




CERTIFICATE OF COVERAGE

<p>Named Member: University of Southern California 3434 South Grand Avenue, CAL 120 Los Angeles, CA 90089</p> <p>Broker: Marsh & McLennan Agency LLC P.O. Box 85638 San Diego, CA 92186</p>	<p>This document certifies that coverage is in force for the Named Member on the Issue Date below, subject to the terms and conditions of the Contract designated. It is issued as a matter of information and does not confer any rights to any Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded under the Contract. If the Contract, or coverage for any Member, is canceled for any reason or if the terms of the Contract are changed, we will notify the Named Member only. Coverage is not in effect unless and until all payments are received when due.</p>								
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Certificate Number:</th> <th style="width: 25%;">Effective Date</th> <th style="width: 25%;">Expiration Date</th> <th style="width: 25%;">Retroactive Date *</th> </tr> </thead> <tbody> <tr> <td>HCL-22-807</td> <td>7/1/22 at 12:01 a.m.</td> <td>7/1/23 at 12:01 a.m.</td> <td>9/1/86 at 12:01 a.m.</td> </tr> </tbody> </table>		Certificate Number:	Effective Date	Expiration Date	Retroactive Date *	HCL-22-807	7/1/22 at 12:01 a.m.	7/1/23 at 12:01 a.m.	9/1/86 at 12:01 a.m.
Certificate Number:	Effective Date	Expiration Date	Retroactive Date *						
HCL-22-807	7/1/22 at 12:01 a.m.	7/1/23 at 12:01 a.m.	9/1/86 at 12:01 a.m.						
<p>Type of Coverage:</p> <p><input checked="" type="checkbox"/> Professional Liability - Claims made and reported <input type="checkbox"/> General Liability - Occurrence</p>									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Limits of Liability:</th> <th style="width: 50%;">Deductible:</th> </tr> </thead> <tbody> <tr> <td>\$1,000,000 Per Claim</td> <td>\$250,000 Per Claim</td> </tr> <tr> <td>\$3,000,000 Aggregate Per Contract Period</td> <td>\$4,500,000 Aggregate Per Contract Period</td> </tr> </tbody> </table>		Limits of Liability:	Deductible:	\$1,000,000 Per Claim	\$250,000 Per Claim	\$3,000,000 Aggregate Per Contract Period	\$4,500,000 Aggregate Per Contract Period		
Limits of Liability:	Deductible:								
\$1,000,000 Per Claim	\$250,000 Per Claim								
\$3,000,000 Aggregate Per Contract Period	\$4,500,000 Aggregate Per Contract Period								
<p>Description of Coverage:</p> <p>Evidence of coverage for USC faculty and employees, volunteers, students, continuing education students, interim workers, interns, externs, fellows, and residents while working on behalf of USC. The USC residents, interns, employees, students and continuing education students of the following programs are covered as Members on a shared limit basis during the course and scope of their duties and medical training: Medicine, Physician Assistant, Pharmacy, Dentistry, Nurse Anesthesiologists, Perfusionists, Occupational Therapy, Physical Therapy, Social Work and Marriage and Family Therapy.</p>									
<p>Issue Date: July 01, 2022</p>									
<p>Certificate Holder:</p> <p>FOR INFORMATION ONLY</p>	<p>Authorized Representative:</p> <p style="text-align: center;"></p> <p>Michele Reager, CPCU Senior Director of Underwriting</p>								

* the retroactive date applies to claims made coverage only