



FAQs About Paying Your Bill Online

We strive to make it easy for you to work with us and manage administrative tasks associated with your COPIC policies. Our streamlined online billing allows you to easily make payments and set up a payment schedule that works for you.

HOW DO I PAY MY BILL ONLINE?

Go to www.callcopic.com, click Login on the top menu bar, and enter your Username/Password. If you do not have an online account, or have forgotten your login information, please contact Customer Support at (720) 858-6160. Click on the Service Center link, choose the correct policy name on the left, and Billing Information from the dropdown menu on the right, and proceed to pay your bill.

IF I SIGN UP TO GO PAPERLESS, HOW WILL I RECEIVE MY BILLS?

You will receive an email notification each time a new bill is ready for you to view and pay. In addition, you will receive an email reminder as your due date approaches and if it becomes past due. You can also print a copy of your bill for your records.

WHAT FORMS OF PAYMENT CAN I USE?

You can pay with credit or debit card or you may issue an electronic check from your bank account (checking or savings). You can use any combination of payment types per transaction. Note that credit card payments are limited to \$25,000 per transaction.

HOW WILL I KNOW THAT MY PAYMENT HAS BEEN ACCEPTED?

After you submit your payment, you will see a payment confirmation screen. You will also receive a confirmation

email after your transaction is submitted. If your electronic check does not pass through the bank, you will receive an email informing you of the rejected payment.

HOW LONG DOES IT TAKE FOR ONLINE PAYMENTS TO PROCESS?

Credit card transactions are authorized immediately and typically take 48 hours to settle. Electronic checks typically take 48-72 hours to settle.

CAN I TELL IF MY PAYMENT HAS BEEN POSTED?

Yes, log in to your account and select "Closed Invoices." Your payment will post immediately.

WHAT IS AUTOPAY?

AutoPay is a convenient option through which bills will be paid automatically each billing cycle on their due dates using your default credit card or bank account. Log in to your account and click on AutoPay to enroll.

I'M SIGNED UP FOR AUTOPAY BUT DO NOT SEE ANYTHING SHOWING UNDER "UPCOMING SCHEDULED PAYMENTS."

The AutoPay date will not appear on the home page under Upcoming Scheduled Payments. However, when on the Scheduled Payments page, AutoPay will show.

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WHAT ARE SCHEDULED PAYMENTS?

Scheduled payments are one-time payments that are scheduled for a specific date prior to the bill due date. The date of a scheduled payment can be changed as long as it is adjusted before the date scheduled.

WHAT IS PAY BY TEXT?

Pay by Text is a convenient way to pay your bill by text message. When signed up for Pay by Text, bill notifications will be sent by text message (in addition to email notifications) and you will then have the option to pay via text message with your default payment method by simply replying. You may enroll in Pay by Text when making an online payment or by accessing your account and selecting the Pay by Text option. A confirmation email will be sent to complete your enrollment.

QUESTIONS?

Call (720) 858-6211 during regular business hours (8:00am-5:00pm, Mountain Time).

COPIC HUMANITARIAN AWARDS: UPCOMING NOMINATION DEADLINES

Recognizing Physicians Who Are Making a Difference

COPIC's Humanitarian Award is given out each year to honor physicians who have gone above and beyond in volunteer medical services and contributions to their communities. We specifically look to recognize those individuals who unassumingly volunteer outside the spectrum of their day-to-day lives.

Since 2001, through the Humanitarian Award, more than \$600,000 has been donated to 56 health care nonprofits across seven states.

The recipient of the award designates a \$10,000 donation from COPIC to be provided to a health care-related 501(c)(3) organization within their respective state. Below is a list of upcoming nomination deadlines. To download a nomination form and to see a list of prior award winners, please visit www.callcopic.com/humanitarian. Below is a list of upcoming nomination deadlines:

- **Colorado:** May 1-August 15
- **North Dakota:** April 1-August 31
- **Minnesota:** May 1-June 30
- **Utah:** March 1-July 31

BITE-SIZE WEBINARS

Looking for a little learning over the lunch hour? COPIC has introduced a new educational series to explore trending topics in health care from legal/regulatory updates to managing patient interactions. Save the dates to attend these upcoming presentations, which take place 12-1pm Mountain Time.

- **Aug. 7:** Treatment Consent for Minors
- **Sept. 4:** Documentation 2.0
- **Nov. 6:** Just Culture
- **Dec. 4:** Noncompliant Patients and Terminating the Relationship

Attendance at the live virtual presentation earns insured facilities one COPIC point. Please contact Cathi Pennetta at cpennetta@copic.com or (720) 858-6228 for registration information.

COPIC VIRTUAL MOCK TRIAL: DISCOVER THE ANATOMY OF A MEDICAL LIABILITY TRIAL

This program offers a look into the courtroom proceedings during a medical liability trial. It is moderated by COPIC's Deputy General Counsel and offers an on-screen enactment of an actual trial featuring members of COPIC's Defense Counsel team, Risk Management, and Claims departments, as well as practicing physicians. Attendees will serve as jury members, putting forth a verdict after hearing testimony from the plaintiff, an expert witness, and the defendant. The Mock Trial program provides an inside view and serves as an education tool to learn and understand the chain of events from the time a lawsuit is filed.

Who should attend: COPIC-insured health care professionals

Where: The program will be held virtually

Registration: To register, please contact Gina Rowland at growland@copic.com or (720) 858-6065. Registration is limited; please register early.

When will the program be held in 2024:

- Tues., 6/25 from 6-9 MST
- Wed., 8/21 from 5-8pm MST
- Wed., 10/16 from 6-9pm MST

** Eligible attendees will receive 2 COPIC points, and 3 CME credits. Providers insured under a facility policy can attend but are ineligible to earn COPIC points.*

Please note, if you attended a virtual Mock Trial in 2023, this will be the same case and program material of the spinal epidural abscess diagnosis.



REDUCING YOUR RISK: CLOUD COMPUTING

WHAT IS THE CLOUD?

In the tech world, you may hear the phrase “the cloud” quite often. But what is the cloud?

Cloud computing refers to a network of servers that act as storage or processing power and are accessed through the Internet, rather than as local resources. Use of cloud resources can be beneficial in a variety of ways. Not only does it allow users to access their data or software from wherever they are, but it can also be cost effective.

PROS/CONS OF USING CLOUD SOLUTIONS

With all the advantages of cloud solutions, there are also some potential disadvantages to hosting data on the Internet. Potential benefits include:

- Cost-effective software solutions
- Remote access to the software or data—anytime, anywhere
- Quick and easy scalability—both up and down—as your needs change
- Less overhead in terms of infrastructure cost and maintenance

There are also some risks to cloud hosting:

- Access to data, software, and resources is dependent on the user’s Internet connection and the reliability of the cloud provider. If the provider experiences an outage, users cannot access their data and services.
- Cloud hosting may offer limited control over the functionality and customization of the services purchased. With local machines and locally-hosted software solutions, companies may utilize customization options that may not be available with a cloud-hosting solution.
- Cloud computing leans towards a subscription/per-use pricing model. In some cases, this may be costlier

over the long-term than the initial costs involved in setting up an alternative infrastructure.

- Security and privacy are major cloud-computing concerns.

COMPLIANCE

If your company is required to adhere to a standard of compliance, your cloud provider must also adhere to that standard to ensure compliance. For example, if your organization is required to operate under HIPAA, inquire as to whether or not the cloud provider is willing to sign a business associate agreement (BAA). A BAA ensures that a third party will protect electronic protected health information (ePHI) according to the HIPAA guidelines.

TRACKING DATA IN THE CLOUD

Some information may not be appropriate for cloud storage, regardless of the cloud provider’s security. It is important to identify and classify sensitive information prior to moving your data to the cloud. Gauge what type of risks your organization faces. After choosing a cloud provider, update your information classification policy, and ensure that users understand what information is authorized for cloud storage. Consider using tools to search cloud storage for personally identifiable information (PII) in order to ensure that sensitive data isn’t being stored in an unauthorized location.

Did you know that COPIC’s medical liability insurance policies include embedded cyber liability coverage? The coverage is designed to offer protection and support against growing cyber risks, and it also provides access to resources that you can utilize to proactively plan for and prevent cyber breaches. Visit www.callcopic.com/coverage-options/cyber-liability for more information.

Source: <https://breachsolutions.com/it-security-planning/reducing-your-risk-cloud.html>

The claims handling and breach response services are provided by Beazley USA Services, a member of Beazley Group. Beazley USA Services does not underwrite insurance for COPIC. Policies purchased through COPIC are subject to COPIC’s underwriting processes. CICO23_US_2/24

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THE COPIC MEDICAL FOUNDATION

Improving patient care and outcomes through innovation and collaboration

WELCOME KELLY JOINES

CMF'S NEWEST BOARD MEMBER

The COPIC Medical Foundation is excited to welcome Kelly Joines, a dynamic leader with a passion for driving change, to the CMF Board of Directors. Currently serving as the Chief Strategy Officer for Contexture, the leading health information exchange (HIE) for Arizona and Colorado, Joines brings not only extensive experience in health information and technology, but also an unwavering commitment to health equity.

Joines' first introduction to the Foundation occurred during our inaugural round of grantees in 2021 when Contexture (then Corhio) partnered with the Mile High Health Alliance on its ER Utilization alert project. However, it was her participation in the 2022 CMF Grantee Summit as a panelist representing HIEs that truly illuminated the impact CMF was making, aligning perfectly with her values and expertise. "The marriage of the Foundation's grant focus area [fragmentation across health systems] and the potential for impact on health equity are right down my alley!"

With a background spanning 17 years in health information exchange, Joines brings a unique perspective to the board. Her expertise in navigating the challenges and opportunities within the HIE space using innovation, strategy, and partnerships equips her with invaluable insights to support the Foundation's goal of catalyzing improvements in health care delivery and reducing adverse outcomes.

When addressing fragmentation and patient safety, Joines identifies time and communication as pressing issues. She vividly portrays the consequences, describing the dehumanization of patients whose concerns or diagnosis

are reduced to mere puzzle pieces. Joines advocates for stepping back to view and treat individuals as whole beings rather than isolated ailments.

Joines recognizes that time is always at a premium, and "something is always missed" when providers do not prioritize time to communicate—with each other and with patients. She highlights the opportunity for data exchange to be part of the solution and looks forward to contributing to this potential as a part of the COPIC Medical Foundation.

Joines finds fulfillment in mission-driven work, aligning her personal and professional endeavors with her calling. While meaningful, important, and fulfilling in its own way, her roles in leadership pull her back from the front line. Thus her volunteer work with various nonprofit boards and philanthropic initiatives is an opportunity to be closer to the people and communities she serves.

Kelly Joines embodies the essence of leadership—visionary, advocate, compassionate—and, like CMF, she is dedicated to being a catalyst for change in the spaces she serves. The COPIC Medical Foundation is excited to have Joines join our Board of Directors and welcomes her insight, input, and energy!

CMF BOARD OF DIRECTORS

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Meredith Hintze (Executive Director)

2024 GRANT RECIPIENTS ANNOUNCED

A top concern in the field of patient safety, breakdowns in care from a fragmented health care system can lead to readmissions, missed diagnoses, medication errors, delayed treatment, duplicative testing and procedures, and reduction in quality of care leading to general patient and provider dissatisfaction. For the COPIC Medical Foundation, contributing to a solution to this safety concern means supporting scalable or replicable solutions, focusing on the testing of new ideas or growing existing solutions, and then seeing avenues for larger application.

We're excited to announce the 2024 cohort of grant recipients. It includes three organizations of varied size and scope that impact health care in communities across the country. The COPIC Medical Foundation awarded more than \$450,000 in grants. Here are the 2024 recipients along with a description of the project for which they were seeking funds:



Visiting Nurse Association (Nebraska)

Collaborative Multicomponent Care for Elderly Postoperative Recovery and Fall Prevention: A five-organization collaboration addressing post-op care for elderly people with a focus on reduction of fall risks at home, improved circumstances related to social determinants of health, improved physical status, and enhanced well-being.



St. Elizabeth Healthcare (Kentucky)

Community Paramedicine Pilot Program: A program that uses paramedics to address inappropriate use of emergency medical services with a goal to reduce health care costs. The project will focus on meeting patients in their home environment and addressing social determinants of health care gaps and engagement in care.



DaneMAC (Wisconsin)

Expansion of the DaneMAC Multi-Agency Portal (DaneMAP): A new web-based platform through which survivors of sexual violence and post-assault care providers can connect with each other. It provides survivors with immediate, post-assault mental health care and secure, intra-agency communication and coordination among post-assault care providers.

3RD ANNUAL CMF GRANTEE SUMMIT

Each year, the COPIC Medical Foundation hosts past and current grantees as well as community partners at our annual CMF Grantee Summit. This is our opportunity to serve as a convener and bring together changemakers in patient safety.

At this year's event, held on May 2 and 3 in Denver, we hosted partners from across the country for a chance to connect, share learnings, and explore opportunities for collaboration related to the grant focus area, "reducing fragmentation across care settings." This event is a key aspect of our work to achieve our goal to be a catalyst in improving the quality of health care delivery by reducing adverse outcomes and supporting innovation.

Our hope is for grantees to leave this event with new ideas, new partners, and new perspectives which will support their efforts to move their work forward at a greater scale with increased impact on improving patient safety.



Participants at the 2024 COPIC Medical Foundation Summit.



Better Medicine • Better Lives

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COPICNEWS

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Did you miss a previous edition of COPIC newsletters?
Don't worry. A full archive of past newsletters
can be accessed on callcopic.com.

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CONTACT US:

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24/7 Risk Mgmt. Hotline
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866/274-7511

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Connect with COPIC  



THE LEGISLATIVE LANDSCAPE

As you know, COPIC—in partnership with Coloradans Protecting Patient Access (CPPA)—was deeply engaged this legislative session in an effort to avoid potentially catastrophic ballot measures proposed by the Colorado Trial Lawyers Association (CTLA) that aimed to eliminate all liability caps in the state and eviscerate statutory protections for confidentiality in peer review programs. Thankfully, the CPPA coalition, with the support of the governor’s office, was able to force a compromise that resulted in the preservation of caps on damages and critical confidentiality privileges in health care.

The agreement came in the form of a new bill, **HB24-1472: Modernizes Colorado’s Medical and General Liability Laws**. This new bill was passed by the Legislature and signed by the governor.

The terms agreed to by both sides are as follows:

- **Medical Liability:** Over a five-year implementation period, increase the non-economic damages cap from the current \$300k to \$875k and establish a new and separate wrongful death award capped at \$1.575 million. Starting in 2030, the caps will be automatically adjusted for inflation every two years.
- **General Liability:** Increase in the non-economic damages cap from the current \$729k to \$1.5 million and wrongful death cap from the current \$642k to \$2.125 million. Starting in 2028, the caps will be automatically adjusted for inflation every two years.
- Upon the governor’s signature of the legislation, the Colorado Trial Lawyers Association and CPPA **agree to withdraw proposed ballot initiatives: 150, 170, 171, 228, 274, 275 and 277.**

While this change is frustrating, it does prevent an expensive and potentially detrimental fight at

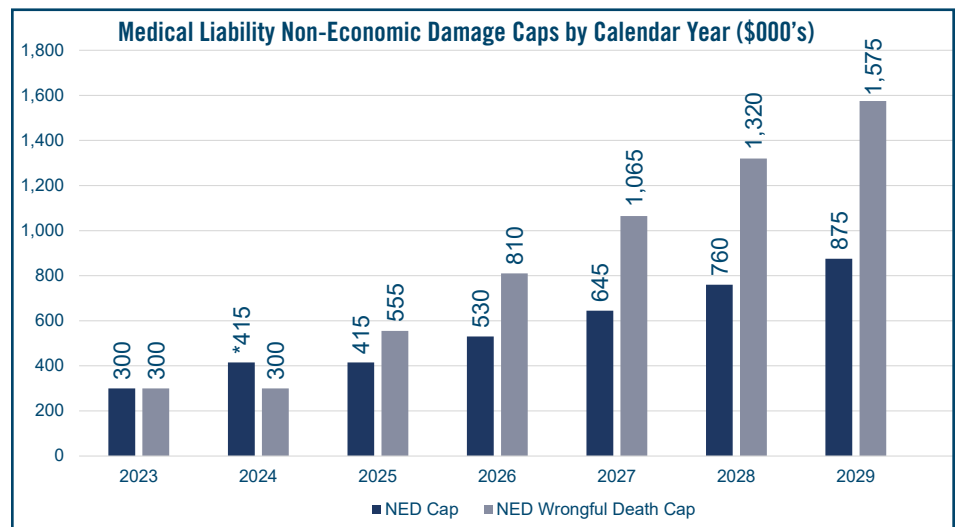
the ballot box this November. The approach allows for compensation of injured individuals while also protecting critically important laws that allow for the review and improvement of health care delivery and maintaining critical tort reforms that protect against unreasonable inflated jury verdicts.

We are grateful to our coalition partners for helping to advance this critical negotiation. And we especially appreciate those of you who engaged in this effort and used your voice to advocate for safe, affordable, and accessible health care in Colorado.

Q&A WITH COPIC

What is the estimated impact this bill will have on medical liability insurance premiums?

COPIC is conducting an analysis to assess the impact of these changes. There is a ramp up period, so things are not shifting significantly overnight. We will take the next few months to assess our data based upon the current experience, what we anticipate going forward, and we will be sure to keep you all informed. Our goal is to maintain a stable liability environment and do what we can to mitigate the rate of change. Please see the chart below as a reference point demonstrating the new cap increases over time.



*New non-economic damage limits applicable to lawsuits filed on or after 1/1/25 will also apply to claims arising on or after 1/1/24, but which are filed on or after 1/1/2025.

LEGISLATIVE LANDSCAPE (FROM PAGE 1)

What does this mean for my coverage? Do we need increased coverage going forward?

We will be keeping a close eye to see if there will be actual changes within the rules that govern Colorado's financial responsibility laws. COPIC offers both higher limits as well as excess coverage for those who want to proactively seek higher limits of liability based upon their comfort level. That said, there will be no mandate by COPIC to increase the coverage that you have on your policy.

Will there be major price changes for clinics that renew their COPIC policies before the 1/1/25 date that the increase begins?

We don't anticipate any rate changes occurring before the end of the year. We have a runway of time here to think through these changes. We want to make sure we can do everything to soften any change that's going to happen to your policy.

How do these new caps compare to other states?

Colorado is one of 29 states that have some type of reform that places limits on damages. They are not all the same. Of those 29 states, 22 have similar non-economic damage caps, and we will now be the fourth highest of those 22 states.

Are the new limits based on the year of the malpractice incident or the year of the lawsuit?

The bill is effective on 1/1/25. We fought hard to limit retroactive application, however, we did have to compromise on a one-year look back for non-economic damages only. The new non-economic damage cap starting in 2025 will be applied to all claims accrued in 2024 and filed after 1/1/25. Since wrongful death cap is a new category, it will only apply on claims accrued on or after 1/1/25 and will receive the \$555k.

COPIC's Public Affairs team remains focused on working closely with our colleagues at the Colorado Medical Society and the Colorado Hospital Association to navigate the current health care environment, monitor legislation through the rulemaking process, and keep you informed on how these policies will impact the practice of medicine and the delivery of quality care.

If you have any questions, please contact COPIC's Senior Vice President of Public Affairs, Beverly Razon, at brazon@copic.com.

Doc2Doc Wellbeing Consulting Program

The Colorado Physician Health Program (CPHP) is a **confidential and free** resource to help all medically licensed professionals in Colorado. CPHP provides true peer support (physician to physician) for all health problems and wellbeing issues such as burnout, stress from the workplace, a bad outcome or malpractice case, depression, anxiety, substance related issues, and chronic illness. CPHP provides evaluation, treatment referral, monitoring, and supportive services to safeguard your best health and wellbeing.

CPHP's latest offering, in collaboration with Colorado Medical Society, is the Doc2Doc Wellbeing Consulting Program where Colorado medically licensed professionals may access brief impactful consultation related to one's health or wellbeing by a physician peer expert, bypassing lengthy documentation or evaluation. This service is geared especially for burnout but can assist all professionals who just need a peer to talk with. This program is free and confidential.

COPIC and CPHP know that healthy doctors give better care. See our collaborative research here: pubmed.ncbi.nlm.nih.gov/23606266/. This study demonstrates that treatment and monitoring at CPHP is associated with a lowered risk of malpractice claims and suggests that patient care may be improved with monitoring.



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THE LEGISLATIVE LANDSCAPE

The 2024 legislative session has adjourned! The final gavel dropped on Saturday, April 20th—the 104th legislative day—after the last votes were taken on remaining policy priorities and budgetary measures.

SCHOOL'S OUT FOR SUMMER—2024 SESSION ADJOURNED

During the 2024 regular session, 147 new bills were passed by the legislature and sent to the governor for approval. Adding to last year's total of 170 bills, this brings the two-year biennium total to 317 bills approved by the General Assembly for the 2023-2024 legislative session—slightly less than the 346 passed in the 2021-2022 biennial session. All in all, it was a productive session!

On the policy front, health care, and more specifically tort reform, remained of paramount importance to COPIC after the passage of tort reform in 2023. COPIC closely monitored the following bills this session, all of which ultimately did not pass. We remain vigilant in tracking these types of bills as we expect to see similar or related legislation in future sessions as tort reform remains front of mind for many.



House Study Bill 160

An act relating to compensation discussions regarding adverse health care incidents.



House File 2127 and Senate File 2035

Companion bills relating to the statute of repose in medical malpractice claims.



House Study Bill 504 and Senate Study Bill 3028

Companion bills relating to recoverable damages and admissible evidence for medical expenses.



House File 2215 and Senate File 2038

Companion bills relating to the reporting of serious reportable events and providing penalties.



House Study Bill 511

A bill relating to civil procedure, including disclosures that may be made to a jury and the availability of certain medical records.



Senate File 430

A bill for an act relating to the duties of insurers under medical malpractice insurance policies.



House File 2412

A bill relating to rate increases for medical malpractice insurance policies.



Senate File 2220

A bill relating to noneconomic, punitive, and exemplary damage awards against health care providers and hospitals.

So, what's next? Now that the legislature is adjourned, Governor Reynolds has 30 days to either sign bills into law or utilize her veto power. As the dust continues to settle from the legislative session, the executive branch and its many state departments will now begin their work of implementing legislation through the rulemaking process. Barring any special legislative sessions, the General Assembly will convene again in January 2025.

CONTINUED ON PAGE 2

LEGISLATIVE LANDSCAPE (FROM PAGE 1)

COPIC's Public Affairs team remains focused on working alongside our colleagues at the Iowa Medical Society to navigate the current health care environment, monitor legislation through the rulemaking process, and keep you informed on how these policies will impact the practice of medicine and the delivery of quality care.

Visit COPIC's Legislative Action Center at www.callcopic.com/lac for more information on bills we tracked during the legislative session, to sign up for newsletter updates, or to find your elected officials. If you have any questions, please contact COPIC's Senior Vice President of Public Affairs, Beverly Razon, at brazon@copic.com.

Scan for COPIC's
Legislative Action Center



2024 IMS/COPIC Physician Humanitarian Award: **DR. DAVID MULLER**



COPIC and the Iowa Medical Society (IMS) are proud to announce that Dr. David Muller is the 2024 recipient of the IMS/COPIC Physician Humanitarian Award. Dr. Muller is a Cedar Rapids-based ophthalmologist who is recognized for his dedication to service and commitment to the needs of others.

Dr. Muller has volunteered at Community Health Free Clinic (CHFC) in some capacity since December 2006 and currently serves on the clinic's 2023-2024 Board of Directors as Vice President. CHFC is a volunteer-driven organization, with more than 1,630 volunteers working to forward the clinic's mission to alleviate human pain and suffering by providing access to and delivery of compassionate health care.

Dr. Muller is responsible for the opening of CHFC's eye clinic and volunteered his time treating patients there over the years. The idea for a designated eye clinic was envisioned by Dr. Muller and his wife, Amy. Through their generous support and generous support from the Hall-Perrine Foundation, CHFC was able to open an in-house eye clinic in 2008, which operated until March of 2020 (since COVID, CHFC eye services have moved to partner providers).

Dr. Muller's enthusiasm and many years of service have been instrumental in allowing CHFC to provide over 3,760 eye care services to the community. This degree of service has only been possible because of the resourcefulness, ingenuity, and dedication of volunteers like Dr. Muller.

Each year, the recipient of this award is asked to designate a \$10,000 donation from COPIC to be provided to a health care-related nonprofit organization within their community. It comes as no surprise that Dr. Muller has designated CHFC as that recipient. The IMS/COPIC Physician Humanitarian Award was presented to Dr. Muller on April 19 at the Annual Meeting of the Iowa Medical Society.



Beverly Razon, COPIC's Senior Vice President of Public Affairs and Ed Whitver, Director of Market Relations presented Dr. Muller with the IMS/COPIC Physician Humanitarian Award at the Iowa Medical Society Annual Meeting on April 19, 2024.



THE LEGISLATIVE LANDSCAPE

The 108th Nebraska Unicameral adjourned the 2024 regular legislative session on Thursday, April 18th. In total, legislators approved and sent over 300 bills to the governor for approval. Notably absent in those 300+ bills was property tax relief—a major Governor Pillen priority. In his closing speech to the Unicameral, Governor Pillen spoke in no uncertain terms about his desire to bring the legislature back for a special session over the summer to address the issue.

CHANGES TO NEBRASKA'S EXCESS LIABILITY FUND

Maintaining the long-term sustainability of the Fund is critical to keeping medical liability rates stable and allows the health care community to devote more resources to quality improvement and patient care. It is for this reason that COPIC supported last year's Legislative Bill 68 which updated the underlying liability limits of the Fund.

Effective January 1, 2025, the underlying limit requirement was increased to \$800,000 per occurrence and \$3,000,000 aggregate for both physicians and CRNAs, and \$800,000/\$3,000,000 for hospitals and their employees. This limit is being increased to address the upward pressure on the Fund and shift more risk to the primary layer of coverage (i.e., COPIC policies), with the intended result being long-term financial stability of the Fund. In response to this change to the Fund, COPIC's team is preparing new rates that will align with the revised underlying limit and account for loss experience in the state.

THE 2024 REGULAR SESSION HAS ADJOURNED... FOR NOW

The Unicameral is headed home for a few weeks while we wait for clarity on whether they will be called back for a special session. A few numbers for you: during the 2024 regular session, 597 new bills were introduced, adding to last year's total of 820 bills bringing the two-year biennium total to 1,417. This is a slight uptick compared to the previous two-year session ('21-'22) which saw 1,277 bills introduced. Of the \$2.2 billion in state and federal spending, over 95% is allocated toward health care programs. Several of the costliest spending proposals included the implementation of hospital fees to unlock federal Medicaid dollars, the establishment of a prescription drug donation program, increases to nursing facilities quality assurance assessment, and the creation of opioid treatment and prevention programs.

With the dust settling from the legislative session, the executive branch and its many state departments begin their work of implementing legislation passed by the Unicameral and signed by the governor. In addition to the regulatory implementation of passed bills, the Nebraska Credentialing Review Program (also known as the "407 Program") will begin its work reviewing proposals for changes in scope of practice or for new credentialing of Nebraska health professions.

COPIC's Public Affairs team remains focused on working closely with our colleagues at the Nebraska Medical Association to navigate the current health care environment, monitor legislation through the rulemaking process, and keep you informed on how these policies will impact the practice of medicine and the delivery of quality care.

Visit COPIC's Legislative Action Center at www.callcopic.com/lac for more information on the bills we tracked during the legislative session, to sign up for newsletter updates, or to find your elected officials. If you have any questions, please contact COPIC's Senior Vice President of Public Affairs, Beverly Razon, at brazon@copic.com.

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Nebraska's Excess Liability Fund

Understanding Recent Legislative Changes

*Legislation that was passed into law in 2023 increases the amount of liability coverage that must be carried by physicians, CRNAs, and hospitals in order to qualify for Excess Liability Fund coverage under the Nebraska Hospital-Medical Liability Act. **These changes are effective for policies issued or renewed on January 1, 2025 or later.** Be sure you are aware of the following considerations as the effective date approaches.*

QUALIFYING FOR THE FUND

To qualify for the Fund, a health care provider “or such health care provider’s employer, employee, partner, or limited liability company member” must:

1. Purchase malpractice coverage from an admitted insurer or the residual fund and file proof of coverage with the Department of Insurance.
2. Pay the surcharge to the Department of Insurance.
 - a. The surcharge is set every year, currently at 50% of the premium for the “primary” coverage.

IMPORTANT NOTES FOR FACILITIES

To qualify for Fund coverage, medical services must be performed at the facility by a physician or CRNA. A laboratory, for example, may not qualify for Fund coverage. Serving as a medical director of a spa doing administrative work, but not providing medical services, wouldn’t qualify that facility for the Fund.

HOW TO RENEW

It’s critical for insureds to have renewal certificates and payments sent to the Fund within 30 days of expiration.

The Fund is controlled by statute and they are unable to “backdate” coverage. If the annual surcharge is not paid within 30 days, qualification is suspended until the annual premiums are paid.

COPIC aims to process renewals at least 30 days in advance of the renewal date and will prepare a Fund letter that identifies the surcharge amount that needs to be submitted directly to the Fund and will email the letter to you along with your renewal materials. If you are represented by an agent, the renewal packet will be emailed to your agent.

ONLINE RENEWALS NOW ACCEPTED

Fund qualification can be completed online in two steps.

1. Use the online portal to pay the surcharge premium, which is a percentage of the premium reflected on your Fund letter. Save your receipt as a PDF.
2. Email the payment receipt and your Certificate of Insurance to doi.nelf@nebraska.gov.

For a quicker turnaround for your qualification letter, submit your certificate and proof of payment together in an email. Sending your certificate without attaching the proof of payment can result in delays. Questions can be sent to doi.nelf@nebraska.gov or contact Emma Covalt at (402) 471-4651.

More information, including frequently asked questions, surcharge determinations, and guidance for out-of-state providers providing telemedicine services in Nebraska can be found at <https://doi.nebraska.gov/insurers/property-and-casualty>.

REQUIREMENT OF PATIENT NOTIFICATION IN YOUR OFFICE

The following are the patient notification requirements associated with the Fund:

- A qualified health care provider shall provide notice to his or her patients that he or she has qualified under the Act by continuously posting in his or her waiting room or other suitable location a sign stating: (Name of Health Care Provider) has qualified under the provisions of the Nebraska Hospital-Medical Liability Act. Patients will be subject to the terms and conditions of the Act unless they file a refusal to be bound by that Act with the Director of Insurance of the State of Nebraska.
- In addition to the foregoing information, the sign may include the following language: This notice is being provided as required by the Nebraska Hospital-Medical Liability Act Neb.Rev.Stat. §44-2821(4), as amended.
- The sign to be posted will measure at least 8 1/2” x 11” and shall be printed in substantially sized font and with a style of type that is easy to read.

ADDITIONAL RESOURCES

More information, including frequently asked questions, surcharge determinations, and guidance for out-of-state providers providing telemedicine services in Nebraska can be found at <https://doi.nebraska.gov/insurers/property-and-casualty>.

The Fund is working to publish additional FAQ resources, and COPIC will provide updates as more information comes available.