Instructions for Self-Insured Hospital Filings

New AND Renewal Submissions

The Department recommends that the following information be submitted ninety (60) days prior to the renewal date of coverage to allow sufficient time for the Department to determine the financial responsibility per IC 34-18-4-1(3):

1. Most recent audited financial statement, including a break-out for the hospital(s) if submitting a consolidated statement. If this is newly acquired facility, then provide the most recent audited financial statement for the facility prior to being acquired.


3. Most recent copy of license issued by the Department of Health pursuant to IC 16-21-2.

Once the Department has made the determination of the hospital’s financial responsibility, the hospital will be advised as to whether it may or may not participate in the Indiana Patient’s Compensation Fund (PCF) on a self-insured basis.

If approved, the Department will add the (new) facility to the PCF database and the hospital will need to proceed as follows:

1. Within thirty (30) days of the effective date of the policy, the hospital will need to remit the certificate and surcharge payment to the Department via the online filing portal at https://secure.in.gov/Apps/idoi/certificates/.

2. Once the Certificate and surcharge payment have been received, a confirmation letter of participation may be printed by accessing the database at www.in.gov/idoi/pcf and searching by provider name.

NOTE: If the Department determines that a hospital cannot continue on a self-insured basis, notification will be sent advising the hospital and setting a deadline to procure insurance through an admitted or authorized carrier.

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