1. Social Services Professional Liability Coverage - Alcohol and Drug Abuse Treatment Facilities (Addiction Treatment Centers)

a. Description of Coverage: Professional Liability

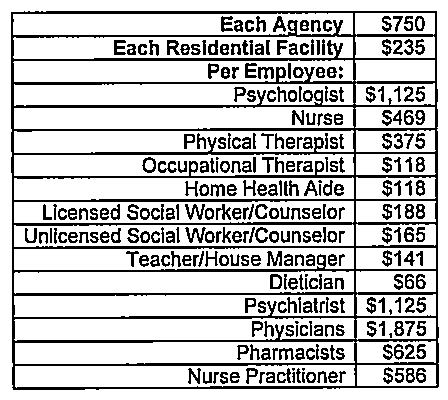
b. Form: 118395 (Occurrence)

c. Form: 118397 (Claims-Made)

d. Form: Mandatory

* 1. Optional Endorsement: 118436 (Designated Professionals)
  2. Optional Endorsement: 118437 (Exclusion of Specific Professional Incident)
  3. Premium Determination:

1. Basic Limits ($100,000/$200,000) annual occurrence rates:



The rates apply per full time employee. Part time employees are rated at

half the full time rate.

1. Increased Limits:

Premises/Operations (Subline Code 334) Table 1 – $100/200 Basic Limit

|  |  |
| --- | --- |
| Aggregate | Per Occurrence  $25 50 100 200 300 500 1,000 |
| $ 50  100  200  300  500  600  1,000  1,500  2,000  2,500  3,000 | 0.72 0.82  0.73 0.85 0.97  0.74 0.86 1.00 1.12  0.75 0.87 1.01 1.13 1.21  0.89 1.03 1.15 1.23 1.33  0.90 1.04 1.16 1.24 1.34  1.05 1.17 1.25 1.35 1.46  1.18 1.26 1.36 1.47  1.19 1.27 1.37 1.48  1.28 1.38 1.49  1.29 1.39 1.50 |

1. Claims made step factors:

The Claims Made factors utilized are the ISO premises non-construction classes, and these are to be applied to occurrence rates.

|  |  |
| --- | --- |
| **Year of Claims**  **Made Coverage** | **Factor** |
| 1 | .70 |
| 2 | .83 |
| 3 | .89 |
| 4 | .91 |
| 5 or More | .95 |

* 1. Optional Extended Reporting Period Endorsement (Form 118463):

One Year Extended Reporting Period 100% of the original annual premium

Three Year Extended Reporting Period 150% of the original annual premium

Unlimited Extended Reporting Period 200% of the original annual premium

2. Abuse or Molestation Coverage

a. Description of coverage: Sexual or Physical Abuse Liability

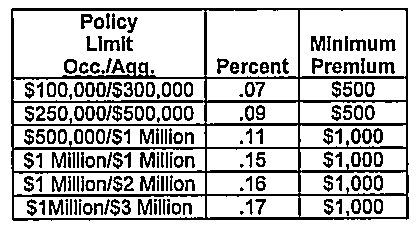
b. Endorsement: 118394 (Occurrence)

c. Endorsement: 118391 (Claims-Made)

d. Form: Mandatory

e. Premium determination:

1. Occurrence premium is calculated as a percentage of modified general liability occurrence premium:



1. Claims made step factors and extended reporting period factors:

ISO General Liability premises non-construction class claims made step factors and extended reporting factors are to be applied to occurrence rates.

3. Social Services General Liability Enhancement Endorsement

a. Description of coverage: General Liability Enhancement Endorsement

b. Endorsement: 118392

c. Form: Mandatory

d. Premium determination:$50.00 Annual Flat Charge

4. Social Services Property Enhancement Endorsement

a. Description of coverage: Commercial Property Enhancements

b. Endorsement: 118359

c. Form: Mandatory

d. Premium determination:$500.00 Annual Flat Charge

|  |  |
| --- | --- |
| **Form Title** | **Form #** |
| Social Services Professional Liability Coverage Form | 118395 |
| Professional Liability Coverage Form - Claims Made | 118397 |
| Optional Extended Reporting Period | 118463 |
| Social Service GL Enhancement Endorsement | 118392 |
| Sexual Or Physical Abuse Liability Endorsement | 118394 |
| CM Sexual or Physical Abuse Liability Endorsement | 118391 |
| Social Services Property Enhancement Endorsement | 118359 |
| Exclusion of Specific Professional Incident Occurrence or Offense | 118437 |
| Coverage for Designated Professionals Endorsement | 118436 |