement regarding the scope of the insured clinical practice. This assists you to remain in control of your cover and annual indemnity protection cost, something that is lost with auto-renewal processes employed by some of our competitors that often leads to challenges in the event of a claim.

GROUP PRACTICE COVER

Group practices represent an interesting risk to not only the individual health professionals active in the practice but also the owners and managers of such practices. This risk is seldom understood and addressed by many indemnity products available in South Africa. Patients and their legal counsel will usually look to add as many respondents as possible to any action brought in the hope of a larger payout.

Typically, indemnity products only cover the individual health professional actively involved in clinical treatment to the specific patient. Where the group practice entity and/or its owners and/or its managers are added as respondents to any action, the indemnity product will not respond to protect them. The same also applies to the non-clinical employees of the practice i.e., vicarious liability.

PPS Health Professions Indemnity is unique in that it provides cover to practice entities either on an individual cover limit or shared cover limit basis. Best of all, where all health professionals active in the practice are insured with us, the shared cover limit basis is provided at no additional cost providing an efficient way of protecting the interest of all involved in the group practice. Our group practice solution effectively wraps the clinical liability of the group as a whole.

PROFIT-SHARE

Not only will you enjoy comprehensive indemnity protection, but those insured professionals with an existing notional PPS Profit-Share Account™* will benefit from further allocations to this account based on their contract premium. Thanks to the PPS Profit-Share Cross-Holdings Booster**, you could qualify for an even bigger Profit-Share allocation because you are using products from more than one of our subsidiaries.

^{*} Members holding qualifying life-risk products share in the profit and the loss of PPS through the notional PPS Profit-Share Account™ and past performance is not necessarily indicative of future performance.

^{**} The PPS Profit-Share Cross-Holdings Booster is tiered according to the number of products a member holds across PPS subsidiaries and affiliates provided that they hold a PPS life-risk product. The Booster allocations may differ each year and allocations can take place annually which will be dependent on the profitability of PPS and its subsidiary/affiliates products. PPS reserves the right to discontinue this offering at its own discretion.



OUR INDEMNITY PHILOSOPHY

Known as the moment of truth in insurance, it is important to understand our approach to reported claims. We appreciate the emotional distress caused by complaints and claims and for this reason, we do not only provide the contractual benefits provided for in your policy. It is also important that we provide you with emotional support during this challenging time. We, therefore, follow a personal approach to claims where you have direct access to senior members of our team with a wealth of experience dealing with these matters.

The main objective of claims management is to protect the professional status of our insured professionals. We are on record to say that we will not merely settle claims lacking clinical merit for convenience sake. This undermines the system and increases the litigation risk for health professionals. Contractually, we are not allowed to settle any claim without your approval.

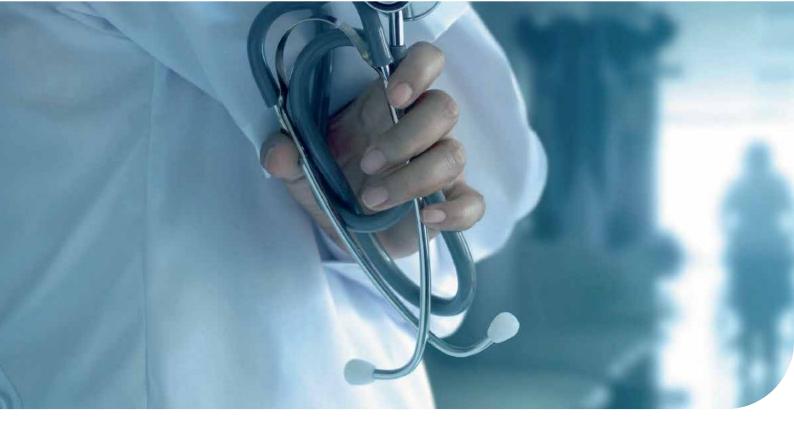
We have two of the leading medico-legal experts in the country working for us. Between them, they have more than 60 years of experience servicing South African health professionals in this regard. Where it is required to provide external legal representation, we have standing arrangements with reputable and suitably experienced legal firms to assist our insured professionals.

HOW TO APPLY

We appreciate that your time is valuable and that if you are talking to us, you are not earning an income from patient consultations. Our business processes are digitally enabled. This includes using an online application form. However, we remain available throughout the process should you prefer a more personal approach. This includes virtual meetings, telephone calls and in-person meetings as arranged.

- Online application form
 Complete the quick and
 - Complete the quick and easy online <u>application form</u>. This takes about 15 minutes to complete. You will require: ID, HPCSA/SANC/SACSSP, practice and VAT numbers; academic qualifications; previous indemnity details; and where relevant, previous indemnity loss history.
- Underwriting
 We use the information provided in the completed application form to assess your clinical risk and determine a risk-based premium for the disclosed clinical practice details.
- Quote
 Quote is e-mailed to you for your consideration. This consists of the exact policy documentation that will form the basis of your insurance cover with us. We are available should you have any questions regarding your quote.
- Acceptance
 The e-mailed quote is available for online acceptance where you will be asked to complete a debit order instruction and indicate your preferred payment frequency. Once submitted, your policy will be issued and e-mailed to you within a few minutes.

Typically, we allow three business days for the completion of the entire new business process but this can be fast-tracked where required.





CONTACT US

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