International Coverage Guidelines & Application Instructions

(Faculty only. Separate application requirements for Residents & Fellows)

- 1. Applications will not be accepted until all requested information is provided.
- 2. Lawsuit must be filed in the United States.
- 3. Applications for International coverage are now submitted by the department representative directly to the online Non-Routine PLI database at: https://apps.utsystem.edu/NonRoutineProLi/homepage.aspx
- 4. Each faculty application is billed for a minimum of 30 days, no maximum number of days for faculty per fiscal year (same enrollment year).
- 5. Premium must be paid based on the single risk class rate recommended by our actuary to be pro-rated on a daily basis for the period of international assignment with billing for a minimum of 30 days.
- 6. A signed copy of the Department Chair or institutional President's approval letter must be uploaded to the online application.
- 7. SOS travel arrangements must be made.
- 8. An automated email notifies the department representative of the request approval. Once approved, a link to the coverage certificate will appear on the application screen. The requestor can print and/or save the certificate.
- 9. Premiums are billed on a quarterly basis by PLI-Accounting. Please include the POC e-mail in the online Comments if department requestor or approver will not be responsible for handling the payment.
- 10. For any other questions, contact Allene Evans at <u>aevans@utsystem.edu</u> or 512-499-4630.
- 11. To request set-up of a department user of the new database contact Kathy Smith at ksmith@utsystem.edu or 512-499-4503.

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International PLI Coverage

Faculty

Non-Routine PLI Database Required Online Information

Applications for International PLI coverage are now submitted online at: https://apps.utsystem.edu/NonRoutineProLi/homepage.aspx

If you are not set up as a designated user for your Department, please contact Kathy Smith at 512-499-4503 or ksmith@utsystem.edu for more information.

Information to be entered online (this	form is a guideline for the necessa	<u>ry online information</u>
and does not need to be completed):	G	·
Name:		
Name:	First Name	Middle
PLID		
(Applicant Status, License Number, Institut applicable) <i>are auto-populated</i> by selecting dropdown.)	ion, Department/Program Special the appropriate Faculty physician	ty (i.e., division if name/PLID from
International Facility Information		
Facility Name:		
City:		<u></u>
State/Province (if applicable):		
Country:		
Continent and/or Sub-continent:		
Beginning Date	Ending D	ate
Each approved faculty application requires a n number of days per enrollment year (fiscal yea online during the year as needed <u>without</u> anoth Automatic quarterly billing of additional days (fiscal year) a new application must be submitted	ninimum 30-day premium payment v er). The department may add additio her 30-day minimum premium or fur will generate on a per diem basis. <u>Ez</u>	with no maximum nal days of coverage ther approval.
The Department must <u>track the specific dates</u> the activity. This documentation will be required in		e covered Internationa
Department Chair approve	al (must be uploaded with the	e online request)

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