



Elson S. Floyd College of Medicine

WASHINGTON STATE UNIVERSITY

Graduate Medical Education Policy

GME PROFESSIONAL LIABILITY INSURANCE POLICY

Applies to: Elson S. Floyd College of Medicine (ESFCOM) Graduate Medical Education (GME) and all accredited post-graduate medical training program Trainees and WSU faculty and staff.

GMEC Approval: 04/20/2021

1.0 Policy Statement:

It is the Elson S. Floyd College of Medicine policy that all employed Trainees and WSU faculty and staff participating in a college of medicine sponsored training program maintain professional liability coverage at approved amounts.

2.0 Definitions

Accreditation Council for Graduate Medical Education (ACGME): accredits Sponsoring Institutions and residency and fellowship programs, confers recognition on additional program formats or components, and dedicates resources to initiatives addressing areas of importance in graduate medical education.

Designated Institutional Official (DIO): The individual in a sponsoring institution who has the authority and responsibility for oversight and responsibility of all of the ACGME-accredited programs.

Graduate Medical Education Committee (GMEC): An institutional committee of the College of Medicine charged with the responsibility of monitoring and advising on all aspects of institutional, residency, and fellowship education as required by the ACGME.

Moonlighting: “extra work for extra pay” voluntary, compensated, medically-related work performed beyond a Trainee’s clinical experience and education hours and additional to the work required for successful completion of the program.

Sponsoring Institution: The organization (or entity) that assumes the ultimate financial and academic responsibility for a program of GME. The sponsoring institution has the primary purpose of providing educational programs and/or health care services (e.g., a university, a medical school, a hospital, a school of public health, a health department, a public health agency, an organized health care delivery system, a medical examiner’s office, a consortium, an educational foundation).

Trainee: a physician in training at an ACGME accredited graduate medical education program, the term includes Interns, Residents, and Fellows or other trainee enrolled in an educational program whose education falls under the purview of the ESFCOM Office of Graduate Medical Education.

3.0 Responsibilities

GMEC and DIO

4.0 Procedures

GME Professional Liability Insurance

WSU employees acting within the scope of their employment are covered by Washington's State [Self-Insurance Liability Program \(SILP\)](#). Non-employed faculty and staff supervising WSU Trainees must maintain professional liability coverage at approved levels. Professional liability insurance for all employed Trainees and WSU employed faculty and staff, while acting in good faith within the scope of the WSU sponsored training program, is provided under the State of Washington Self-Insurance Liability Program (SILP) and the Tort Claims Act (RCW 4.92.060 et seq.).

There is **NO** coverage for professional activities outside the scope of the training program for any activity that is not an approved component of the training program, or for moonlighting, under any circumstances. Trainees who engage in securing employment outside their training program (moonlighting) are responsible for purchasing and maintaining their own professional liability insurance for these activities. The Trainee is required to provide evidence of the professional liability insurance coverage to their Program Director as part of the Permission to Engage in Moonlighting Form.

Questions about the scope of professional liability coverage should be directed to the WSU risk management office or GME Office. Official documentation and the details of professional liability coverage is provided as Attachment A to this policy as well as the State Agency Self-Insurance Liability Program website (<https://des.wa.gov/services/risk-management/insurance-state-agencies/state-agency-self-insurance-liability-program>). A copy of this official documentation regarding the details of liability coverage can be provided upon request of the Trainee.

If you should receive a summons and complaint naming you or WSU as a defendant in a civil lawsuit arising out of your training with the University, please have them immediately delivered to the Attorney General's Office, WSU Division (AGO). You must report all summons and legal complaints to the AGO or GME Office as soon as possible. Do not discuss the suit with anyone other than the WSU attorneys (AGO). Do not talk to the plaintiff or the plaintiff's attorney. Refer all requests for documents to the WSU attorneys or the Office of Graduate Medical Education. More information can be found in the WSU Business Policies and Procedures Manual (<https://policies.wsu.edu/prf/index/manuals/10-00-contents/10-15-lawsuits-wsu-personnel/>).

Professional liability coverage includes legal defense and protection against awards from claims reported or filed during participation in each sponsored training program(s), or after the completion of the program(s) if the alleged acts or omissions of the Trainee are within the scope of the program(s). Therefore, Trainees will not need to purchase tail coverage for their time in the training program.

5.0 Related Policies

GME Moonlighting

6.0 Key Search Words

Liability Coverage; Malpractice Insurance

GME Professional Liability Insurance

7.0 Revision History

GMEC Approval: Revision/Review Date(s)
Approved 4/20/2021


Responsible Office: ESFCOM GME Office

Policy Contact: Designated Institutional Official

Supersedes: N/A

GME Professional Liability Insurance

Attachment A CERTIFICATE OF LIABILITY INSURANCE

CERTIFICATE OF LIABILITY INSURANCE		Issue Date 3/17/2021		
ISSUED BY: State of Washington Department of Enterprise Services Office of Risk Management PO Box 41466 Olympia, WA 98504-1466	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE STATE OF WASHINGTON SELF INSURANCE LIABILITY PROGRAM.			
COVERAGE AFFORDED BY State of Washington Self Insurance Liability Program				
INSURED: State of Washington Washington State University College of Medicine Residents ATTN: Gene Young PO Box 641172 Pullman, WA 99164	THE STATE OF WASHINGTON, INCLUDING ALL ITS AGENCIES AND DEPARTMENTS, IS SELF-INSURED FOR TORT LIABILITY CLAIMS. ALL CLAIMS MUST BE FILED WITH THE STATE OFFICE OF RISK MANAGEMENT FOR PROCESSING IN ACCORD WITH STATUTORY REQUIREMENTS.			
COVERAGES				
THIS IS TO CERTIFY COVERAGE DESCRIBED BELOW IS PROVIDED TO THE INSURED NAMED ABOVE FOR THE PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE COVERAGE AFFORDED BY THE SELF-INSURANCE LIABILITY PROGRAM IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH PROGRAM.				
TYPE OF COVERAGE	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	LIMITS
GENERAL LIABILITY <input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> OCCURRENCE COVERAGE	Self-Insured	Continuous	Continuous	BODILY INJURY, PROPERTY DAMAGE & PERSONAL INJURY COMBINED EACH OCCURRENCE \$5,000,000
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				BODILY INJURY & PROPERTY DAMAGE COMBINED EACH ACCIDENT \$5,000,000
OTHER <input checked="" type="checkbox"/> PROFESSIONAL LIABILITY	Self-Insured	Continuous	Continuous	BODILY INJURY, PROPERTY DAMAGE & PERSONAL INJURY COMBINED EACH OCCURRENCE \$5,000,000
WORKERS COMPENSATION AND EMPLOYERS LIABILITY	L & I 52WEAB8QTM	Continuous 6/29/2020	Continuous 6/29/2021	WC – STATUTORY EL \$1,000,000 – per accident/\$1,000,000 Disease per Policy/\$1,000,000 Disease per Employee
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS: Coverage applies as respects tort liability claims against the State of Washington as covered by the Tort Claims Act (RCW 4.92 et seq.) The Certificate Holder is named as additional insured, but only as respects the negligence of the State of Washington.				
CERTIFICATE HOLDER:		CANCELLATION		
EVIDENCE OF INSURANCE CERTIFICATE NUMBER CRT 2021-00186		SHOULD THE SELF INSURANCE LIABILITY PROGRAM BE CANCELLED, THE STATE OF WASHINGTON WILL ENDEAVOR TO MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL NOT IMPOSE ANY OBLIGATION OR LIABILITY UPON THE STATE OF WASHINGTON, ITS OFFICIALS, EMPLOYEES, AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE:  Jason Siems, State Risk Manager		