

1100 Virginia Drive, Suite 250 Fort Washington, PA 19034-3278 Phone:1-800-247-1500 Fax:1-800-758-3635 Website:www.nso.com

04/22/20

John T Haskett 4410 Chaffin Rd Mckinleyville, CA 95519-8029

Dear John T Haskett:
Enclosed is the replacement certificate of insurance that you requested.
If you have any questions or need assistance, please call us toll free at 1-800-247-1500. Our Customer Service Representatives are available weekdays from 8:00 a.m. to 6:00 p.m., EST.
Sincerely,
Customer Service
Enclosure



HEALTHCARE PROVIDERS SERVICE ORGANIZATION PURCHASING GROUP

Certificate of Insurance

OCCURRENCE POLICY FORM



Print Date: 4/22/2020

Producer 018098

Producer Branch Prefix

Prefix

Policy Number

0644105973

Policy Period

from 09/30/19 to 09/30/20 at 12:01 AM Standard Time

Named Insured and Address:

970

John T Haskett 4410 Chaffin Rd

Mckinleyville, CA 95519-8029

Program Administered by:

Nurses Service Organization 1100 Virginia Drive, Suite 250 Fort Washington, PA 19034

1-800-247-1500 www.nso.com

Medical Specialty:

Adult/Geriatric Nurse Practitioner

Code: 80965

Insurance is provided by:

American Casualty Company of Reading, Pennsylvania

151 N. Franklin Street Chicago, IL 60606

Professional Liability

\$1,000,000 each claim

\$6,000,000 aggregate

Your professional liability limits shown above include the following:

* Good Samaritan Liability

* Malplacement Liability

* Personal Injury Liability

* Sexual Misconduct Included in the PL limit shown above subject to \$ 25,000 aggregate sublimit

Coverage Extensions

License Protection Defendant Expense Benefit Deposition Representation	\$ 25,000 \$ 1,000 \$ 10,000	per proceeding per day limit per deposition	\$ 25,000 \$ 25,000 \$ 10,000	aggregate aggregate aggregate
Assault Includes Workplace Violence Counseling	\$ 25,000	per incident	\$ 25,000	aggregate
Medical Payments	\$ 25,000	per person	\$ 100,000	aggregate
First Aid Damage to Property of Others	\$ 10,000 \$ 10,000	per incident per incident	\$ 10,000 \$ 10,000	aggregate aggregate
Information Privacy (HIPAA) Fines and Penalties	\$ 25,000	per incident	\$ 25,000	aggregate

Workplace Liability

Workplace Liability Fire & Water Legal Liability Personal Liability Included in Professional Liability Limit shown above

Included in the PL limit shown above subject to \$150,000 aggregate sublimit

\$1,000,000 aggregate

Total: \$ 679.00

Base Premium

\$679.00

Premium reflects Employed, Full Time

Policy Forms & Endorsements(Please see attached list for a general description of many common policy forms and endorsements.)

G-121500-D GSL15565 G-121503-C GSL17101 G-121501-C1 GSL13424 G-145184-A CNA80051

Coverage Change Date:

G-147292-A CNA80052 GSL15563

G-123846-D04

GSL15564 CNA81753

CNA81758

CNA82011

Chairman of the Board

Secretary

Keep this document in a safe place. It and proof of payment are your proof of coverage. There is no coverage in force unless the premium is paid in full. In order to activate your coverage, please remit premium in full by the effective date of this Certificate of Insurance.

Master Policy # 188711433 Endorsement Change Date:

G-141241-B (03/2010)

POLICY FORMS & ENDORSEMENTS

The following are the policy forms and endorsements that apply to your current professional liability insurance policy.

COMMON POLICY FORMS & ENDORSEMENTS

PLEASE REFER TO YOUR CERTIFICATE OF INSURANCE FOR THE POLICY FORMS & ENDORSEMENTS SPECIFIC TO YOUR STATE AND YOUR POLICY PERIOD.

For NJ residents: The PLIGA surcharge shown on the Certificate of Insurance is the NJ Property & Liability Insurance

Guaranty Association.

For KY residents: The Surcharge shown on the Certificate of Insurance is the KY Firefighters and Law Enforcement

Foundation Program Fund and the KY LGPT is the KY Local Government Premium Tax which

includes charges at a municipality and/or county level.

For WV residents: The surcharge shown on the Certificate of Insurance is the WV Premium Surcharge.

For FL residents: The FIGA Assessment shown on the Certificate of Insurance is the FL Insurance Guaranty Association

- 2012 Regular Assessment.

Form#: G-141241-B (03/2010) Named Insured: John T Haskett

Master Policy#: 188711433 Policy#: 0644105973