

HEALTHCARE PROVIDERS SERVICE ORGANIZATION PURCHASING GROUP



Certificate of Insurance OCCURRENCE PROFESSIONAL LIABILITY POLICY FORM

Print Date: 6/19/2023

The application for the Policy and any and all supplementary information, materials, and statements submitted therewith shall be maintained on file by us or our Program Administrator and will be deemed attached to and incorporated into the Policy as if physically attached.

PRODUCER 018098	BRANCH 970	PREFIX HPG	POLICY NUMBER 0717432925	POLICY PERIOD From: 11/13/22 to 11/13/23 at 12:01 AM Standard Time		
Named Insure	d and Addres	ss:		Program Administered by:		
	auvin nd Trace Dr ge, LA 70810	0-5059		Healthcare Providers Service Organization 1100 Virginia Drive, Suite 250 Fort Washington, PA 19034 1-800-982-9491		
Medical Speci	alty:		Code:	www.hpso.com Insurance Provided by:		
Occupation	nal Therapist		80721	American Casualty Company of Reading, Pennsylvania 151 N. Franklin Street Chicago, IL 60606		
Excludes C	Cosmetic Pro	cedures				

Professional Liability

\$ 1,000,000

each claim \$ 3,000,000

aggregate

Your professional liability limits shown above include the following:

Good Samaritan Liability

* Malplacement Liability

* Personal Injury Liability

* Sexual Misconduct Included in the PL limit shown above subject to \$ 25,000 aggregate sublimit

Coverage Extensions

verage Extensions					
License Protection Defendant Expense Benefit Deposition Representation Assault Includes Workplace Violence Counseling	\$ 25,000 \$ 1,000 \$ 10,000 \$ 25,000	per proceeding per day limit per deposition per incident	\$ 25,000 \$ 25,000 \$ 10,000 \$ 25,000	aggregate aggregate aggregate aggregate	
Medical Payments First Aid Damage to the Property of Others Information Privacy (HIPAA) Fines and Penalties Media Expense	\$ 25,000 \$ 10,000 \$ 10,000 \$ 25,000 \$ 25,000	per person per incident per incident per incident per incident	\$ 100,000 \$ 10,000 \$ 10,000 \$ 25,000 \$ 25,000	aggregate aggregate aggregate aggregate	

Workplace Liability

Personal Liability

Workplace Liability Fire & Water Legal Liability

Included in Professional Liability Limit shown above

Included in the PL limit shown above subject to \$150,000

\$1,000,000 aggregate

aggregate sublimit

Total \$

232.00

Base Premium

\$232.00

Premium reflects Self Employed, Full Time

Policy Forms and Endorsements (Please see attached list of policy forms and endorsements)

Chairman of the Board

Keep this Certificate of Insurance in a safe place. It and proof of payment are your proof of coverage. There is no coverage in force unless the premium is paid in full. To activate your coverage, please remit premium in full by the effective date of this Certificate of Insurance.

Coverage Change Date:

Endorsement Date:

Master Policy: 188711433

CNA93692 (11-2018)