

# MALAYSIAN MEDICAL ASSOCIATION

4<sup>th</sup> FLOOR, MMA HOUSE, 124 JALAN PAHANG  
53000 KUALA LUMPUR  
TEL NO: 03-40411375 FAX NO: 03-40419929 / 8187  
E-mail: insurance@mma.org.my MMA Website: www.mma.org.my

## MPS RENEWAL FORM MEDICAL PROTECTION SOCIETY

Name of Member : \_\_\_\_\_

Are you a member of MMA:  Yes  No

MPS Membership No. : MAM \_\_\_\_\_

If so, please state category of membership.

IC No. (New) : \_\_\_\_\_

Life Member  Ordinary

IC No. (Old) : \_\_\_\_\_

1. **NOTICE IS HEREBY GIVEN** that your annual subscription to The Medical Protection Society Limited is due for renewal. Please indicate your category and remit the appropriate payment as below. The revised subscription rates are effective from **01/02/2018 - 31/01/2019**.

GRADE	SPECIALTY	MALAYSIA RATES (RM)	DETAIL OF SPECIALTY
MLH	HOUSE OFFICER	190	
MO1	1 <sup>ST</sup> YEAR MEDICAL OFFICER	410	
MO2	2 <sup>ND</sup> YEAR MEDICAL OFFICER	410	
3MO	3 <sup>RD</sup> & SUBSEQUENT YEAR MEDICAL OFFICER	410	
GOV	OTHER GOVERNMENT DOCTORS	820	
COS	COSMETIC / AESTHETIC PRACTICE	98,000	
INN	NEUROSURGERY	95,500	
MOB	OBSTETRICS CLAIMS-MADE PROTECTION (Year 1)	56,222	
	OBSTETRICS CLAIMS-MADE PROTECTION (Year 2)	67,466	
	OBSTETRICS CLAIMS-MADE PROTECTION (Year 3)	78,711	
	OBSTETRICS CLAIMS-MADE PROTECTION (Year 4)	101,200	
SHS	SUPER HIGH RISK	76,700	
VHR	VERY HIGH RISK	44,650	
MHR	HIGH RISK	25,200	
INA	ANAESTHETICS	11,980	
MMR	MEDIUM RISK	10,950	
MLR	LOW RISK	5,030	
PGS	GP-CORE SERVICES	3,200	
PGP	GP-PROCEDURAL	5,710	
PGO	GP-WITH OBSTETRICS	23,570	
XGP	COSMETIC / AESTHETIC MEDICINE	11,750	
HNC	NON CLINICAL	1,410	

### GOVERNMENT DOCTORS ALSO WORKING IN THE PRIVATE SECTOR

To qualify for these rates, you must be in **government employment and work for a total of not more than two days per week in the private sector** (This can be taken as an average over a year, e.g. four days per week for six months).

GRADE	SPECIALTY	RATES (RM)	DETAIL OF SPECIALTY
MNG	NEUROSURGERY	48,430	
MSG	SUPER HIGH RISK	39,040	
MVG	VERY HIGH RISK	22,330	
MHG	HIGH RISK	12,600	
MAG	ANAESTHETICS	6,080	
MMG	MEDIUM RISK	5,290	
MLG	LOW RISK	3,010	
P1G	GP PROCEDURAL	3,400	
P2G	GP NON-PROCEDURAL	1,870	

2. If you have changed specialty, please give details as below :-
- a) Date changed from \_\_\_\_\_ to \_\_\_\_\_
- b) From (*specialty*) \_\_\_\_\_ to (*specialty*) \_\_\_\_\_
- c) Further description if any \_\_\_\_\_
3. Please issue a bank draft or cheque payable to **“MEDICAL PROTECTION SOCIETY”** for the appropriate amount according **to your specialty as listed** and remit it to MMA with this completed form.
4. Marital status :  Married  Single  Others
5. Employment status :  Government  Government Specialist
- Private  Private Specialist
- University  University Specialist
- Medical Officer  General Practitioner
6. Please complete the following particulars.

**(Please Take Note That Working Address, House Address, Email and Mobile Number Are Compulsory)**

WORKING ADDRESS	HOUSE ADDRESS
<b>Postcode :</b>	<b>Postcode :</b>
<b>Tel. No. :</b>	<b>Tel. No. :</b>
<b>Fax No. :</b>	<b>Fax No. :</b>
<b>E-mail :</b>	<b>E-mail :</b>
<b>Mobile Phone No. :</b>	<b>Mobile Phone No. :</b>

7. Please state your correspondence address :  Working  House
8. Effective date of change : \_\_\_\_\_
9. Please write below if you do not wish to renew your subscription with MPS.

\_\_\_\_\_

\_\_\_\_\_

**Signature of Member :** \_\_\_\_\_ **Date :** \_\_\_\_\_

**FOR OFFICE USE :**

Issued By : \_\_\_\_\_  Cash  Online  Cheque No. : \_\_\_\_\_

Receipt No. : \_\_\_\_\_ Date of Receipt : \_\_\_\_\_

Comments if any : \_\_\_\_\_