

APA Member Insurance Program

Frequently Asked Questions

1. Who is BMS?

BMS is the official and exclusive broker for the APA member insurance program.

BMS is a Lloyd's broker and has several global teams, including in Melbourne and Ottawa, dedicated to providing coverage, and value-added services to associations and its members. The Australian and Canadian operations provide coverage to more than 400,000 healthcare and regulated professionals through 70+ associations across Australia and Canada, including the Canadian Physiotherapy Association.

This experience gives BMS a unique insight and ability to create and deliver significantly enhanced and continuously evolving member centric insurance programs. This includes ensuring broad, market-leading coverage, evidence-based risk management and exceptional member service. To find out more visit www.bmsgroup.com/home

If you have any questions about the insurance program or APA Professional Indemnity Policy, contact BMS at 1800 931 068 or email apa@bmsgroup.com.

2. Why has the APA chosen BMS as their Insurance Partner?

Ensuring APA members have access to the most comprehensive coverage, additional, evidence-based risk management material and exceptional service for insurance queries and claims is paramount. BMS is a specialist broker dedicated to servicing associations and its members and will continue to enhance the APA Member Insurance Program.

3. What do I do if I have an open claim with my previous insurer?

If you have a current claim with your previous insurance company, you will need to continue dealing directly with them. Any new claims or notifications under the new insurance program can be directed to BMS on 1800 931 068.

4. What is Professional Indemnity (PI) Insurance?

Professional Indemnity Insurance protects you against allegations or claims of financial loss due to injury or damages that have resulted from a negligent act, error, omission, malpractice or breach of duty that has arisen out of your professional capacity as a Physiotherapist.

The APA PI policy will also respond to protect your reputation should a claim occur.

5. What is Public Liability Insurance?

Public Liability Insurance provides cover for bodily injury or property damage to a third party that occurs while conducting your professional activities.

This is primarily a legal defence costs cover but also covers settlement costs in the event that you are found to be liable and/or negligent in causing the injury or property damage.

6. What is Products Liability?

Products Liability Insurance covers an insured for actual or alleged bodily injury or property damage to a third party arising through use of a product sold, supplied, or manufactured by the insured.

7. What are the major benefits of the APA Professional Indemnity insurance Policy?

- \$20,000,000 Limit of indemnity per claim for Professional Indemnity and Public and Products Liability, and an annual limit of \$60,000,000.
- Cover is provided worldwide (excluding only the USA)
- No Excess
- \$50,000 Cyber Liability coverage for both your own costs as well as third party losses
- Unlimited retroactive cover for past activities
- Unlimited run-off cover when you have a leave of absence or retire
- Locum and mobile physiotherapists are insured
- Voluntary work is covered
- Cover for member therapy and counselling expenses in the event of a claim
- Access to free legal counsel with Lander & Rogers, a leading Allied Health law firm in Australia, in the event a complaint is made against you or you receive a notification from your regulatory body.

8. How do I know if I am covered?

Most APA membership categories include \$20M Professional Indemnity insurance. Eligible members will automatically receive a certificate of currency when membership is renewed each year. To confirm whether your Membership category includes insurance, please contact APA on 1300 306 622 or email info@australian.physio.

9. Can I opt out if I don't want the insurance in my membership?

You can opt out of the APA Insurance program at any time by contacting APA on 1300 306 622. While it's not compulsory to take up the APA policy, all Physiotherapists must have adequate Professional Indemnity Insurance to be registered.

10. Who do I call if I have any insurance-related questions or to discuss my insurance policy?

You can contact BMS on 1800 931 068 or by email at apa@bmsgroup.com.

11. Am I covered if I only provide treatment to animals?

Please contact BMS on 1800 931 068 or via email at apa@bmsgroup.com. Some Animal Physiotherapists may be required to pay an additional premium.

12. Am I covered if I treat family members?

No. There is no cover when you are providing your services to family members.

13. What happens if I have a leave of absence during the year?

The APA Professional Indemnity Policy has unlimited run-off cover, so you remain covered in the event you have a leave of absence (such as maternity leave or leave due to illness). To activate this, you must apply for run-off cover by contacting BMS on 1800 931 068 or via email at apa@bmsgroup.com.

14. Does this policy cover me when I retire?

Yes. The APA Professional Indemnity Policy provides run-off cover, which means you are covered when you retire. To activate this, you must apply for run-off cover by contacting BMS on 1800 931 068 or via email at apa@bmsgroup.com.

15. Am I covered for multiple modalities?

As an APA member participating in the insurance program, you are covered for a number of additional modalities. Please see the completed insured modalities list on the APA website. If your modality is not listed, contact BMS Group on 1800 931 068 or at apa@bmsgroup.com to discuss insurance options.

16. Is the APA Member Insurance Policy compliant with the Physiotherapy Board of Australia (PhysioBA) and the Australian Health Practitioner Regulation Agency (AHPRA)?

Yes. The APA professional indemnity insurance Policy complies with and exceeds all requirements set by the PhysioBA and AHPRA.

17. Will this policy cover my past activities?

Yes. The APA Professional Indemnity Insurance Policy provides unlimited retroactive cover provided that there are no known and unreported circumstances that may lead to a claim.

18. Should I consider this cover if I work in the Public Health Sector?

Yes. As a Public Health Sector worker without your own insurance policy, you are relying on your employer's insurance, which may be geared towards protecting your employer. Public Hospitals or Health Centres typically carry policy excesses upwards of \$250,000; which means that in the event of a claim against you, they may decline to cover you.

Your employer's policy may not cover you for:

- Your services with previous employers,
- Your private practice work,
- Your past services rendered,
- Your services provided as a contractor, sub-contractor or consultant,
- If you are sued by your employer,
- Legal support for regulatory inquiries, disciplinary hearings and coronial enquiries.

APA members who participate in the Insurance Program also have peace of mind that they have an individual \$20,000,000 limit covering their interests, as well as access to 30 minutes free legal assistance with a senior lawyer for each potential issue that arises. Having your own individual policy also ensures you are covered if you want to work while transitioning from one employer to the next.

19. What Legal Support is available to me as a member insured through the APA?

Lander & Rogers, a leading independent Australian law firm, is pleased to offer summary pro bono legal advice to all APA members participating in the insurance program. To ensure all eligible members are provided with superior legal defence in the event of a claim or complaint, Lander & Rogers has been retained as the preferred legal provider for claims made under the APA Insurance Program.

APA members can take advantage of this complimentary service for practice related questions involving issues such as:

- Privacy and confidentiality,
- Conflicts of interest,
- How to respond to requests for information from third parties,
- Inquiries from your regulatory body,
- How to respond to a subpoena,
- Professional misconduct,
- Ethical obligations, and
- Professional obligations.

Lander & Rogers is one of Australia's leaders in insurance claims services and offers expertise in all areas of litigated and non-litigated claims.

The Lander & Rogers team not only defends a large portfolio of litigated claims against allied health professionals and health care providers, but also provides specialised services in coronial investigations, disciplinary hearings and complaints resolution processes. The team works closely with its clients to identify what is particularly important in resolving claims, including accuracy, speed, and sensitivity to reputational risk and intelligent and controlled solutions to litigation.

20. What do I do if I have a claim or complaint made against me?

Members should:

- Immediately report any potential claim to BMS,
- Formally document the incident, including details of those involved,
- Submit any formal statement to BMS,
- Report any regulatory investigations or notice of complaint immediately,
- Gather any notes and supporting documentation.

Members should not:

- Speak with any third parties about the claim,
- Assume any legal fees before reporting a claim,
- Offer compensation to independently settle a claim,
- Amend or change any previous medical records once a statement of claim has been received.

If you are aware of a potential claim you should contact BMS directly on 1800 931 068 or email apa@bmsgroup.com

21. What other insurance products can I purchase?

Business Insurance

Business Insurance is designed for Allied Health and Medical businesses with assets not exceeding \$5 million. It covers various general elements of business risk relating to property and interruption to operations; it is comprised of two main sections of cover, being **Material Damage** and **Business Interruption**.

Cyber Security & Privacy Liability

Cyber Liability coverage responds to various losses resulting from but not limited to, stolen credentials, malware, phishing and social engineering and insider threats. Coverage is provided for loss suffered by your business, claims made by third parties affected and for your business interruption in the event of a breach.

Personal Accident

Personal Accident insurance is designed for companies (group cover) or individuals to provide coverage in the event of death or permanent/temporary disability due to injury or sickness.

There are a range of benefits that the coverage extends to provide, including but not limited to rehabilitation, corrective surgery, medical expenses and child support. Benefits are paid by either lump sum or weekly throughout the benefit period for prolonged sickness or injury.

This coverage is particularly important where:

- You are a sole trader or business owner and not covered by a workers compensation policy,
- You are a contractor, sub-contractor or locum and not covered by a workers compensation policy,
- You work in a high-risk industry or are off site often, or
- You do not have the financial means to support yourself in the event of a serious injury or prolonged illness.

Corporate Travel Insurance

Corporate Travel Insurance is an annual policy covering all staff and directors of a company for business travel. Cover will also respond to leisure trips taken by directors and business owners as well as associated leisure travel for employees of the business. Cover also extends to any employees spouse and dependent children.

22. How do I add my business name onto the Policy and what coverage will be provided?

To add your business name onto your policy, you need to purchase Business Entity Insurance.

BMS has a self-service micro site to help APA members gain Business Entity cover. Once purchased (even if there is no premium payable), the site will automatically issue you a Certificate of Currency, noting your Business Entity name, via email. You can purchase Business Entity insurance here:

apa.bmsgroup.com .

23. What is Business Entity cover?

Business Entity cover is professional indemnity and public liability insurance for your business. This is different to your personal insurance coverage, or that of clinicians working in your practice. If your business is named in a legal action, these costs are not covered by your standard APA insurance policy. This is where Business Entity coverage comes in.

It is important to note that Business Entity cover does not cover clinicians for their actions while working within your clinic. You can purchase Business Entity insurance here: apa.bmsgroup.com.

24. How do I purchase additional insurance products?

BMS has a self-service micro site to help APA members purchase additional products. The site allows you to get a quote, bind cover and pay online; it's simple, fast and secure, and can be found here: apa.bmsgroup.com.

25. I'm a student member. Am I covered?

Yes. Student members are automatically covered by the APA Member Insurance Program provided they are working within their scope of practice and are under supervision.

26. Are Allied Health Assistants (AHA) / NDIS Assistants covered under my policy?

Allied Health Assistants (AHA) / NDIS Assistants are covered under your APA policy if you are the supervising Physiotherapist and an APA member with BMS insurance. The AHA needs to act under direct supervision, direction or control of the supervising Physiotherapist. If completing a home visits, the AHA must work strictly within the direction/plan set by the supervising Physiotherapist.

It is important to understand that the supervising Physiotherapist can only delegate services within their individual scope of Physiotherapy practice, based on their judgement of the assistant's knowledge and skillset.

27. I am a student member studying physiotherapy but am qualified as a Pilates instructor and wish to undertake teaching Pilates without supervision. Am I covered?

No. Student members are only covered whilst working within their scope of practice and under appropriate supervision. If you are unsure whether you are covered, contact BMS on 1800 931 068 or email apa@bmsgroup.com.

28. What training is required for Acupuncture and Dry Needling?

The practice of needling (whether dry needling or acupuncture) is recognised as falling within the scope of physiotherapy practice. It is recommended that physiotherapists have completed an APA accredited or equivalent Dry Needling course which is no less than 16 hours in duration or 80 hours in Traditional Acupuncture; and that they adhere to relevant safety guidelines such as Australian Society of Acupuncture Physiotherapists (2007).

Guidelines for Safe Acupuncture and Dry Needling Practice. Australian Society of Acupuncture Physiotherapists. IAAPT (2003). Standards of Safe Acupuncture Practice by Physiotherapists. International Acupuncture Association of Physical Therapists. Australian Guidelines for the Prevention and Control of Infection in Healthcare (2010) Australian Government: National Health and Medical Research Council.

For more information

Visit australian.physio for further Clinical, Practice and Risk resources, including an overview of the APA member Professional Indemnity Insurance Program.

Contact BMS on 1800 931 068 or email apa@bmsgroup.com for more information on insurance solutions for Physiotherapists.



Your partners in protection