

## Fraudulent insurance claims

*Dr J was a private doctor. His friend Tony, who was an insurance agent, invited Dr J to issue bogus medical certificates for construction workers for the purpose of deceiving insurance compensation...*

Dr J was practising in a private clinic. On one occasion, his friend Tony, an insurance agent, suggested to him a plan for earning quick money. The Personal Accident Insurance Policy (PAI) offered by his company would provide insurance compensation for an injury caused by an accident resulting in death, permanent or temporary disability to an insured. All claims under the PAI had to be supported by a form issued and signed by a registered doctor in Hong Kong. Tony knew many construction workers and, as a first step, he would suggest to them to buy PAI policies from him. These individuals would make claims later, even though they just suffered from minor injuries. What Dr J could help was to issue the medical attendant forms to support the claims and exaggerate the seriousness of the injuries, thus resulting in higher compensation payments. The “profit” could then be split among all parties.

### Case Analysis

Dr J, Tony and the construction workers would commit an offence of conspiracy to defraud by colluding in making bogus insurance claims to deceive Tony’s insurance company for personal gain.

Dr J might also violate Section 26.3 of the Professional Code and Conduct issued by the Medical Council of Hong Kong (Jan 2016) for issuing untrue medical certificates.

