

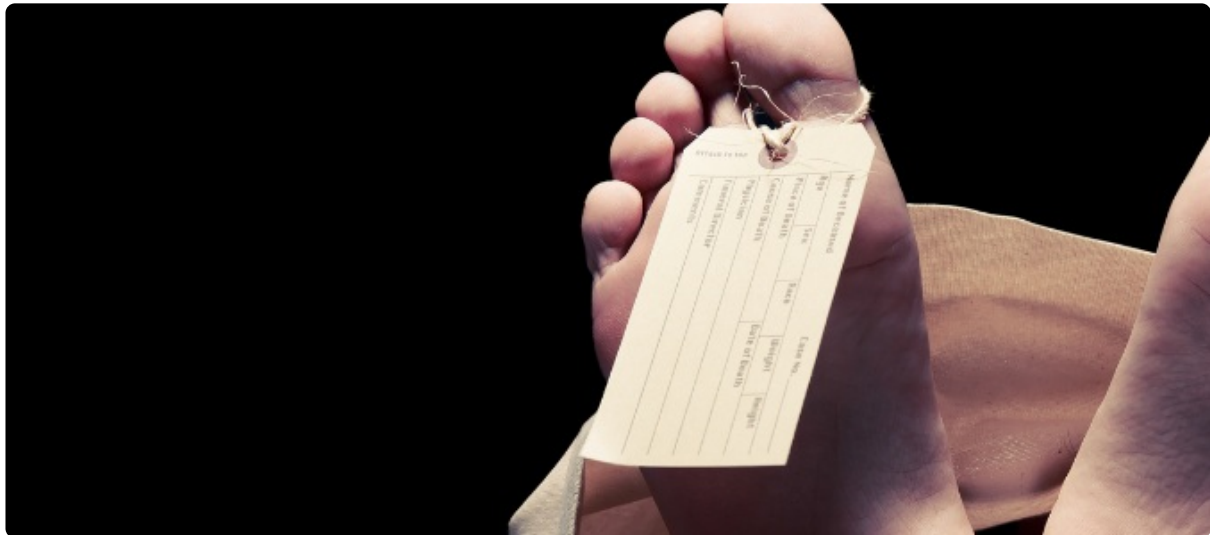
Understanding Coroner's Court in Healthcare

Reading time:

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Tags: [Medico-Legal](#) | [Medical Practitioner](#) | [Dental Practitioner](#) | [Professionalism & Ethics](#)



As a healthcare professional, you are required to interpret legal frameworks, use your technical training and professional judgement to assess and treat a myriad of medical conditions. Responding to coroners' inquests, crafting death certificates, maintaining adequate professional indemnity insurance, undergoing Medicare and PSR audits can all be challenging aspects of medical practice, that you need to understand how to approach to avoid negative outcomes.

Insights into the operations of a Coroner's office

It can be rather unnerving for medical practitioners to be involved in coronial matters and investigations about the death of a patient. As each state in Australia has its own Coroner, it is imperative that you check your local jurisdiction for specific local requirements.

You can potentially be involved in a coroner's court's matters typically for two reasons:

- You need to make a reportable death report
- You have been asked to prepare a statement/report and appear as a witness.

Also, you may have to do both as they may relate to the death of the same patient.

Reportable deaths

While the benchmark for making a reportable death is very high, each coroner's court has its own state/territory jurisdiction. Therefore, what qualifies as a reportable death varies slightly in each state and territory. If you are unsure if a death is reportable, contact MIPS for advice.

You have a duty to make a report if you are the doctor responsible for the person's medical care immediately before death, or you are the doctor who examines the body of the deceased person after death. You will need to make a report if:

- the patient has suffered a violent, unnatural or unexpected death (homicide, suicide or death induced by drugs, alcohols or poison)
- the patient has died by accident (road or public transport fatalities, accidental falls, workplace deaths, electrocutions, drownings and animal attacks)
- the identity of the patient is not known.

- cause of death is not known (i.e. you cannot form an opinion about the probable cause of death and therefore cannot sign a death certificate).
- the patient dies unexpectedly during or after a medical procedure, or other unexpected or accidental deaths in a healthcare facility.
- a death notice was not signed for the patient and is not likely to be signed.

Appearing as a witness

You should notify MIPS of any involvement and seek our assistance. MIPS membership includes assistance in preparing appropriate statements and guiding you through the coronial inquest process. This includes advice and representation from expert solicitors and MIPS medico-legal advisors.

In some cases, a Coronial inquest can impact on the likelihood of a common law action arising from a death. In extreme cases, Coroners have referred concerns about a practitioner's healthcare to AHPRA for further investigation.

Due to the specific laws of your state, we have assembled a set of relevant resources you may find useful in your practice.

[Queensland Coroners Court](#) - responsible for reportable deaths.

[Queensland Coroners role](#) - what deaths must be reported, coronial process, autopsies, death certificates, funerals, inquests, findings information, coronial recommendations.

[Information for health professionals](#) - types of reportable deaths and how to report.

Policy and Notification update

MIPS' Indemnity Insurance Policy provides cover for claims arising from any acts, errors, breaches and omissions in your provision of healthcare services. It provides protections for legal claims, such as when you are sued and require legal representation to defend yourself and/or are required to pay compensation. It also provides cover for investigations, proceedings and the legal costs of defence in these matters. Cover under the Indemnity Insurance Policy meets your AHPRA professional indemnity requirements for registration as a healthcare provider in Australia.

Membership classification

Your membership classification determines the extent your healthcare practice is covered.

- You must ensure your classification covers all the healthcare services you provide.
- You must have appropriate and recognised qualifications, training and experience for the services you provide (including supervision).

You are not covered under the Indemnity Insurance Policy for any healthcare provided outside your membership classification or scope of practice.

Your category

- Should reflect your AHPRA registration; or
- The specialty in which you are undertaking an accredited program.
- If you hold multiple healthcare registrations or specialties, you must select a category that appropriately reflects the highest risk practice.

Endorsements to consider

- Minor cosmetics- Botox, fillers, peels
- Spinal surgery extension
- Dental implants
- Bariatric surgery
- Gratuitous services in/outside Australia
- Employer indemnified outside Australia
- Sporting and cultural outside Australia

Key advice to manage insurance risk

Notify us in writing when any of the following occurs:

- Any change in practice or nature of the healthcare you provide and/or the location in which the healthcare is provided
- Start and/or cessation of practice
- Cancelling MIPS membership
- Requesting extended reporting period or run-off cover
- Requesting cover for practice outside of Australia
- Any change in AHPRA details or registration conditions.

For more information see the [Member Handbook](#) or for assistance call Member Services on 1800 061 113.

Managing Medicare & PSR complaints

The Professional Services Review (PSR) Scheme is an onerous and complex process for any healthcare practitioner. In its administration of the Scheme, the PSR review and examine possible inappropriate practice by practitioners when they provide Medicare services or prescribe Government subsidised medicines under the PBS.

Often, it involves a financial repayment from the practitioner and a process that appears to be heavily weighted in favour of this outcome. This is a very real perception and not one to be ignored.

What is the practitioner review program (PRP)?

- Reviews data of MBS/PBS claims compared to your peers.
- If data is significantly different the PRP will look at how you are billing and why your data for claims differs from their peers.
 - Examples
 - 80/20 rule significantly more services over one year or daily.
 - Can't claim 80 or more attendance items on 20 or more days.
 - GP in top 99 percentile for rendering Chronic Care Disease Plans.

What is inappropriate practice under the PSR scheme?

- Whether a practitioner's practice/conduct when providing or initiating Medicare services would be unacceptable to the general body of their peers.
- Whether a practitioner's conduct in prescribing or dispensing PBS medicines would be unacceptable to the general body of their peers.

Inappropriate practice does not necessarily indicate inappropriate clinical practice, but rather technical non-compliance with the conditions of relevant MBS/PBS item number(s).

Non-compliance, what this means for you?

- You are financially responsible for making sure there are no incorrect claims, regardless of who may arrange the billing and paperwork.
- In case of non-compliance, you will have to repay 100% of the rebate, even if you are:
 - employed on a salary, or
 - revenue-sharing basis, or
 - the rebate went back to the patient

From 1 July 2019 under the Shared Debt Recovery Scheme, Medicare may recovery a debt or a portion of a debt from the service

company or practice when the service company or practice has made false or misleading statements when claiming the benefit. Inform the Department that there is a potential secondary debtor and requests a shared debt determination.

MIPS' advice to mitigate your risk

- Whenever your provider number is used - you are responsible
- If your provider number is used incorrectly, you are still personally responsible and liable
- Ensure awareness and approval of how your practice or hospital uses your provider number
- In all cases, items or services claimed to Medicare MUST:
 - have been medically necessary
 - have evidence in the notes of sufficient medical input
 - have notes that are contemporaneous and adequate
 - have notes that demonstrate that the conditions of the item number were met.
- Be careful and mindful about:
 - over servicing, incorrect billing, incorrect prescribing
 - inadequate history, failure to address the medical problem
 - treatment unacceptable to your peers
 - keep up to date with any Medicare item changes
 - educate yourself/practice and control claims made in your name
 - stay up to date with changing practices and standards
- Ensure your MIPS membership reflects your correct billings
- Contact MIPS if you are being investigated by Medicare

MIPS resources

Articles

- [The coroner and you](#)
- [Familiarise yourself with the Coroners Court](#)
- [Death, the final complication FAQs \(Queensland\)](#)
- [Membership suspension](#)
- [Does your membership classification reflect your practice?](#)
- [How your membership fee is calculated](#)
- [Employee or contractor?](#)
- [Medicare Audits](#)
- [Medicare keeps tabs on your billings](#)
- [Practice Essentials: Telehealth & private practice risks - Medicare, indemnity & insurance](#)
- [Does MIPS' insurance cover refunds I make to patients or Medicare?](#)
- [Premium Support Scheme \(medical practitioners only\)](#)
- [The cost of repaying the PSR](#)

Recorded webinars

- [Death - The Final Complication](#)
- [The examination of a Coroner's inquest](#)
- [Understanding insurance](#)
- [The Evolution of a Medical Complaint](#)
- [Medicare Monitoring and the PSR](#)
- [Medicare and the PSR - update and emerging issues](#)
- [Health Records](#)

This information is not intended to be legal advice and as such should not be relied on as a substitute. You may need to consider seeking legal or other professional advice about your individual circumstances as appropriate. Should you wish to obtain further information you can review our [Member Handbook Combined PDS and FSG](#) or contact MIPS on 1800 061 113. You may need to consider seeking legal or other professional advice about your individual circumstances as appropriate. Information is current as at the date published.
