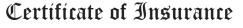


HEALTHCARE PROVIDERS SERVICE ORGANIZATION PURCHASING GROUP





OCCURRENCE PROFESSIONAL LIABILITY POLICY FORM

Print Date: 03/16/21

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 BRANCH PREFIX POLICY NUMBER POLICY PERIOD HPG 018098 0296556964-8 From: 04/21/21 to 04/21/22 at 12:01 AM Standard Time 970 Name Insured and Address: **Program Administered by:** Healthcare Providers Service Organization Stephanie A Stolte 3101 Paseo Entrada Rd 1100 Virginia Drive, Suite 250 Turlock, CA 95382-8610 Fort Washington, PA 19034 1-800-982-9491 www.hpso.com/renew Code **Insurance Provided by:** Medical Specialty American Casualty Company of Reading, Pennsylvania Certified Rolfer 151 N. Franklin Street Excludes Cosmetic Procedures Chicago, IL 60606 \$1,000,000 each claim \$3,000,000 aggregate Professional Liability 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** 25.000 License Protection \$ 25,000 per proceeding \$ aggregate Defendant Expense Benefit \$ 1.000 per day limit \$ 25.000 aggregate \$ 10.000 **Deposition Representation** 10.000 per deposition \$ aggregate \$ Assault 25,000 per incident \$ 25,000 aggregate Includes Workplace Violence Counseling \$ \$ Medical Payments 25,000 100,000 per person aggregate 10,000 \$ 10,000 First Aid \$ per incident aggregate Damage to Property of Others \$ 10,000 per incident \$ 10,000 aggregate Information Privacy (HIPAA) Fines & Penalties \$ 25,000 per incident \$ 25,000 aggregate Media Expense \$ 25,000 per incident \$ 25,000 aggregate General Liability \$1,000,000 each claim / \$1,000,000 aggregate General Liability Fire and Water Legal Liability Included in the GL limit above subject to \$250,000 aggregate sublimit Personal Liability Excluded Total \$337.00 Premium reflects self-employed, part-time rate. Policy Forms and Endorsements (Please see attached list of policy forms and endorsements) Chairman of the Board Secretarv 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)

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POLICY FORMS & ENDORSEMENTS

The following are the policy forms and endorsements that apply to your current professional liability policy.

CNA82011 Hea G-145184-A Poli G-147292-A Poli CNA81753 Cap CNA81753 Cap CNA81753 Cap GSL13424 Serv GSL15563 Info GSL15565 Hea GSL17101 Excl CNA80052 Dist CNA80051 Ame GSL-6721 Excl GSL-6720 Fitm CNA79575 Excl G-121504-C Gen CNA89027 Excl CNA89026 Med	urrence Policy Form - California Ithcare Providers Related Claims Endorsement cyholder Notice - OFAC Compliance Notice cyholder Notice - Silica Mold & Asbestos Disclosure on Losses from Certified Acts of Terrorism r of Terrorism Coverage - Disclosure of Premium vices to Animals mation Privacy Coverage Endorsement HIPAA Fines, Penalties & Notification Costs ual Misconduct Sublimits of Liability Professional Liability & Sexual Misconduct Exclusion Ithcare Providers Professional Liability Assault Coverage usion of Specified Activities Reuse of Parenteral Devices and Supplies ribution or Recording of Material or Information in Violation of Law Exclusion Endorsement fornia Cancellation and Non-Renewal ended Definition of Claim usion of Personal Liability ess Liability Endorsement usion of Cosmetic Procedures eral Liability Form usion of Entity, Employees or Independent Contractors Endorsement lia Expense Coverage ificate Holder itional Insured General Liability
G-123827-B Add	itional Insured General Liability

Self-employed individuals may be eligible for General Liability coverage subject to underwriting approval. Should an individual practitioner's status change from self-employed to employed, general liability coverage will be deleted and replaced with workplace liability. Please contact Healthcare Providers Service Organization for details.

Form #: CNA93692 (11-2018)

Master Policy #: 188711433

Named Insured: Stephanie A Stolte

Policy #: 0296556964-8