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| **AMERICAN HOME ASSURANCE COMPANY** | | | | |
| **COMMERCE AND INUDSTRY INSURANCE COMPANY** | | | | |
| **PSYCHOANALYSTS PROFESSIONAL LIABILITY** | | | | |
| **WASHINGTON** | | | | |
| **I.** | **PSYCHOANALYSTS PROFESSIONAL LIABILITY RATES** | |  |  |
|  |  | LIMITS OF LIABILITY | RATE |  |
|  |  | $200,000\$600,000 | 2,422 |  |
|  |  | $1,000,000\$1,000,000 | 3,995 |  |
|  |  | $1,000,000\$3,000,000 | 4,405 |  |
|  |  | $2,000,000\$2,000,000 | 4,758 |  |
|  |  | $2,000,000\$3,000,000 | 6,432 |  |
|  |  | $2,000,000\$4,000,000 | 5,022 |  |
|  |  | $2,000,000\$5,000,000 | 5,154 |  |
|  |  | $2,000,000\$6,000,000 | 5,286 |  |
|  |  | $3,000,000\$3,000,000 | 5,284 |  |
|  |  | $3,000,000\$4,000,000 | 5,416 |  |
|  |  | $3,000,000\$5,000,000 | 5,548 |  |
|  |  | $4,000,000\$4,000,000 | 5,697 |  |
|  |  | $4,000,000\$5,000,000 | 5,829 |  |
|  |  | $5,000,000\$5,000,000 | 6,054 |  |
| **II.** | **SCHOOL/INSTITUTE/SOCIETY RATES** | |  |  |
|  | **A.** | **SCHOOL/INSTITUTE** |  |  |
|  |  | LIMITS OF LIABILITY | RATES BASED ON | |
| OUTPATIENT VISITS | | | | |
|  |  | $100,000/$300,000 | 0.520 | first 5,000 visits |
|  |  |  | 0.416 | next 3,000 visits |
|  |  |  | 0.374 | next 8000 visits and over |
|  |  | $500,000/$500,000 | 0.665 | first 5,000 visits |
|  |  |  | 0.532 | next 3,000 visits |
|  |  |  | 0.479 | next 8000 visits and over |
|  |  | $1,000,000/$1,000,000 | 0.769 | first 5,000 visits |
|  |  |  | 0.615 | next 3,000 visits |
|  |  |  | 0.554 | next 8000 visits and over |
|  |  | $1,000,000/$3,000,000 | 1.265 | first 5,000 visits |
|  |  |  | 1.012 | next 3,000 visits |
|  |  |  | 0.911 | next 8000 visits and over |
| Minimum Policy Premium - $750 for $1,000,000/$1,000,000 | | | | |
|  |  | $1,000 for $1,000,000/$3,000,000 |  |  |
|  | **B.** | **SOCIETIES** |  |  |
|  |  | **LIMITS OF LIABILITY** | **PREMIUM** |  |
|  |  | $500,000/$500,000 | 339 |  |
|  |  | $1,000,000/$1,000,000 | 522 |  |
|  |  | $1,000,000/$3,000,000 | 783 |  |
| **III.** | **ADDITIONAL COVERAGES** | |  |  |
| ECT - Electroconvulsive Therapy Coverage - An additional charge of 25% | | | | |
| Part-Time Psychoanalysts- 50% for psychoanalysts practicing 20 hours or | | | | |
|  |  | less per week |  |  |
| **IV.** | **ADDITONAL INSURED CHARGES:** | |  |  |
|  |  | Landlord: 20% of the policy premium |  |  |
|  |  | Corporation with Other Employees: 40% of the policy premium | |  |
|  |  | Additional Insured: 20% of the policy premium. Only applies to School/Institute/Society | | |

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