

Request for Group Policy Physician Claim History Information (Not to be used with Physicians Insured on Individual Policies)

This application **must be completed in full** and signed by an authorized individual. Additional copies may also be obtained on our website at <u>MDAdvantageonline.com</u>. The completed application may be emailed to: <u>claimsinfo@magmutual.com</u>. Alternatively, a third party release form will be accepted with appropriate authorization. Please direct questions to our Service Team at 800-282-4882.

Medical Professional Liability Claim History $\ \square$	Supreme Advant	age Claim History	Both 🗆
To whom should this information be released?			
Company/Organization name:			
Attention:	Dept:		
Email:	Phone:		
Address:			
City:	State:	_ Zip Code:	
Name of Group/Practice:			
Contact:			
Group (GRP) policy number:			
Named Insured on Policy:			
Current <u>mailing</u> address:		, , ,	
//////	City	/// State	Zip Code
Phone number:	Email:		
By way of their signature, the named individual request and receive all claim history information within the Group referenced above.			
, authorize the release of the Group Policy Physician (Name of authorized individual, typed or printed)			
Claim History information for each risk on the above-referenced Group Policy to the organization indicated above, its designated agent(s) or broker(s), employee(s) or representative(s). I agree to indemnify and hold MDAdvantage, a MagMutual Company, harmless for any and all liability, expense or claims arising out of the release of this information.			
My signature below authorizes the release of this Group Policy Physician Claim History information. This authorization expires one year from the date signed.			
Signature of named individual (NO STAMPED SIGNATURE	S ACCEPTED)	(Signature date re	quired)

MDAdvantage, a MagMutual Company, and its representatives have taken reasonable steps to ensure the accuracy of the information in the Group Policy Physician Claim History information or related report. Errors or omissions may occur due to the high number of requests and the volume of data involved. Independent verification with the healthcare professional(s) is strongly recommended. The information provided in no way alters or supersedes any of the terms and conditions of the policy.