LEXINGTON INSURANCE COMPANY WILMINGTON, DELAWARE ADMINISTRATIVE OFFICES: 100 SUMMER STREET, BOSTON, MA 02110-2103 (A Capital Stock Insurance Company)

HEALTHCARE PROFESSIONAL LIABILITY - CLAIMS MADE AND HEALTHCARE GENERAL LIABILITY - CLAIMS MADE

DECLARATIONS

Various provisions in the General Policy Provisions and Conditions and Coverage Parts restrict coverage. There may be both occurrence coverages and claims made coverages in this Policy. Claims made coverage is limited to liability for claims first made against an Insured during the policy period or any extended reporting period, if applicable.

Please read all General Policy Provisions and Conditions and Coverage Parts carefully to determine rights, duties, and what is not covered. A complete Policy includes the Declarations, General Policy Provisions and Conditions, and the applicable Coverage Parts.

POLICY NUMBER:

RENEWAL OF NUMBER:

Item 1. FIRST NAMED INSURED:

Item 2. ADDRESS:

Item 3. (a) RETROACTIVE DATE – HEALTHCARE PROFESSIONAL LIABILITY AND HEALTHCARE GENERAL LIABILITY CLAIMS MADE COVERAGE PARTS:

(b) POLICY PERIOD: From: To:

at 12:01 a.m. Standard Time at your mailing address shown above.

(c) OPTIONAL EXTENDED REPORTING PERIOD: years for % of the annual premium.

Item 4. DESCRIPTION OF OPERATIONS:

Item 5.	LIMITS OF INSURANCE		
	(a) Healthcare Professional Liability		
	Aggregate Limit	\$	
	Each Medical Incident	\$	
	Deductible	\$	
	Deductible Aggregate	\$	
	(b) Healthcare General Liability		
	Aggregate Limit	\$	
	Each Occurrence Limit	\$	
	Products/Completed Operations Limit	\$	
	Personal/Advertising Injury Limit	\$	
	Fire Damage Limit	\$	Each Fire
	Medical Expense Limit	\$	Each Injured Person
	Deductible	\$	
	Deductible Aggregate	\$	
ltem 6.	PREMIUM		
ltem 7.	FORMS AND ENDORSEMENTS - Attached at Incept	ion	
tem 8.	PRODUCER NAME AND ADDRESS		

By_

Countersignature (In States Where Applicable)

HEALTHCARE PROFESSIONAL LIABILITY AND HEALTHCARE GENERAL LIABILITY

GENERAL POLICY PROVISIONS AND CONDITIONS

VARIOUS PROVISIONS IN THE GENERAL POLICY PROVISIONS AND CONDITIONS AND COVERAGE PARTS RESTRICT COVERAGE. THERE MAY BE BOTH OCCURRENCE COVERAGES AND CLAIMS MADE COVERAGES IN THIS POLICY. PLEASE READ ALL GENERAL POLICY PROVISIONS AND CONDITIONS AND COVERAGE PARTS CAREFULLY TO DETERMINE YOUR RIGHTS, DUTIES, AND WHAT IS AND WHAT IS NOT COVERED. A COMPLETE POLICY INCLUDES THE DECLARATIONS, GENERAL POLICY PROVISIONS AND CONDITIONS, AND THE APPLICABLE COVERAGE PARTS.

Throughout this Policy the words **you** and **your** mean the **First Named Insured**, including any other **Named Insured**. The words **we**, **us** and **our** mean the Company providing insurance under this Policy. Other words and phrases are defined in Section I. Definitions Applicable To General Policy Provisions and Conditions and All Coverage Parts. Further, words that appear in the General Policy Provisions and Conditions may be defined in other Coverage Parts forming part of this policy.

In consideration of the payment of the premium and in reliance upon the statements in the Application and upon the Declarations, we agree as follows:

I. DEFINITIONS APPLICABLE TO GENERAL POLICY PROVISIONS AND CONDITIONS AND ALL COVERAGE PARTS

- A. Advertisement means a notice that is broadcast or published to the general public or specific market segments about your goods, products or services for the purpose of attracting customers or supporters.
- B. Auto means a land motor vehicle, trailer, or semitrailer designed for travel on public roads, including any attached machinery or equipment. Auto, however, does not include mobile equipment.
- C. **Biomedical Waste** means a biological agent or condition including, but not limited to, an infectious organism or unsafe laboratory condition that may cause or result in **bodily injury** or **property damage.**
- D. **Bodily Injury** means physical injury, sickness or disease sustained by any person, including death resulting from any of these at any time. **Bodily injury** does not include emotional distress or mental anguish unless due to physical injury, sickness or disease.
- E. Claim means a written demand against an insured for monetary damages, including a suit.
- F. Defense Costs means costs and expenses incurred by us including fees charged by an attorney designated by us to investigate or defend any claim or suit brought against any insured.

Defense costs does not include salary charges or the expenses of our regular employees.

- G. Employee means a person paid by you in connection with your business. It includes a leased worker but does not include a temporary worker or independent contractor.
- H. Executive Officer means a person holding any of the officer positions created by your charter, constitution, by-laws or any other similar governing document.

- I. First Named Insured means the Named Insured designated on Item 1. of the Declarations attached to this policy.
- J. **Impaired Property** means tangible property, other than **your product** or **your work**, that cannot be used or is less useful because:
 - 1. It incorporates **your product** or **your work** that is known or thought to be defective, deficient, inadequate, or dangerous; or
 - 2. You have failed to fulfill the terms of a contract or agreement;

if such property can be restored to use by:

- 1. The repair, replacement, adjustment or removal of your product or your work; or
- 2. The fulfilling of the terms of the contract or agreement by you.
- K. Insured Contract means:
 - A contract for a lease of premises. However, that portion of the contract for a lease of premises that indemnifies any person or organization for damage by fire to premises while rented to you or temporarily occupied by you with permission of the owner is not an insured contract;
 - 2. A sidetrack agreement;
 - Any easement or license agreement, except in connection with construction or demolition operations on or within 50 feet of a railroad;
 - 4. An obligation, as required by ordinance, to indemnify a municipality, except in connection with work for a municipality;
 - 5. An elevator maintenance agreement; or
 - 6. That part of any other contract or agreement pertaining to your business (including an indemnification of a municipality in connection with work performed for a municipality) under which you assume the tort liability of another party to pay for bodily injury or property damage to a third person or organization. Tort liability means a liability that would be imposed by law in the absence of any contract or agreement.

Paragraph 6. does not include that part of any contract or agreement:

- That indemnifies a railroad for bodily injury or property damage arising out of construction or demolition operations, within 50 feet of any railroad property and affecting any railroad bridge or trestle, tracks, road-beds, tunnel, underpass or crossing;
- b. That indemnifies an architect, engineer or surveyor for injury or damage arising out of:
 - Preparing, approving or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings, designs and specifications; or
 - ii. Giving directions or instructions, or failing to give them, if that is the primary cause of the injury or damage; or

- c. Under which you, if an architect, engineer or surveyor, assumes liability for bodily injury or property damage arising out of your rendering or failure to render professional services, including those listed in b. above and supervisory, inspection, architectural or engineering activities.
- L. Leased Worker means a person leased to you by a labor leasing firm, under an agreement between you and the labor leasing firm, to perform duties related to the operations as described in the Declarations and which are at your direction. Leased worker does not include a temporary worker.
- M. Loading or Unloading means the handling of property:
 - After it is moved from the place where it is accepted for movement into or onto an aircraft, watercraft, or **auto**;
 - 2. While it is in or on an aircraft, watercraft or auto; or
 - While it is being moved from an aircraft, watercraft or auto to the place where it is finally delivered;

But **loading or unloading** does not include the movement of property by means of a mechanical device, other than a hand truck, that is not attached to the aircraft, watercraft, or **auto**.

- N. Medical Incident means any act, error or omission in the providing of or failure to provide professional services.
- O. **Mobile Equipment** means any of the following types of land vehicles, including any attached machinery or equipment and including, but not limited to:
 - Bulldozers, farm machinery, forklifts, and other vehicles designed for use principally off public roads;
 - 2. Vehicles maintained for use solely on or next to premises you own or rent;
 - 3. Vehicles that travel on crawler treads;
 - 4. Vehicles, whether self-propelled or not, maintained primarily to provide mobility to permanently mounted:
 - a. Power cranes, shovels, loaders, diggers or drills; or
 - b. Road construction or resurfacing equipment such as graders, scrapers or rollers;
 - 5. Vehicles other than those described in Items 1, 2, 3, or 4 above that are not selfpropelled and are maintained primarily to provide mobility to permanently attached equipment of the following types:
 - a. Air compressors, pumps and generators, including spraying, welding, building cleaning, geophysical exploration, lighting and well servicing equipment; or
 - b. Cherry pickers and similar devices used to raise or lower workers;
 - 6. Vehicles other than those described in Items 1, 2, 3, or 4 above that are maintained primarily for purposes other than the transportation of persons or cargo.

However, self-propelled vehicles with the following types of permanently attached equipment are not **mobile equipment** but will be considered **autos**:

- a. Equipment designed primarily for:
 - i. Snow removal;
 - ii. Road maintenance, but not construction or resurfacing; or
 - iii. Street cleaning;
- b. Cherry pickers and similar devices mounted on **auto** or truck chassis and used to raise or lower workers; and
- c. Air compressors, pumps and generators, including spraying, welding, building cleaning, geophysical exploration, lighting and well servicing equipment.
- P. Occurrence means:
 - As respects bodily injury, property damage or medical expense, an accident, including continuous or repeated exposure to substantially the same general conditions, which results in bodily injury or property damage neither expected nor intended from the standpoint of the Insured. All such exposure to substantially the same general conditions shall be considered as arising out of one occurrence;
 - As respects personal injury, an offense arising out of your business that results in personal injury. All damages that arise from the same or related injurious material or act shall be considered as arising out of one occurrence, regardless of the frequency of repetition thereof, the number and kind of media used and the number of claimants;
 - 3. As respects advertising injury, an offense committed in the course of advertising your goods, products and services that results in advertising injury. All damages that arise from the same or related injurious material or act shall be considered as arising out of one occurrence, regardless of the frequency or repetition thereof, the number and kind of media used and the number of claimants.
- Q. **Patient** means a person seeking or receiving, either on an inpatient, outpatient or emergency basis, any form of medical, surgical, dental or nursing care or any service or treatment.
- R. **Personal and Advertising Injury** means injury, including consequential **bodily injury**, arising out of one or more of the following offenses:
 - 1. False arrest, detention, or imprisonment;
 - 2. Malicious prosecution;
 - The wrongful eviction from, wrongful entry into, or invasion of the right of private occupancy of a room, dwelling, or premises that a person occupies, committed by or on behalf of its owner, landlord, or lessor;
 - Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services;
 - 5. Oral or written publication of material that violates a person's right of privacy;

- 6. The use of another's advertising idea in your advertisement;
- 7. Infringing upon another's copyright, trade dress or slogan in your advertisement.
- S. **Policy Period** means the period commencing on the inception date shown on the Declarations and ending on the earlier of the expiration date or the effective date of cancellation of the Policy.
- T. Pollutants means any solid, liquid, gaseous, or thermal irritant or contaminant, including, but not limited to: smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes, but is not limited to, biomedical waste and materials to be recycled, reconditioned or reclaimed.
- U. Products-Completed Operations Hazard includes all bodily injury and property damage occurring away from premises you own or rent and arising out of your product or your work except:
 - 1. Products that are still in your physical possession; or
 - 2. Work that has not yet been completed or abandoned. However, **your work** will be deemed completed at the earliest of the following times:
 - a. When that part of the work done at a job site has been put to its intended use by any person or organization other than another contractor or subcontractor working on the same project.
 - b. When all of the work called for in your contract has been completed.
 - c. When all of the work to be done at the job site has been completed if **your** contract calls for work at more than one job site.

Work that may need service, maintenance, correction, repair or replacement, but which is otherwise complete, will be treated as completed.

This hazard does not include bodily injury or property damage arising out of:

- 1. The transportation of property, unless the injury or **damage** arises out of a condition in or on a vehicle not owned or operated by **you**, and that condition was created by the **loading or unloading** of that vehicle by any Insured;
- 2. The existence of tools, uninstalled equipment, or abandoned or unused materials; or
- Products or operations for which the classification, listed in the Declarations or in a policy schedule, states that products-completed operations are subject to the General Aggregate Limit.

V. Professional Services means:

 Medical, surgical, dental, nursing or other health care services including but not limited to the furnishing of food or beverages in connection with such services; the practice of nuclear medicine; the furnishing or dispensing of drugs or medical, dental or surgical supplies or appliances; or the handling or treatment of deceased human bodies, including, but not limited to, autopsies, organ donation or other procedures;

- 2. Services by any person as a member of a formal accreditation, standards review or similar professional board or committee of any Insured; or
- 3. Supervising, teaching, proctoring others at your request.

W. Property Damage means:

- Physical injury to tangible property, including all resulting loss of use of that property. All such loss of use shall be deemed to occur at the time of the physical injury that caused it; or
- Loss of use of tangible property that is not physically injured. Solely with respect to any bodily injury and property damage coverage of this policy, all such loss of use shall be deemed to occur at the time of the occurrence that caused it.
- X. Suit means a civil action in which damages are alleged because of an occurrence, claim, medical incident, bodily injury, property damage, personal injury or advertising injury to which this insurance applies. Suit includes:
 - 1. An arbitration proceeding in which such damages are claimed and to which an **Insured** must submit or does submit with **our** consent; or
 - 2. Any other alternative dispute resolution proceeding in which such damages are claimed and to which an **Insured** submits with **our** consent.
- Y. **Temporary Worker** means a person who is furnished to **you** to substitute for a permanent **employee** on leave or to meet seasonal or short-term work load requirements.

Z. Your Product means:

- 1. Any goods or products, other than real property, manufactured, sold, handled, distributed or disposed of by:
 - a. You;
 - b. Others trading under your name; or
 - c. A person or organization whose business or assets you have acquired; and
- 2. Containers (other than vehicles), materials, parts or equipment furnished in connection with such goods or products.

Your product includes:

- 1. Warranties or representations made at any time with respect to the fitness, quality, durability, performance or use of **your product**; and
- 2. The providing of or failure to provide warnings or instructions.

Your product does not include vending machines or other property rented to or located for the use of others but not sold.

AA. Your Work means:

- 1. Work or operations performed by you or on your behalf; and
- 2. Materials, parts or equipment furnished in connection with such work or operations.

Your work includes:

- 1. Warranties or representations made at any time with respect to the fitness, quality, durability, performance or use of **your work**; and
- 2. Providing of or failure to provide warnings or instructions.

II. DEFENSE AND OTHER PAYMENTS UNDER THIS POLICY – ALL COVERAGE PARTS

- A. When we have the duty to defend any suit, we will defend such suit against the Insured for a covered claim seeking damages on account of a medical incident, bodily injury, property damage, personal injury or advertising injury even if such claim or suit is groundless, false or fraudulent. We have the right to investigate, defend, appoint an attorney to defend and settle the suit as we deem expedient.
- B. In addition to the Limits of Insurance applicable to this Policy, we shall pay, with respect to any suit we defend:
 - 1. All expenses we incur including defense costs.
 - Up to \$250 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which any **bodily injury** liability coverage applies.
 We do not have to furnish these bonds.
 - 3. The cost of bonds to release attachments, but only for bond amounts within the applicable Limit of Insurance. We do not have to furnish these bonds.
 - 4. All reasonable expenses incurred by an **Insured** at **our** request to assist **us** in the investigation or defense of the **suit**, including actual loss of earnings up to \$500 a day because of time off from work.
 - 5. Pre-judgment interest awarded against the **Insured** on that part of the judgment **we** pay. If prior to judgment, **we** make an offer to pay the applicable Limit of Insurance, **we** will not pay any pre-judgment interest based on that period of time after the offer.
 - 6. All interest on the full amount of any judgment that accrues after entry of the judgment and before **we** have paid, offered to pay, or deposited in court the part of the judgment that is within the applicable Limit of Insurance.
 - 7. All costs taxed against the **Insured** in the **suit**.
 - 8. Premiums on appeal bonds required by law to appeal any **suit we** defend, but only for bond amounts within the applicable Limits of Insurance. **We** are not obligated to apply for or furnish any such bond.
- C. With respect to the HEALTHCARE GENERAL LIABILITY COVERAGE PART only, if we defend an **Insured** against a **suit** and an indemnitee of the **Insured** is also named as a party to the **suit**, we will defend that indemnitee if all of the following conditions are met:
 - 1. The **suit** against the indemnitee seeks damages for which the **Insured** has assumed the liability of the indemnitee in a contract or agreement that is an **insured contract**;
 - 2. This insurance applies to such liability assumed by the **Insured**;
 - 3. The obligation to defend, or the cost of the defense of that indemnitee, has also been assumed by the **Insured** in the same **insured contract**;

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- The allegations in the suit and the information we know about the occurrence are such that no conflict appears to exist between the interests of the Insured and the interests of the indemnitee;
- 5. The indemnitee and the **Insured** ask **us** to conduct and control the defense of that indemnitee against such **suit** and agree that **we** can assign the same counsel to defend the **Insured** and the indemnitee; and
- 6. The indemnitee agrees in writing to:
 - a. Cooperate with us in the investigation, settlement or defense of the suit,
 - b. Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the suit;
 - c. Notify any other insurer whose coverage is available to the indemnitee; and
 - d. Cooperate with **us** with respect to coordinating other applicable insurance available to the indemnitee; and
- 7. The indemnitee provides us with written authorization to:
 - a. Obtain records and other information related to the suit; and
 - b. Conduct and control the defense of the indemnitee in such **suit**.

So long as the above conditions are met, attorneys fees incurred by **us** in the defense of that indemnitee, necessary litigation expenses incurred by **us** and necessary litigation expenses incurred by the indemnitee at **our** request, will be paid as stated in Section II. Defense And Other Payments Under This Policy-All Coverage Parts. Notwithstanding the provisions of Section III. S. 2. b. (Contractual Liability) of the HEALTHCARE GENERAL LIABILITY COVERAGE PART such payments will not be deemed to be damages for **bodily injury** and **property damage** and will not reduce the Limits of Insurance.

Our obligation to defend an Insured's indemnitee and to pay for attorney's fees and necessary litigation expenses as Other Payments Under This Policy ends when:

- 1. We have used up the applicable Limit of Insurance in the payment of judgments or settlements; or
- 2. The conditions set forth above, or the terms of the agreement described in paragraph 6. above, are no longer met.
- D. Our duty to defend any suit ends, and we may withdraw from the defense, after the applicable Limit of Insurance has been exhausted by the payment of settlements, judgments or awards including pre-judgement interest.

III. CONDITIONS APPLICABLE TO ALL COVERAGE PARTS

The following conditions apply to all coverage parts:

A. Assistance and Cooperation

The Insured shall:

a. Cooperate with us in the investigation, settlement, or defense of the claim or suit; and

b. Assist **us**, upon **our** request, in the enforcement of any right against any person or organization which may be liable to the Insured because of injury or damage to which this insurance may also apply.

The Insured shall not, except at the Insured's own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without **our** consent.

B. Audit

We may audit and examine **your** books and records as they relate to this policy at any time during the period of this policy and for up to three years after the expiration or termination of this policy.

C. Changes

Notice to any agent or knowledge possessed by any agent or any other person will not effect a waiver or a change in any part of this policy. This policy can only be changed by a written endorsement that becomes a part of this policy and that is signed by one of **our** authorized representatives.

D. Knowledge and Notice of a Medical Incident or Occurrence

Knowledge of a **medical incident** or **occurrence** on the part of the risk management department or on the part of an executive officer constitutes knowledge by the **First Named Insured**.

E. Coverage Territory

We will cover an occurrence, offense or medical incident in the United States of America, its territories and possessions, Canada and Puerto Rico, provided a claim is made and suit is brought in the United States of America, its territories and possessions, Canada or Puerto Rico.

F. Mergers/Acquisitions

We will cover any organization you newly acquire or form, other than a partnership, joint venture or limited liability company, and over which you maintain ownership or at least a majority interest, only for sixty (60) days or for the remainder of the policy period, whichever is less, from the date that you acquire or form it. You are not covered for damages that arise out of bodily injury, property damage or medical incidents that occurred before you acquired or formed the organization, or personal and advertising injury arising out of an occurrence which took place before you acquired or formed the organization. You shall notify us or our authorized representative in writing within sixty (60) days of such acquisition.

If any person or organization became an additional **Named Insured** under this policy after the inception date, the **policy period** for that person or organization begins on the date that such person or organization became an additional **Named Insured** and ends on the earlier of the expiration date or the effective date of cancellation of the policy.

For coverage to apply to the newly acquired or formed organization upon acquisition **you** must do the following within sixty (60) days:

- 1. Submit an underwriting application to us;
- 2. The application must be approved by us;

- 3. Pay any additional premium; and
- 4. Agree to any amendment of the provisions of this Policy required by **us** relating to such company.

If **you** are acquired or merged into another organization not named as an **Insured** in this policy, then this insurance shall cease immediately upon such acquisition or merger.

G. Legal Action Against Us

No person or organization has a right under this Policy:

- 1. To join us as a party or otherwise bring us into a suit asking for damages from you; or
- 2. To sue us under this Policy, unless all this Policy's terms have been complied with in full.

A person or organization may sue **us** to recover on an agreed settlement or on a final judgment against **you** obtained after an actual trial; but **we** will not be liable for damages that are not payable under the terms of any Insuring Agreement or that are in excess of the applicable Limit of Insurance. An agreed settlement means a settlement and release of liability signed by **us**, **you** and the claimant or the claimant's legal representative.

H. Other Insurance

If there is other insurance which applies to the loss resulting from an **occurrence**, offense or **medical incident**, the other insurance must pay first. This Policy applies to the amount of the loss which is more than:

- 1. The Limits of Insurance of the other insurance; and
- 2. The total of all deductibles and self-insured amounts under all such other insurance.
- I. Other Member Companies of the American International Group, Inc. Policies

Two or more insurance policies may be issued by **us** or other member companies of American International Group, Inc. These policies may provide coverage for:

- 1. Claims or suits arising from the same occurrence, offense or medical incident; or
- 2. Persons or organizations covered in those policies that are jointly and severally liable.

In such a case, **we** shall not be liable under this Policy for an amount greater than the proportion of the loss that this Policy's applicable Limit of Insurance bears to the total applicable Limits of Insurance under all such policies.

In addition, the total amount payable under all such policies is the highest, single applicable Limit of Insurance among all such policies.

J. Separation of Insureds

Except with respect to the Limits of Insurance and deductible, and except with respect to any rights or duties specifically assigned in this Policy to the **Named Insured**, this insurance applies:

- 1. As if each **Insured** were the only **Insured**; and
- 2. Separately to each Insured against whom a claim is made or suit is brought.
- K. Bankruptcy/Insolvency

Your bankruptcy or insolvency will not relieve us of our obligations under this Policy.

L. Representations

By accepting this Policy, the First Named Insured agrees that:

- 1. The statements in the Declarations and/or Applications are accurate and complete;
- 2. Those statements are based upon representations made to us by you; and
- 3. We have issued this Policy in reliance upon your representations.
- M. Subrogation

If an **Insured** has rights to recover all or part of any payment **we** have made under this Policy, those rights are transferred to **us**. An **Insured** shall do nothing to impair these rights after a loss. At **our** request, an **Insured** will bring **suit** or transfer those rights to **us** and fully cooperate with **us** with respect to enforcing them.

Any recoveries will be applied in accordance with the following priorities:

- 1. Any person or organization, including the **Insured**, that have paid an amount in excess of **our** payment under this policy will be reimbursed first;
- 2. We then will be reimbursed up to the amount we have paid; and
- 3. Lastly, any interests, including the **Insured**, over which **our** insurance is excess, are entitled to the residual.
- N. Conformance To Statute

To the extent that this Policy conflicts with any law, statute, or regulation applicable to this Policy, this Policy shall conform to the minimum requirements of that law, statute, or regulation.

O. Transfer of Your Rights and Duties

Your rights and duties under this policy may not be transferred without our written consent.

If **you** die or are legally declared bankrupt, **your** rights and duties will be transferred to **your** legal representative but only while acting within the scope of duties as **your** legal representative. However, notice of cancellation sent to the **First Named Insured** designated in Item 1 of the Declarations and mailed to the address shown in this policy will be sufficient notice to effect cancellation of this policy.

P. Special Rights And Duties Of First Named Insured

It is agreed by all **Insureds** that the **First Named Insured** is authorized to act on behalf of all **Insureds** as to:

- 1. Giving and receiving notice of cancellation;
- 2. Payment of premiums and receipt of return premiums;
- 3. Acceptance of any endorsements to this Policy;
- 4. Purchasing or deciding not to purchase the Optional Extended Reporting Period Endorsement, if applicable; or
- 5. Making changes in this Policy or any coverage part with **our** consent.
- 6. Making representation with respect to the issuance by us of this Policy.

This Policy can only be changed by a written endorsement \boldsymbol{we} issue and make a part of this Policy.

Q. Inspections And Surveys

We have the right but are not obligated to:

- 1. Make inspections and surveys at any time;
- 2. Give the First Named Insured reports on the conditions we find; and
- 3. Recommend changes.

Any inspections, surveys, reports, or recommendations are related only to insurability and the premiums to be charged.

We do not undertake to perform the duty of any person or organization to provide for the health or safety of workers or the public.

We do not warrant that conditions:

- 1. Are safe or healthful; or
- 2. Comply with laws, regulations, codes, or standards.

This condition applies not only to **us**, but also to any rating, advisory, rate service or similar organization which makes insurance inspections, surveys, reports, or recommendations.

R. Omnibus Reconciliation Act

We will comply with the requirements of section 952 of the Omnibus Reconciliation Act of 1980. Upon written request, the company will allow the secretary of health and human resources and the comptroller general access to the policy and necessary books, documents and records to verify the cost of the policy, to the extent required by law. Access will also be allowed to subcontract between the Company and any affiliated organization of the Company and to its books, documents and records. Such access will be provided up to four years after the services furnished under this policy end.

S. Titles Of Paragraphs

Titles of paragraphs are inserted solely for convenience of reference and shall not be deemed to limit, expand or otherwise affect the provisions to which they relate.

T. Service Of Suit

In the event of **our** failure to pay any amount claimed to be due hereunder, **we**, at **your** request, will submit to the jurisdiction of a court of competent jurisdiction within the United States. Nothing in this condition constitutes or should be understood to constitute a waiver of **our** rights to commence an action in any court of competent jurisdiction in the United States to remove an action to a United States District Court or to seek a transfer of a case to another court as permitted by the laws of the United States or of any state in the United States. It is further agreed that service of process in such suit may be made upon Counsel, Legal Department, Lexington Insurance Company, 100 Summer Street, Boston, Massachusetts 02110-2103 or his or her representative, and that in any suit instituted against **us** upon this Policy, **we** will abide by the final decision of such court or of any appellate court in the event of any appeal.

Further, pursuant to any statute of any state, territory, or district of the United States which makes provision therefor, **we** hereby designate the Superintendent, Commissioner or Director of Insurance, or other officer specified for that purpose in the statute, or his or her successors in office, as our true and lawful attorney upon whom may be served any lawful process in any action, suit, or proceeding instituted by **you** or on **your** behalf or any beneficiary hereunder arising out of this Policy of insurance, and hereby designates the above named Counsel as the person to whom the said officer is authorized to mail such process or a true copy thereof.

IV. CANCELLATION/NON-RENEWAL

A. When We Do Not Renew

If we decide not to renew this Policy, we will mail or deliver to the **First Named Insured** at the address designated in the Declarations written notice of the non-renewal not less than thirty (30) days before the expiration date. If such notice is mailed, proof of mailing will be sufficient proof of notice. If we mail or deliver the notice less than thirty (30) days before the expiration, we will extend the **policy period** so that the expiration date will be thirty (30) days after we mail or deliver the notice. You will be charged a pro rata additional premium for such extension. Such extension shall be subject to the remaining Limits of Insurance of this Policy and there shall not be a reinstatement of the Aggregate Limits. You can terminate the extension at any time, but not retroactively.

B. Cancellation

This Policy may be canceled by the **First Named Insured** by surrendering it to **us** or any of **our** authorized representatives or by mailing to **us** written notice stating when thereafter the cancellation shall be effective.

We may cancel this Policy by mailing or delivering a written notice of cancellation to the **First Named Insured** at the address shown in this Policy stating when, not less than 30 days thereafter, cancellation will be effective. However, if **we** cancel this Policy because the **First Named Insured** has failed to pay a premium when due, this Policy may be canceled by us by mailing or delivering a written notice of cancellation to the **First Named Insured** at the address shown in this Policy stating when, not less than 10 days thereafter, such cancellation will be effective. The mailing of notice as aforesaid shall be sufficient proof of notice.

The time of the surrender or the effective date and hour of cancellation stated in the notice shall become the end of the **policy period**. Delivery of such written notice either by the **First Named Insured** or by **us** shall be the equivalent to mailing. If the **First Named Insured** cancels, the unearned premium shall be computed in accordance with the customary short rate table and procedure. If **we** cancel, unearned premium shall be computed pro rata. Premium adjustment may be made either at the time cancellation is effected or as soon as

practicable after cancellation becomes effective, but payment or tender of unearned premium is not a condition of cancellation.

By signing below, the President and the Secretary of the Insurer agree on behalf of the Insurer to all the terms of this Policy.

Elizabech M. Tuck

Secretary

President

Efell

This Policy shall not be valid unless signed at the time of issuance by an authorized representative of the Insurer, either below or on the Declarations page of the policy.

Authorized Representative

_ - - - Deleted: ¶ ¶

LEXINGTON INSURANCE COMPANY WILMINGTON, DELAWARE ADMINISTRATIVE OFFICES: 100 SUMMER STREET, BOSTON, MA 02110-2103 (A Capital Stock Insurance Company)

HEALTHCARE PROFESSIONAL LIABILITY CLAIMS MADE COVERAGE PART

THIS COVERAGE PART PROVIDES CLAIMS MADE COVERAGE ONLY. COVERAGE IS LIMITED TO LIABILITY FOR CLAIMS FIRST MADE AGAINST AN INSURED DURING THE POLICY PERIOD OR AN EXTENDED REPORTING PERIOD, IF APPLICABLE. PLEASE REVIEW THE POLICY CAREFULLY AND DISCUSS THE POLICY WITH YOUR INSURANCE REPRESENTATIVE.

I. INSURING AGREEMENT

Healthcare Professional Liability

We will pay those sums that you become legally obligated to pay others as damages resulting from a **medical incident** arising out of **professional services** provided by any **Insured**. The amount we will pay for damages is limited as described in Section IV., Limits of Insurance. The **medical incident** must take place on or after the retroactive date and before the end of the **policy period**. A **claim** for a **medical incident** must be first made against an **Insured** during the **policy period** or the extended reporting period, if applicable. A **claim** for a **medical incident** must be made within the coverage territory.

No other obligation to pay sums or perform acts or services is covered unless explicitly provided for under Section II. DEFENSE AND OTHER PAYMENTS UNDER THIS POLICY - ALL COVERAGE PARTS of the GENERAL POLICY PROVISIONS AND CONDITIONS.

II. WHO IS AN INSURED

The following are Insureds under this Coverage Part:

- A. You.
- B. An individual and the individual's spouse are **Insureds**, but only with respect to the conduct of **your** business named in the Declarations of which such individual is the sole owner.
- C. A partnership or joint venture is an **Insured**, but only if the partnership or joint venture is specifically listed as a **Named Insured**. The partnership's partners or joint venture's members and their spouses are also **Insureds**, but only with respect to the conduct of **your** business.
- D. A limited liability company is an **Insured**, but only if the limited liability company is specifically listed as a **Named Insured**. The limited liability company's members are also **Insureds**, but only with respect to the conduct of **your** business. **Your** managers are **Insureds** but only with respect to their duties as **your** managers.
- E. If **you** are designated in the Declarations as other than partnership, joint venture or limited liability company, the organization so designated and any **executive officer**, director or stockholder thereof while acting within the scope of his duties for **you**.

- F. Your employees, other than your executive officers (if you are an organization other than a partnership, joint venture or limited liability company) or your managers (if you are a limited liability company), are **Insureds**, but only for acts within the scope of their employment by you or while performing duties related to the conduct of your business.
- G. Any student enrolled in a training program in connection with **your** professional services, but only when acting within the scope of his or her duties and at **your** direction.
- H. Any of **your** authorized volunteer workers, other than a healthcare provider, but only while acting within the scope of their duties as such and at **your** direction.
- I. Your legal representative if you die, but only with respect to his or her duties as a legal representative.
- J. **Your** superintendents, administrators, directors, department heads and heads of the medical staff, but only in their capacity as such.
- K. Members of **your** boards and committees, but only for conduct arising out of their duties as board or committee members and those who execute orders from **your** boards or committees, but only while in the course and scope of executing those orders.
- L. Your trustees and governors, but only for the conduct of your business within the course and scope of their employment or their duties as trustees or governors.

III. EXCLUSIONS

This insurance does not apply to any **medical incident**, **claim** or **suit** arising out of:

A. Prior Acts

Acts, errors or omissions of which an **Insured** had knowledge prior to the inception date of the **policy period**, if, as of such date, an **Insured** could reasonably foresee a **claim** might result.

B. Contractual Liability

Any liability you assume under any contract or agreement except an insured contract.

This exclusion does not apply to:

- 1. Liability that **you** would have in the absence of a contract or agreement;
- 2. Liability **you** assume in a written contract with:
 - a. A Health Maintenance Organization;
 - b. A Preferred Provider Organization;
 - c. An Independent Practice Association; or
 - d. Any other similar organization;

but only for such liability as is attributable to an **Insured's** alleged negligence arising out of **professional services**; or

- 3. A warranty of fitness or quality of any therapeutic agents or supplies an **Insured** has furnished or supplied in connection with treatment that has been performed.
- C. Unfair Trade Practices

Any allegations of price fixing, unfair competition or trade practices; a dispute over fees, income or revenue; the inducement to enter into, the interference with or the dissolution or termination of any business or economic relationship; or violations of any federal, state or local law (including but not limited to Title 15 of the United States Code or any similar state statute) that prohibits the unlawful restraint of trade, business or profession.

This exclusion shall not apply to allegations of restraint of trade, business or profession arising out of the activities of the **Insured's** professional boards or committees as described in Section II., Who Is An Insured, K. provided that settlement thereof or final judgment rendered therein does not affirm a violation of law; regardless of such final settlement or adjudication, **we** will provide a defense as to such allegations.

D. U.S. Department of Health & Human Services (HHS)

Any administrative or judicial hearings pertaining to Medicare/Medicaid fraud or any other hearing initiated against an Insured by HHS or by any utilization or quality review organization under contract with HHS.

This exclusion does not apply to HHS proceedings that allege the violation of the Emergency Medical Treatment and Labor Act.

E. Workers Compensation and Similar Laws

Any obligation an **Insured** has under a workers compensation, disability benefits, or unemployment compensation law or any similar law.

- F. Employer's Liability
 - 1. Bodily Injury to an employee of yours arising out of and in the course of:
 - a. Employment by you; or
 - b. While performing duties related to the conduct of your business; or
 - 2. **Claims** or **suits** by a spouse, child, parent, grandparent, brother, or sister of that **employee** as a consequence of sub-paragraph a. above.

This exclusion applies:

- 1. Whether you may be liable as an employer or in any other capacity; and
- 2. To any obligation to share damages with or repay someone else who must pay damages because of the injury.

G. Employment Practices

Refusal to employ, termination of employment, coercion, demotion, evaluation, reassignment, discipline, defamation, harassment, humiliation, or other practices or policies related to employment or professional privileges.

This exclusion does not apply to services by any person as a member of **your** formal accreditation, standards review or similar professional board or committee otherwise covered by this Policy.

H. ERISA

Employee Retirement Income Security Act (ERISA) of 1974 or amendments thereto, or any similar state law.

I. Damage to Property

Any damage to real or personal property and consequential loss resulting therefrom.

J. War

War, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution.

K. Dishonest Practices

Dishonest, fraudulent, criminal or malicious acts, errors, or omissions; however, **we** will defend civil **claims** alleging such acts, errors or omissions until final adjudication.

- L. Pollution
 - 1. The actual, alleged, or threatened, discharge, dispersal, seepage, migration, release, or escape of **pollutants**;
 - Any direction, request, demand, order or statutory or regulatory requirement to test for, monitor, investigate, cleanup, remove, contain, treat, detoxify, or neutralize pollutants or in any way respond to or assess the effects of pollutants; or
 - 3. Any cost, charge, expense or request for reimbursement arising out of 1. or 2. above.

This exclusion shall not apply to damages arising out of heat, smoke or fumes from a **hostile fire**. As used in this exclusion, **hostile fire** means a fire which becomes uncontrollable or breaks out from where it was intended to be.

M. Nuclear Hazards

Nuclear fission, nuclear fusion or radioactive contamination.

This exclusion does not apply to **bodily injury** to a **patient** arising out of the practice of Nuclear Medicine.

N. Asbestos

The manufacture, mining, use, sale, installation, removal, abatement, clean-up, distribution or exposure to asbestos, asbestos containing waste materials, asbestos waste, asbestos fibers, asbestos products and asbestos dust.

O. Sexual Misconduct

Any sexual act, including without limitation sexual intimacy (even if consensual), sexual contact, sexual advances, requests for sexual favors, sexual molestation, sexual assault, sexual abuse, sexual harassment, sexual exploitation or other verbal or physical conduct of a sexual nature. However, this exclusion does not apply to:

- Any Specific Individual Insured who allegedly committed such sexual misconduct, unless it is judicially determined that the Specific Individual Insured committed the sexual misconduct. If it is judicially determined that the Specific Individual Insured committed the sexual misconduct we will not pay any damages.
- 2. Any other **Insured**, unless that **Insured**:
 - a. knew or should have known about the sexual misconduct allegedly committed by the Specific Individual **Insured**, but failed to prevent or stop it; or
 - b. knew or should have known that the Specific Individual **Insured** who allegedly committed the sexual misconduct had a prior history of such sexual misconduct.

We will defend **claims** alleging such acts until final adjudication.

As used in this exclusion, Specific Individual **Insured** includes employees and authorized volunteer workers while performing duties related to the conduct of **your** business.

P. Discrimination/Humiliation

Discrimination based on, but not limited to race, color, creed, sex, religion, age, national origin, physical impairment, sexual preference, nor any **claims** involving humiliation or mental anguish, arising out of such discrimination whether or not for alleged violation of any federal, state or local government law or regulation prohibiting such discrimination.

Q. Expected Or Intended Injury

Damages or harm expected or intended from an **Insured's** standpoint.

R. Other Coverage Parts

Any **claims** or **suits** brought under any Coverage Part of this Policy other than this Healthcare Professional Liability Claims Made Coverage Part.

S. Physicians

Any **claim** against any physician, including any resident, intern, extern, or fellow. This exclusion, however, shall not apply to any physician, including any resident, intern, extern, or fellow, employed by **you** with respect to the following:

- 1. Charitable activities approved by the Named Insured;
- 2. Participation in employer sponsored continuing medical education courses; or
- 3. While acting within the scope of their administrative duties for you.
- T. Insured vs. Insured

Any claims made by one Insured against another Insured.

This exclusion does not apply to services by any person as a member of **your** formal accreditation, standards review or similar professional board or committee otherwise covered by this Policy.

U. Penalties

Any fines, penalties, punitive, exemplary, multiplied damages or the multiple portion of multiple damages.

IV. LIMITS OF INSURANCE

- A. The Limits of Insurance shown in Item 5(a) of the Declarations for Healthcare Professional Liability and the provisions below fix the most we will pay regardless of the number of:
 - 1. Insureds;
 - 2. Claims made or suits brought; or
 - 3. Persons or organizations making claims or bringing suits.
- B. The Aggregate Limit is the most **we** will pay for damages under Section I. INSURING AGREE-MENT - Healthcare Professional Liability
- C. Subject to paragraph A. above, the each **medical incident** limit stated in the Declarations, is the most **we** will pay under this Coverage Part for damages arising out of a single **medical incident**.
- D. All claims arising from one medical incident or a series of related medical incidents to any one patient shall be treated and shall be deemed to have occurred at the time of the first medical incident regardless of the number of claimants, or the number of Insureds against whom such claims are made.
- E. If the **policy period** is extended for an additional period of less than 12 months, the additional period will be deemed part of the policy period for purposes of determining the Limits of Insurance.

V. DEDUCTIBLE

A. The First Named Insured shall be responsible for the deductible amount shown in the Declarations. Expenses we incur in investigating and defending claims and suits are included in the deductible. The deductible applies to each medical incident and the First Named Insured shall not insure against it without our written consent. All claims arising from a single medical incident or from continuous, related, or repeated medical incidents shall be subject to one deductible.

- B. The deductible aggregate show in Item 5(a) of the Declarations is the maximum amount of deductibles for which the **Named Insured** will be responsible for all **medical incidents** occurring during the **policy period**.
- C. We may pay all or part of the deductible to settle a claim or suit. The First Named Insured agrees to repay us promptly after we notify the First Named Insured of the settlement.

VI. ADDITIONAL CONDITIONS APPLICABLE TO THIS COVERAGE PART

In addition to the GENERAL POLICY PROVISIONS AND CONDITIONS - Section III. CONDITIONS APPLICABLE TO ALL COVERAGE PARTS, the following Conditions apply to this Coverage Part:

- A. Automatic Extended Reporting Period
 - 1. If this Coverage Part is canceled or not renewed for any reason other than non-payment of premium, and if the Optional Extended Reporting Period Endorsement is not purchased, then we will provide an automatic extended reporting period of sixty (60) days, starting with the end of the **policy period**, during which **claims** arising out of **medical incidents** which take place on or after the retroactive date stated on the Declarations Page but before the end of the **policy period** may be first made.
 - 2. The automatic extended reporting period does not extend the **policy period** or change the scope of coverage provided. Any **claim** first made during the automatic extended reporting period shall be deemed to have been made on the last day of the **policy period**.
 - 3. The automatic extended reporting period, however, will not apply to **claims** if other insurance purchased by **Insureds** covers them or would have covered them had its limits of insurance of this policy not been exhausted.
 - 4. The Aggregate Limits of Insurance applicable to this Coverage Part shall not be increased or reinstated for the automatic extended reporting period.
- B. Optional Extended Reporting Period
 - If the First Named Insured or we cancel or do not renew this insurance, the First Named Insured shall have the option to purchase an Optional Extended Reporting Period Endorsement, beginning with the end of the policy period. The additional premium for and the term of the Optional Extended Reporting Period Endorsement shall be as stated in Item 3.c. of the Declarations. The First Named Insured can not purchase this Endorsement if we cancel for non-payment of premium.
 - 2. The Optional Extended Reporting Period Endorsement applies only to claims first made against the Insured during the Optional Extended Reporting Period and arising from medical incidents which take place on or after the retroactive date stated in the Declarations Page and before the end of the policy period. The Aggregate Limits of Insurance applicable to this Coverage Part shall not be increased or reinstated for claims under the Endorsement. Claims first made during the Optional Extended Reporting Period Endorsement shall be deemed to have been made on the last day of the policy period.
 - 3. To obtain an Optional Extended Reporting Period Endorsement the **First Named Insured** must request it in writing within sixty (60) days after the **policy period** ends and pay the premium due. If the **First Named Insured** does so, the premium shall be fully earned and the

Extended Reporting Period Endorsement cannot be canceled. If we do not receive the written request and payment within sixty (60) days after the **policy period** ends, the **First Named Insured** may not exercise this option at a later date.

- 4. The insurance provided under the Extended Reporting Period Endorsement is excess over any other valid and collectible insurance that begins or continues in effect after the Extended Reporting Period Endorsement becomes effective, whether the other insurance applies on a primary, excess, contingent, or any other basis.
- 5. Our offer of terms, conditions or premium different from the expiring Policy or Coverage Part shall not be considered a refusal or failure to renew this insurance.
- C. Duties In the Event Of A Claim, Suit, or Medical Incident
 - If during the policy period, the First Named Insured shall become aware of any medical incident which may reasonably be expected to give rise to a claim being made against any Insured, the First Named Insured must notify us in writing as soon as practicable. To the extent possible, notice should include:
 - a. How, when, and where the **medical incident** took place;
 - b. The names and addresses of any injured persons and witnesses; and
 - c. The nature and location of any injury or damage arising out of the medical incident.

Any claim arising out of such medical incident which is subsequently made against any **Insured** and reported to **us**, shall be considered first made at the time such notice was given to **us**.

Receipt by **us** of an incident report, including but not limited to variance reports, will not be considered a **claim** to **us**.

Any observance or reporting to the **First Named Insured** by **us** of any physical condition or other circumstance as a result of inspections, audits, engineering, loss control or risk management services shall not be considered a **claim** to **us**.

- 2. If a claim or suit is brought against an Insured arising out of a medical incident, the First Named Insured must:
 - a. Immediately record the specifics of the claim or suit and the date received;
 - b. Provide us with written notice of the claim or suit as soon as practicable; and
 - c. Immediately send **us** copies of any demands, notices, summonses, or legal papers received in connection with the **claim** or **suit**.

HEALTHCARE GENERAL LIABILITY CLAIMS MADE COVERAGE PART

THIS COVERAGE PART PROVIDES CLAIMS MADE COVERAGE ONLY. COVERAGE IS LIMITED TO LIABILITY FOR CLAIMS FIRST MADE AGAINST AN INSURED DURING THE POLICY PERIOD OR AN EXTENDED REPORTING PERIOD, IF APPLICABLE. PLEASE REVIEW THE POLICY CAREFULLY AND DISCUSS THE POLICY WITH YOUR INSURANCE REPRESENTATIVE.

I. INSURING AGREEMENTS

A. Bodily Injury and Property Damage

We will pay those sums that an **Insured** becomes legally obligated to pay as damages because of **bodily injury** or **property damage** to which this Coverage Part applies. The amount **we** will pay for damages is limited as described in Section IV., Limits Of Insurance.

This Coverage Part applies to bodily injury and property damage only if:

- 1. The **bodily injury** or **property damage** is caused by an **occurrence** that takes place in the coverage territory; and
- 2. The **bodily injury** or **property damage** occurs after the retroactive date but before the end of the **policy period**; and
- 3. A **claim** for damages because of the **bodily injury** or **property damage** is first made against the insured during the **policy period** or the extended reporting period, if applicable.

B. Personal and Advertising Injury

We will pay those sums that an **Insured** becomes legally obligated to pay as damages because of **personal and advertising injury** to which this Coverage Part applies. The amount **we** will pay for damages is limited as described in Section IV., Limits Of Insurance.

This Coverage Part applies to personal and advertising injury only if:

- 1. **Personal injury** is caused by an offense arising out of **your** business, excluding advertising, publishing, broadcasting or telecasting done by **you** or on **your** behalf;
- 2. Advertising injury is caused by an offense committed in the course of advertising your goods, products or services;

but only if the offense was committed in the coverage territory after the retroactive date but before the end of the **policy period**; and

3. A **claim** for damages because of the **personal** and **advertising injury** is first made against an insured during the **policy period** or the extended reporting period, if applicable.

C. Medical Expenses

We will pay medical expenses as described below for bodily injury caused by an occurrence:

- 1. On premises you own or rent;
- 2. On ways next to premises you own or rent; or

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3. Because of your operations;

Provided that:

- 1. The **occurrence** takes place in the coverage territory and after the retroactive date but before the end of the **policy period**;
- 2. The expenses are incurred and reported to **us** within one year of the date of the **occurrence**; and
- 3. The injured person submits to examination, at **our** expense, by physicians of **our** choice as often as **we** reasonably require.

We will make these payments regardless of fault. The amount **we** will pay for damages is limited as described in Section IV., Limits Of Insurance. **We** will pay reasonable expenses for:

- 1. First aid administered at the time of an occurrence;
- 2. Necessary medical, surgical, x-ray and dental services, including prosthetic devices; and
- 3. Necessary ambulance, hospital, professional nursing and funeral services.

II. WHO IS AN INSURED

The following are Insureds under this Coverage Part:

- A. You.
- B. An individual and the individual's spouse are **Insureds**, but only with respect to the conduct of **your** business named in the Declarations of which such individual is the sole owner.
- C. A partnership or joint venture is an **Insured**, but only if the partnership or joint venture is specifically listed as a **Named Insured**. The partnership's partners or joint venture's members and their spouses are also **Insureds**, but only with respect to the conduct of **your** business.

No person or organization is an **Insured** with respect to the conduct of any current or past partnership or joint venture that is not shown as a **Named Insured** in the Declarations

- D. A limited liability company is an **Insured**, but only if the limited liability company is specifically listed as a **Named Insured**. The limited liability company's members are also **Insureds**, but only with respect to the conduct of **your** business. **Your** managers are **Insureds** but only with respect to their duties as **your** managers.
- E. If **you** are designated in the Declarations as other than partnership, joint venture or limited liability company, the organization so designated and any **executive officer**, director or stockholder thereof while acting within the scope of his duties for **you**.
- F. Your employees, other than your executive officers (if you are an organization other than a partnership, joint venture or limited liability company) or your managers (if you are a limited liability company), are **Insureds**, but only for acts within the scope of their employment by you or while performing duties related to the conduct of your business.

No employee, however, is an Insured for:

1. Bodily injury, personal and advertising injury:

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- a. To you, to your partners or members (if you are a partnership or joint venture), to your members (if you are a limited liability company), or to a co-employee while in the course of his or her employment or while performing duties related to the conduct of your business;
- b. To the spouse, child, parent, grandparent, brother, or sister of that co-employee as a consequence of paragraph 1.a. above;
- c. For which there is an obligation to share damages with or repay another who must pay damages due to an injury described in 1.a. or 1.b. above; or
- d. Arising out of his or her providing or failing to provide professional healthcare services.
- 2. Property Damage to property:
 - a. Owned, occupied, or used by, or
 - b. Rented to, in the care of, custody or control of, or over which physical control is being exercised for any purpose by,

you, any of **your** employees, any partner or member (if **you** are a partnership or a joint venture), or any member (if **you** are a limited liability company).

- G. Any student enrolled in a training program in connection with **your** professional services, but only when acting within the scope of his or her duties and at **your** direction.
- H. Any of **your** authorized volunteer workers, other than a healthcare provider, but only while acting within the scope of their duties as such and at **your** direction.
- I. Your legal representative if you die, but only with respect to his or her duties as a legal representative.
- J. **Your** superintendents, administrators, directors, department heads and heads of the medical staff, but only in their capacity as such.
- K. Members of **your** boards and committees, but only for conduct arising out of their duties as board or committee members and those who execute orders from **your** boards or committees, but only while in the course and scope of executing those orders.
- L. Your trustees and governors, but only for the conduct of your business within the course and scope of their employment or their duties as trustees or governors.
- M. Any person (other than **your** employee) or any organization while acting as **your** real-estate manager.
- N. Any person or organization having proper temporary custody of your property if you die, but only:
 - 1. With respect to liability arising out of the maintenance or use of that property; and
 - 2. Until your legal representative has been appointed.
- O. With respect to **mobile equipment** registered in **your** name under any motor vehicle registration law, any person is an **Insured** while driving such equipment along a public highway with **your** permission. Any other person or organization responsible for the conduct of such person is also an **Insured**, but only with respect to liability arising out of the operation of the equipment, and

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only if no other insurance of any kind is available to that person or organization for this liability. No person or organization, however, is an **Insured** with respect to:

- 1. Bodily injury to a co-employee of the person driving the equipment; or
- 2. **Property damage** to property owned by, rented to, occupied by **you**, in **your** charge, or by the employer of any person who is an **Insured** under this provision.

III. EXCLUSIONS

This insurance does not apply to any occurrence, claim or suit arising out of:

A. Workers Compensation and Similar Laws

Any obligation an **Insured** has under a workers compensation, disability benefits, or unemployment compensation law or any similar law.

- B. Employer's Liability
 - 1. Bodily Injury to an employee of yours arising out of and in the course of:
 - a. Employment by you; or
 - b. Performing duties related to the conduct of your business; or
 - c. Any Occupational Disease; or
 - 2. Any **claims** or **suits** brought by a spouse, child, grandparent, parent, brother, or sister of that **employee** as a consequence of paragraph 1. above.

This exclusion applies:

- 1. Whether you may be liable as an employer or in any other capacity; and
- 2. To any obligation to share damages with or repay someone else who must pay damages because of the injury.

This exclusion does not apply to liability assumed by you under an insured contract.

C. Damage to Property

Property damage to:

- 1. Property **you** own, rent, or occupy;
- 2. Premises **you** sell, give away or abandon, if the **property damage** arises out of any part of those premises;
- 3. Property loaned to you;
- 4. Personal property in your care, custody, or control;

- 5. That particular part of the real property on which **you** or any contractors or subcontractors working directly or indirectly on **your** behalf are performing operations, if the **property damage** arises out of those operations; or
- 6. That particular part of any property that must be restored, repaired or replaced because **your work** was incorrectly performed on it.

With respect to any property damage coverage of this policy:

Paragraph 2. of this exclusion does not apply if the premises are **your work** and were never occupied, rented or held for rental by **you**.

Paragraphs 3., 4., 5., and 6. of this exclusion do not apply to liability assumed under a sidetrack agreement.

Paragraph 6. of this exclusion does not apply to property damage included in the productscompleted operations hazard.

D. War

War, whether or not declared, or any act or condition incident to war. War includes civil war, insurrection, rebellion or revolution.

- E. Pollution
 - 1. The actual, alleged, or threatened, discharge, dispersal, seepage, migration, release, or escape of **pollutants**;
 - Any direction, request, demand, order or statutory or regulatory requirement to test for, monitor, investigate, cleanup, remove, contain, treat, detoxify, or neutralize **pollutants** or in any way respond to or assess the effects of **pollutants**; or
 - 3. Any cost, charge, expense or request for reimbursement arising out of 1. or 2. above.

This exclusion shall not apply to damages arising out of heat, smoke or fumes from a **hostile fire**. As used in this exclusion, **hostile fire** means a fire which becomes uncontrollable or breaks out from where it was intended to be.

F. Employment Practices

Any refusal to employ, termination of employment, coercion, demotion, evaluation, reassignment, discipline, defamation, harassment, humiliation, or other practices or policies related to employment or professional privileges.

G. Dishonest Practices

Dishonest, fraudulent, criminal or malicious acts, errors, or omissions; however, **we** will defend civil **claims** alleging such acts, errors or omissions until final adjudication.

H. Nuclear Hazards

Nuclear fission, nuclear fusion or radioactive contamination.

I. Asbestos

The manufacture, mining, use, sale, installation, removal, abatement, clean-up, distribution or exposure to asbestos, asbestos containing waste materials, asbestos waste, asbestos fibers, asbestos products and asbestos dust.

J. Sexual Misconduct

Any sexual act, including without limitation, sexual intimacy (even if consensual), sexual contact, sexual advances, requests for sexual favors, sexual molestation, sexual assault, sexual abuse, sexual harassment, sexual exploitation, or other verbal or physical conduct of a sexual nature. However, this exclusion does not apply to:

- Any Specific Individual Insured who allegedly committed such sexual misconduct, unless it is judicially determined that the Specific Individual Insured committed the sexual misconduct. If it is judicially determined that the Specific Individual Insured committed the sexual misconduct we will not pay any damages.
- 2. Any other Insured, unless that Insured:
 - a. knew or should have known about the sexual misconduct allegedly committed by the Specific Individual **Insured**, but failed to prevent or stop it; or
 - b. knew or should have known that the Specific Individual **Insured** who allegedly committed the sexual misconduct had a prior history of such sexual misconduct.

We will defend **claims** alleging such acts until final adjudication.

As used in this exclusion, Specific Individual **Insured** includes employees and authorized volunteer workers while performing duties related to the conduct of **your** business.

K. ERISA

The Employee Retirement Income Security Act (ERISA) of 1974 or amendments thereto, or any similar state law.

L. Discrimination/Humiliation

Discrimination based on, but not limited to race, color, creed, sex, religion, age, national origin, physical impairment, sexual preference, nor any **claims** involving humiliation or mental anguish, arising out of discrimination whether or not for alleged violation of any federal, state or local government law or regulation prohibiting such discrimination.

M. Insured vs. Insured

Any claims made by one Insured against another Insured.

N. Other Coverage Parts

Any **claims** or **suits** brought under any Coverage Part of this policy other than this Healthcare General Liability Claims Made Coverage Part.

O. Patients

Any **bodily injury** sustained by a patient of any **Insured** and any **claims** or **suits** by spouse, child, parent, grandparent, brother or sister of such patient arising out of such **bodily injury**.

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P. Unfair Trade Practices

Any allegations of price fixing, unfair competition or trade practices; a dispute over fees, income or revenue; the inducement to enter into, the interference with or the dissolution or termination of any business or economic relationship; or violations of any federal, state or local law (including but not limited to Title 15 of the United States Code or any similar state statute) that prohibits the unlawful restrain of trade, business or profession.

Q. U.S. Department of Health & Human Services (HHS)

Any administrative or judicial hearings pertaining to Medicare/Medicaid fraud or any other hearing initiated against an Insured by HHS or by any utilization or quality review organization under contract with HHS.

This exclusion does not apply to HHS proceedings that allege the violation of the Emergency Medical Treatment and Labor Act.

R. Expected Or Intended Injury

Damages or harm expected or intended from an **Insured**'s standpoint. This exclusion does not apply to **bodily injury** resulting from the use of reasonable force to protect persons or property.

S. Contractual Liability

Liability arising from **bodily injury** or **property damage** for which **you** are obligated to pay damages by reason of the assumption of liability in a contract or agreement except an **insured contract**. This exclusion does not apply to liability for damages:

- 1. That you would have in the absence of the contract or agreement; or
- 2. Assumed in a contract or agreement that is an insured contract, provided the bodily injury or property damage occurs subsequent to the execution of the contract or agreement. Solely for the purposes of liability assumed in an insured contract, reasonable attorney fees and necessary litigation expenses incurred by or for a party other than an Insured are deemed to be damages because of bodily injury or property damage, provided:
 - a. Liability to such party for, or for the cost of, that party's defense has also been assumed in the same **insured contract**; and
 - b. Such attorney fees and litigation expenses are for defense of that party against a civil or alternative dispute resolution proceeding in which damages to which this insurance applies are alleged.
- T. Damage to Your Product

Property damage to your product arising out of it or any part of it.

U. Damage to Your Work

Property damage to your work arising out of it or any part of it and included in the products-completed operations hazard.

This exclusion does not apply if the damaged work or the work out of which the damage arises was performed on **your** behalf by a subcontractor.

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V. Damage to Impaired Property or Property Not Physically Injured

Property damage to impaired property or property that has not been physically injured, arising out of:

- 1. A defect, deficiency, inadequacy or dangerous condition in your product or your work; or
- 2. A delay or failure by **you** or anyone acting on **your** behalf to perform a contract or agreement in accordance with its terms.

This exclusion does not apply to the loss of use of other property arising out of sudden and accidental physical injury to **your product** or **your work** after it has been put to its intended use.

W. Recall of Products, Work or Impaired Property

Damages claimed for any loss, cost or expense incurred by **you** or others for the loss of use, withdrawal, recall, inspection, repair, replacement, adjustment, removal or disposal of:

- 1. Your product,
- 2. Your work, or
- 3. Impaired property,

if such product, work, or property is withdrawn or recalled from the market or from use by any person or organization because of a known or suspected defect, deficiency, inadequacy, or dangerous condition in it.

X. Liquor Liability

Bodily injury or property damage for which an Insured may be held liable by reason of:

- 1. Causing or contributing to the intoxication of any person;
- 2. The furnishing of alcoholic beverages to a person under the legal drinking age or under the influence of alcohol; or
- 3. Any statute, ordinance, or regulation relating to the sale, gift, distribution or use of alcoholic beverages.

This exclusion applies only if **you** are in the business of manufacturing, distributing, selling, serving or furnishing alcoholic beverages.

Y. Aircraft, Auto, or Watercraft

Ownership, maintenance, use or entrustment to others of any aircraft, **auto**, or watercraft owned or operated by or rented or loaned to **you**. Use includes operation and **loading** or **unloading**.

This exclusion shall not apply to:

- 1. A watercraft while ashore on premises you own or rent;
- 2. A watercraft you do not own that is:
 - a. Less than 26 feet long; and
 - b. Not being used to carry persons or property for a charge;

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- 3. Parking an **auto** on, or on the ways next to premises **you** own or rent, provided the **auto** is not owned by or rented or loaned to **you**;
- 4. Liability assumed under any **insured contract** for the ownership, maintenance or use of aircraft or watercraft;
- 5. The operation of any of the equipment listed in paragraph 6.b. or 6.c. of the definition of **mobile equipment**; or
- 6. Loading or unloading of patients.
- Z. Mobile Equipment
 - 1. The transportation of **mobile equipment** by an **auto** owned or operated by or rented or loaned to any Insured; or
 - 2. The use of **mobile equipment** in, or while in practice for, or while being prepared for, any prearranged racing, speed, demolition, or stunting activity.

Exclusions A. through E. and T. through Z. do not apply to damage by fire to premises while rented to **you** or temporarily occupied by **you** with permission of the owner. A separate Limit of Insurance applies to this coverage as described in Limits of Insurance (Section IV.).

AA. Personal Injury or Advertising Injury:

- 1. Caused by or at the direction of the **Insured** with the knowledge that the act would violate the rights of another and would inflict **personal and advertising injury**;
- 2. Arising out of oral or written publication of material, if done by or at the direction of the **Insured** with knowledge of its falsity;
- 3. Arising out of oral or written publication of material whose first publication took place before the beginning of the **policy period**;
- 4. Arising out of the violation of a penal statute or ordinance committed by or at the direction or with the consent of any **Insured**;
- For which the **Insured** has assumed liability in a contract or agreement. This exclusion does not apply to liability for damages that the **Insured** would have in the absence of the contract or agreement;
- 6. Arising out of a breach of contract, other than misappropriation of advertising ideas under an implied contract;
- 7. Arising out of the failure of goods, products or services to conform with any statement of quality or performance made in **your advertisement**;
- 8. Arising out of the wrong description of the price of goods, products or services stated in **your advertisement**; or
- 9. Arising out of an offense committed by an **Insured** whose business is advertising, broadcasting, publishing or telecasting.

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- BB. With respect to Insuring Agreement C. Medical Expenses of this Coverage Part, **we** will not pay Medical Expenses for **bodily injury**:
 - 1. To any Insured;
 - 2. To a person hired to do work for or on behalf of you or a tenant of yours;
 - 3. To a person injured on that part of premises owned or rented by **you** that the person normally occupies;
 - To a person, whether or not an employee of any **Insured**, if benefits for the **bodily injury** are payable or must be provided under a workers' compensation or disability benefits law or a similar law;
 - 5. To a person injured while taking part in athletics;
 - 6. Included within the products-completed operations hazard;
 - 7. Excluded under Insuring Agreement A of this Coverage Part; or
 - 8. To any patient.
- CC. Penalties

Any fines, penalties, punitive, exemplary, multiplied damages or the multiple portion of multiple damages.

DD. Prior Acts

Acts, errors or omissions of which an **Insured** had knowledge prior to the inception date of the **policy period**, if, as of such date, an **Insured** could reasonably foresee that a **claim** might result.

	IV.	LIMITS OF INSURANCE
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- A. The Limits of Insurance shown in Item 5 (b) of the Declarations for Healthcare General Liability and the provisions below fix the most **we** will pay regardless of the number of:
 - 1. Insureds;
 - 2. Occurrences, claims submitted or suits brought; or
 - 3. Persons or organizations making claims or suits.
- B. The Aggregate Limit is the most we will pay for all damages covered under this policy.
- C. The **Products-Completed Operations** Limit is the most we will pay under Insuring Agreement A for damages because of **bodily injury** and **property damage** included in the **products-completed operations hazard**.
- D. Subject to B. above, the **Personal and Advertising Injury** Limit is the most **we** will pay under Insuring Agreement B, for the sum of all damages because of all **personal and advertising injury** sustained by any one person or organization.
- E. Subject to B. or C. above, whichever applies, the each **occurrence** limit is the most **we** will pay for the sum of:
 - 1. Damages under Insuring Agreement A; and

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2. Medical Expenses under Insuring Agreement C;

because of all **bodily injury** and **property damage** arising out of any one **occurrence**.

- F. Subject to E. above, the Fire Damage Limit is the most we will pay under Insuring Agreement A. for damages because of property damage to premises rented to you or temporarily occupied by you with permission of the owner, arising out of any one fire.
- G. Subject to E. above, the Medical Expense Limit is the most **we** will pay under Insuring Agreement C. for all medical expenses because of **bodily injury** sustained by any one person.
- H. The Limits of Insurance of this Coverage Part apply separately to each consecutive annual period. Any remaining period of less than 12 months, shall be included in the last preceding annual period, starting with the beginning of the **policy period** shown in the Declarations. If the **policy period** is extended after issuance for an additional period of less than 12 months, the additional period will be deemed part of the last preceding period for purposes of determining the Limits of Insurance.
- All claims arising from continuous, related, or repeated occurrences shall be treated as arising out of one occurrence. Only the policy in effect when the claim is first made shall apply to all such claims.

V. DEDUCTIBLE

- A. The First Named Insured shall be responsible for the deductible amount shown in Item 5 (b) of the Declarations. Expenses we incur in investigating and defending claims and suits are included in the deductible. The deductible applies to each occurrence and the First Named Insured shall not insure against it without our written consent. All claims arising from a single occurrence or from continuous, related, or repeated occurrences shall be subject to one deductible.
- B. The deductible aggregate shown in Item 5 (b) of the Declaration is the total amount of damages arising out of all deductibles for which the **Named Insured** shall be responsible for all **occurrences** during the **policy period**.
- C. We may pay all or part of the deductible to settle a claim or suit. The First Named Insured agrees to repay us promptly after we notify the First Named Insured of the settlement.

VI. ADDITIONAL CONDITIONS APPLICABLE TO THIS COVERAGE PART

In addition to the GENERAL POLICY PROVISIONS AND CONDITIONS - Section III. CONDITIONS APPLICABLE TO ALL COVERAGE PARTS, the following Conditions shall apply to Insuring Agreements A., B. and C. of this Coverage Part:

- A. Automatic Extended Reporting Period
 - 1. If this Coverage Part is canceled or not renewed for any reason other than non-payment of premium, and if the Optional Extended Reporting Period Endorsement is not purchased, then we will provide an automatic extended reporting period of sixty (60) days, starting with the end of the **policy period**, during which **claims** arising out of **medical incidents** which take place on or after the retroactive date stated on the Declarations Page but before the end of the **policy period** may be first made.
 - 2. The automatic extended reporting period does not extend the **policy period** or change the scope of coverage provided. Any **claim** first made during the automatic extended

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reporting period shall be deemed to have been made on the last day of the **policy** period.

- 3. The automatic extended reporting period, however, will not apply to **claims** if other insurance purchased by **Insureds** covers them or would have covered them had its limits of insurance of such policy not been exhausted.
- 4. The Aggregate Limits of Insurance applicable to this Coverage Part shall not be increased or reinstated for the automatic extended reporting period.
- 5. **Our** offer of terms, conditions or premium different from the expiring Policy or Coverage Part shall not be considered a refusal or failure to renew this insurance.
- B. Optional Extended Reporting Period
 - If the First Named Insured or we cancel or do not renew this insurance, the First Named Insured shall have the option to purchase an Optional Extended Reporting Period Endorsement, beginning with the end of the policy period. The additional premium for and the term of the Optional Extended Reporting Period Endorsement shall be as stated in Item 3.c. of the Declarations. The First Named Insured can not purchase this Endorsement if we cancel for non-payment of premium.
 - 2. The Optional Extended Reporting Period Endorsement applies only to claims first made against the Insured during the Optional Extended Reporting Period and arising from medical incidents which take place on or after the retroactive date stated in the Declarations Page and before the end of the policy period. The Aggregate Limits of Insurance applicable to this Coverage Part shall not be increased or reinstated for claims under the Endorsement. Claims first made during the Optional Extended Reporting Period Endorsement shall be deemed to have been made on the last day of the policy period.
 - 3. To obtain an Optional Extended Reporting Period Endorsement the First Named Insured must request it in writing within sixty (60) days after the policy period ends and pay the premium due. If the First Named Insured does so, the premium shall be fully earned and the Extended Reporting Period Endorsement cannot be canceled. If we do not receive the written request and payment within sixty (60) days after the policy period ends, the First Named Insured may not exercise this option at a later date.
 - 4. The insurance provided under the Extended Reporting Period Endorsement is excess over any other valid and collectible insurance that begins or continues in effect after the Extended Reporting Period Endorsement becomes effective, whether the other insurance applies on a primary, excess, contingent, or any other basis.
 - 5. **Our** offer of terms, conditions or premium different from the expiring Policy or Coverage Part shall not be considered a refusal or failure to renew this insurance.
- C. Duties In the Event Of An Occurrence, Offense, Claim or Suit.
 - If during the **policy period**, the **First Named Insured** becomes aware of any **occurrence** or offense which may reasonably be expected to give rise to a **claim** being made against any **Insured**, the **First Named Insured** must notify **us** in writing as soon as practicable. To the extent possible, notice should include:
 - a. How, when, and where the **occurrence** or offense took place;
 - b. The names and addresses of any injured persons and witnesses; and

c. The nature and location of any injury or damage arising out of the **occurrence** or offense.

Any **claim** arising out of such **occurrence** of offense which is subsequently made against any **Insured** and reported to **us**, shall be considered first made at the time such notice was given to **us**.

Receipt by **us** of an incident report, including but not limited to variance reports, will not be considered a **claim** to **us**.

Any observance or reporting to the **First Named Insured** by **us** of any physical condition or other circumstance as a result of inspections, audits, engineering, loss control or risk management services shall not be considered a **claim** to **us**.

- 2. If a claim or suit is brought against an **Insured** arising out of an **occurrence** or offense the **First Named Insured** must:
 - a. Immediately record the specifics of the claim or suit and the date received;
 - b. Provide us with written notice of the claim or suit as soon as practicable; and
 - c. Immediately send **us** copies of any demands, notices, summonses, or legal papers received in connection with the **claim** or **suit**.