



NOTICE OF EFFECTIVE FILING

TO: Kathleen Ott
DATE: March 10, 2022
FROM: Andrea Connell
PHONE: 718-250-1769

PROGRAM: Psychoanalysts Professional Liability Program

CONTENTS: Please refer to SharePoint for copies of the forms included in this filing.

STATE: Oregon

EFFECTIVE DATE: 3/09/22

MODIFICATIONS: None

COMMENTS: None

COMPANY(IES) EFFECTIVE:

☒ AMERICAN HOME ASSURANCE COMPANY

FILING NUMBER: AIG-22-EO-01

Disposition for AGNY-133163370

Filing at a Glance

State: Oregon	SERFF Tracking Number: AGNY-133163370
TOI: 11.1 Med Mal-Occurrence Only	State Tracking Number: AGNY-133163370
Sub-TOI: 11.1029 Other	Company Tracking Number: AIG-22-EO-01
Filing Type: Form	Product Name: Psychoanalysts Professional Liability Program (151-640-288)
Filing Company: American Home Assurance Company	Project Name: Application Revisions
	Destruction Date:

Disposition Date: 03/09/2022
Effective Date (New): 03/09/2022
Effective Date (Renewal): 03/09/2022
Status: * Approved

Comments:
Department of Consumer and Business Services
Division of Financial Regulation - Product Regulation - Rates and Forms

Invitation to Comment on Quality of Service from the Division of Financial Regulation

We strive to provide excellent customer service at all times and invite you to provide written comment regarding your filing experience.

Instructions for submitting a filing are on our website at <http://www.oregon.gov/DCBS/insurance/insurers/rates-forms/Pages/rates-forms.aspx> or contained within SERFF under the Filing Rules tab. Filings that contain errors may be returned without having been accepted for review. Filing errors that are considered include; form numbers that do not match, forms attached under the wrong tab, or missing required documents. If we allow the company to correct a filing error it must be corrected within 24 hours or the filing will be rejected for no response.

If we contact you about compliance-related issues or corrections that need to be made to your filing, we must receive your complete response within 10 calendar days.

Any disapproval for reasons other than filing errors must be supported by our product standards. If you believe we have failed to meet our performance objectives or you believe we have provided outstanding performance, please let us know. We value your comments and will use this information to improve our service.

You may request that your comments be kept confidential; however, be aware that confidential feedback limits our ability to follow up, as your concerns cannot be shared with staff. If you are not requesting confidentially, please include the SERFF or state tracking number with your comments.

Please explain if the Division met its objective. Was your experience positive?

Comments:

Thank you,
Tashia Sizemore
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Schedule Items

Item Type	Item Name	Item Status	Public Access
Form	76522 (2-22), [No date], Application/Binder/Enrollment, Psychoanalysts Professional Liability Insurance Application	Approved	Yes
Form	76522 (2-22), [No date], Application/Binder/Enrollment, Psychoanalysts Professional Liability Insurance Application	Replaced	Yes
Form	76523 (2-22), [No date], Application/Binder/Enrollment, Psychoanalysts Professional Liability Insurance Renewal Application	Approved	Yes

Form	76523 (2-22), [No date], Application/Binder/Enrollment, Psychoanalysts Professional Liability Insurance Renewal Application	Replaced	Yes
Form	76532 (2-22), [No date], Application/Binder/Enrollment, Psychoanalysts Professional Liability Policy School/Institute/Society Liability Coverage Application	Approved	Yes
Form	76532 (2-22), [No date], Application/Binder/Enrollment, Psychoanalysts Professional Liability Policy School/Institute/Society Liability Coverage Application	Replaced	Yes
Supporting Document	Cover Letter or Explanatory Memorandum	Reviewed-No Action	Yes
Supporting Document	Cover Letter or Explanatory Memorandum	Disapproved	Yes
Supporting Document	Third party filers letter of authorization	Not Applicable to filing	Yes
Supporting Document	3894 Certification of Compliance	Reviewed-No Action	Yes
Supporting Document	3610 Standards for Personal and Commercial Liability	Information only	Yes
Supporting Document	Highlighted/Redline form version if a replaced, amended or similar forms	Reviewed-No Action	Yes

Sincerely,
Michael Drummonds
Rates & Forms Analyst
Oregon Division of Financial Regulation
Michael.Drummonds@DCBS.Oregon.gov
503-931-6986



Filings	Messages	Billing	Settings	Filing Rules	Reports	Templates	Alerts (4)
My Workfolder	My Open Filings	My Draft Filings	Search/Export	Create Filing	Create Paper Filing		

Add AuthorsUpdateCreate ReminderMove to WorkfolderPDF Pipeline

Clone Filing

Oregon

View Associated FilingsView General InstructionsView Filing Log

This Filing has been marked as public access.

Product Name: Psychoanalysts Professional Liability Program (151-640-288)

TOI: 11.1 Med Mal-Occurrence Only

Sub-TOI: 11.1029 Other

Filing Type: Form

Effective Date Requested (New): On Approval

Effective Date Requested (Renewal): On Approval

SERFF Tr Num: AGNY-133163370

State Tr Num: AGNY-133163370

Co Tr Num: AIG-22-EO-01

Date Submitted: 02/28/2022










Authors: Andrea Connell

SERFF Status: Closed-Approved

State Status: Under review

Co Status:

Disposition Date: 03/09/2022

General Information		Form Schedule	Rate/Rule Schedule	Supporting Documentation	State Specific	Companies and Contact	Filing Fees	Filing Correspondence			
Form Count: 3											
Item No.		Schedule Item Status	Form Name *	Form Number	Edition Date	Form Type *	Action *	Action Specific Data	Readability Score	Attachments	Submitted
1		Approved 03/09/2022	Psychoanalysts Professional Liability Insurance Application	76522 (2-22)		ABE	Replaced	Previous Filing # AGNY-131402540 Replaced Form # 76522 (1/18) Replaced Edition Date		▼ Show All Files	Date Submitted: 03/08/2022 By: Andrea Connell
Previous Version											
		Replaced 03/08/2022	Psychoanalysts Professional Liability Insurance Application	76522 (2-22)		ABE	Replaced	Previous Filing # AGNY-131402540 Replaced Form # 76522 (1/18) Replaced Edition Date		 76522 (2-22) CW Application.pdf	Date Submitted: 02/28/2022 By: Andrea Connell
2		Approved 03/09/2022	Psychoanalysts Professional Liability Insurance Renewal Application	76523 (2-22)		ABE	Replaced	Previous Filing # AGNY-131402540 Replaced Form # 76523 (1/18) Replaced Edition Date		▼ Show All Files	Date Submitted: 03/08/2022 By: Andrea Connell
Previous Version											
		Replaced 03/08/2022	Psychoanalysts Professional Liability Insurance Renewal Application	76523 (2-22)		ABE	Replaced	Previous Filing # AGNY-131402540 Replaced Form # 76523 (1/18) Replaced Edition Date		 76523 (2-22) CW Renewal Application.pdf	Date Submitted: 02/28/2022 By: Andrea Connell
3		Approved 03/09/2022	Psychoanalysts Professional Liability Policy School/Institute/Society Liability Coverage Application	76532 (2-22)		ABE	Replaced	Previous Filing # CO 2125 00 Replaced Form # 76532 (8/00) Replaced Edition Date		▼ Show All Files	Date Submitted: 03/08/2022 By: Andrea Connell
Previous Version											
		Replaced 03/08/2022	Psychoanalysts Professional Liability Policy School/Institute/Society Liability Coverage Application	76532 (2-22)		ABE	Replaced	Previous Filing # AIC-00-PR-09 Replaced Form # 76532 (8/00) Replaced Edition Date		 76532 (2-22) Sch-Inst-Soc Application.pdf	Date Submitted: 02/28/2022 By: Andrea Connell

Form Type Legend:

- **ADV** = Advertising
 - **BND** = Bond
 - **CER** = Certificate
 - **DSC** = Disclosure/Notice
 - **END** = Endorsement/Amendment/Conditions
 - **PCF** = Policy/Coverage Form
- **ABE** = Application/Binder/Enrollment
 - **CNR** = Canc/NonRen Notice
 - **DEC** = Declarations/Schedule
 - **ERS** = Election/Rejection/Supplemental Applications
 - **OTH** = Other

Icon Legend:  - Draft Schedule Item  - Open Objection

- Add Authors
- Update
- Create Reminder
- Move to Workfolder
- PDF Pipeline
- Clone Filing