



Coverage for the following is provided at no additional cost:

Disciplinary Proceedings Legal Expense	\$10,000 Aggregate
Emergency Evacuation Expense	\$25,000 Aggregate
Media Expense	\$25,000 Aggregate

Cyber Liability has been included with limits of \$100,000 each claim/aggregate. This coverage form will require a \$2,500 deductible and is provided at no additional cost. Higher limits of liability may be obtained for additional premium through the THIE partnership with Tokio Marine Houston Casualty Company; 800/792-0060.

.....

Payment Information:

1. Premiums are financed interest free through First Insurance Funding (FIF).
2. All premium payments will be made to FIF, see attachment for payment options, including paperless billing.
3. Signed *Premium Finance Agreement* with 15% down payment OR payment in full is due to FIF by April 21, 2022.
4. Deductibles will be billed separately and payable to THIE.

.....

SUBJECTIVITIES

1. Copy of current policy with MedPro and all endorsements prior to binding.

COMMENTS

- 1 This quote is valid until April 21, 2022.
- 2 Risk management services are provided to THIE insureds free of charge. Please see attached information on education for employed physicians through the THIE partnership with Med-IQ.
- 3 Defense costs are in addition to the limits of liability. THIE allows the insured choice of counsel. THIE uses ISO Commercial General Liability forms. THIE will have a duty to defend Sexual Misconduct under Coverage B – Personal and Advertising Injury Liability. Our duty to defend will cease if the conduct is eventually proven to be criminal and intentional.
- 4 The Medical Professional policy includes a consent to settle clause which can be found in the Insuring Agreement Section, Page 1 – 1.B. “... We may conduct an investigation and, with your written consent, settle any claim or suit as we deem expedient.”
- 5 The Medical Professional policy provides coverage for physicians serving as medical director and or other administrative services listed. Coverage is extended to employed mid-levels (PA,CRNA,...) at no additional charge.
- 6 Deductibles will not apply to General Liability Coverage.

.....

Professional Liability Forms:

PL0 00 00 05 17 – Common Declarations, PLO 01 05 17 – MPL Declarations, PLO 00 02 04 20 – Medical Professional Liability Coverage Part, PL 00 03 05 17 – Cancellation Non-Renewal Premium Increase, PL 00 04 05 17 – Excluded Patients, PL 00 05 01 14 – No Contingent Liability, PL 00 08 05 16 – Disciplinary Proceedings Legal Expense, PL 00 09 09 17 – Emergency Evacuation Expenses, PLO 00 10 05 17 – Participating Subscriber, PLO 00 11 05 17 Media Expenses, THIE Cyber



General Liability (ISO) Forms:

CG 00 01 04 13 – Insuring Agreement, CG 01 09 11 85 – Oklahoma Changes, CG 04 35 12 07 – Employee Benefits, CG21 06 05 14 – Exclusion – Access or Disclosure of Confidential Data, CG 21 47 12 07 – Employment related practices Exclusion, CG 22 11 01 12 – Patient Exclusion, CG 22 69 04 13 – Druggists, CG 24 07 01 96 – Products & Completed Operations, CG 25 08 07 98 – Oklahoma Changes Per Claimant limits, CG P 015 04 13 – Multistate forms revision, IL 00 17 11 98 – Common Policy Conditions, IL 00 21 09 08 – Nuclear Energy Liability Exclusion, IL 01 79 10 02 – Oklahoma Notice, IL 02 36 09 07 – Oklahoma changes – Cancellation and non-renewal, OK IL 00 07 17 Common Policy Declarations.

PREPARED BY:

Date:

Dan Andersen

February 18, 2022

Dan Andersen

Vice President—Underwriting

dandersen@thie.com

- ☐ Employee Benefits Liability Coverage is requested.
- ☐ Optional Terrorism Coverage is requested.
- ☐ Optional Terrorism Coverage is not needed.

Deductible option # _____ premium \$ _____

General Liability premium \$ _____

Optional Employee Benefits Coverage \$ _____

Optional Terrorism Coverage premium \$ _____

Total Premium \$ _____

PROPOSAL ACCEPTED BY:

Date:

Named Insured Representative

Signature

WHO WE ARE

For over 40 years, THIE has delivered exceptional insurance coverage to medical professionals, hospitals, and other healthcare facilities.

As a reciprocal exchange, THIE is owned by its subscribers. This ensures a mutual commitment to **lowering costs, limiting claims and maintaining a safe workplace.**

Subscribers share profits and losses in the same proportion as the amount of insurance they purchase, so premiums paid become an investment.

We are more than just an insurance company, **we are a partner.**

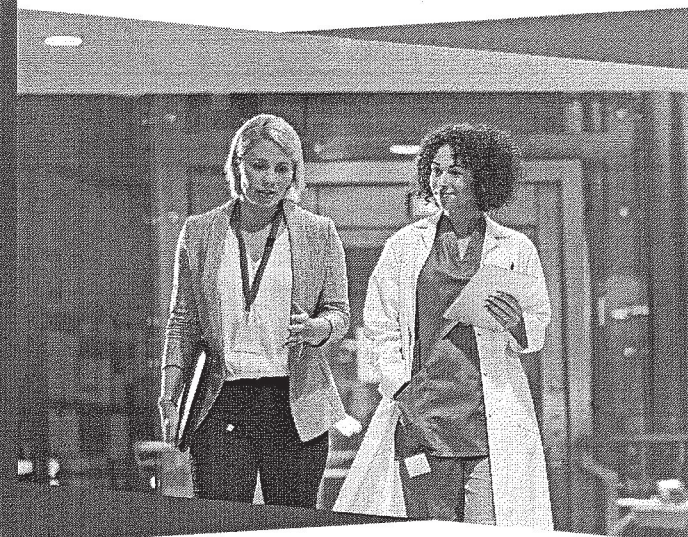
CONTACT US

Contact us today to learn how THIE can help your healthcare facility lower costs, limit claims, and create a safer workplace.

📍 **8310 N. Capital of Texas Hwy**
Building 1, Suite 250
Austin, TX 78731

📞 **(512) 451-5775**

💻 **thie.com**



*Insurance coverage
you deserve
from the insurance company
you own.*

WHAT WE OFFER

When a crisis arises, we offer protection and guidance. All recommendations are based on leading-edge research and data analysis used to track trends and apply best practices. We know you can't do it alone, that's why **we offer education to our subscribers at no cost.**

Commercial General Liability

With THIE's commercial general liability program, your hospital is protected from claims by the general public for negligent acts or omissions arising out of your operations. THIE's program is comprehensive, yet flexible enough to meet the unique needs of health care facilities.

Cyber Liability

THIE's cyber liability program provided by NAS Insurance Services, offers comprehensive coverage to protect your facility in the event of a breach due to cyber extortion, cyber-crime, hacking or phishing incidents. Proactive privacy breach response will help control expenses such as IT forensics and potential fines associated with a cyber-attack.

Medical Professional Liability

THIE's medical professional liability insurance protects you against legal liability resulting from negligence, errors and omissions, and other aspects of rendering or failing to render professional service to your patients. Premiums are based on your facility's exposures and experience each year.

Workers' Compensation

THIE's comprehensive workers' compensation coverage for employees includes medical treatment and payments for time lost from work. The policies also protect your facility against additional liability and the loss of certain common law defenses if you are sued by an employee. We do not offer Workers' Compensation in Oklahoma at this time.

Business Automobile

THIE's business automobile coverage protects your facility from legal liability and physical damage. You may include emergency and non-owned vehicles in this program and coverage is customized to your specific needs.

Risk Management Consultations

Let the THIE experts help you create a strategic plan to help increase workplace safety and reduce claims. Our team will conduct surveys, offer educational seminars and help your team lower overall risks at your facility.

Continuing Education HOT TOPICS

Join your colleagues and fellow health experts for a full day of education designed for hospital leaders. These educational forums are offered multiple times throughout the year and are free to our subscribers. National speakers and healthcare experts present the most current information to keep you abreast of what is happening in the industry.

3rd Party Administration

We provide 3rd party administration for self-insured facilities. We know in today's litigious society, hospitals need a partner managing business insurance claims who understands the healthcare industry and legal climate in which hospitals operate.

From complimentary in-service trainings to our popular Hot Topics Forum, our programs help you learn how to manage risk at your facility

Umbrella Policy

We recognize that for mid-size facilities, surgery centers and management groups, excess liability coverage is a highly sought-after resource.

SUBSCRIBER'S AGREEMENT AND POWER OF ATTORNEY

TEXAS HOSPITAL INSURANCE EXCHANGE

of which

TEXAS HOSPITAL INSURANCE NETWORK is ATTORNEY-IN-FACT

PREAMBLE

WHEREAS, Mangum City Hospital Authority (hereinafter referred to as the Subscriber), a Subscriber of Texas Hospital Insurance Exchange (hereinafter referred to as the "Exchange"), in order to provide for the management of its business as such Subscriber, subject to the right of the Board of Directors to exercise all powers and authority given the Board of Directors by this Agreement, the Exchange Bylaws, and by law to direct the activities of the Exchange, considers it wise and to its advantage to adopt these articles and enter into this Subscriber's Agreement and Power of Attorney (hereinafter referred to as the "Subscriber's Agreement" or the "Agreement"); and

WHEREAS, the Subscriber is desirous of participating in a program of insurance coverage which provides for policy formulation by subscribers through their Board of Directors in the areas of rates, policies and procedures in accordance with the demonstrated needs and requirements of the insureds through the reciprocal exchange of indemnity or insurance contracts; and

WHEREAS, the Subscriber recognizes a need to provide a program of adequate and acceptable insurance coverage at a cost which is realistic and reasonable; and

WHEREAS, the Subscriber recognizes that this Agreement constitutes the charter and governing document of the Exchange and agrees that the Exchange shall be governed by a Board of Directors as set forth herein.

ADDITIONAL DOCUMENTS THAT FORM THE AGREEMENT

The Subscriber agrees that the following documents are incorporated in their entirety and made a part of this Subscriber's Agreement and Power of Attorney by reference as if fully set forth herein, and Subscriber further agrees to follow and be bound by the following documents in their entirety and as they may be amended from time to time by the Board of Directors of the Exchange: 1) Texas Hospital Insurance Exchange Bylaws; 2) Texas Hospital Insurance Exchange Policy on Subscriber Accounts and Distributions from Subscriber Savings Credit Accounts to Discontinuing Subscribers Resolution of the Board of Directors. A copy of these documents shall be provided to any Subscriber upon written request.

ARTICLE I
APPOINTMENT OF ATTORNEY-IN-FACT

NOW, THEREFORE, the Subscriber hereby agrees to the terms of this Agreement and appoints Texas Hospital Insurance Network, a Texas corporation, with its principal place of business in Austin, Travis County, Texas, as its Attorney-in-Fact, to carry out the purposes and objectives set forth in this Agreement, and to sign contracts of indemnity or insurance in the name of the Exchange, in its behalf. The Subscriber also agrees that in case of the dissolution, resignation, removal or withdrawal of said corporation as Attorney-in-Fact, the Board of Directors hereinafter provided for, shall nominate and appoint a successor Attorney-in-Fact for and on behalf of each Subscriber and this Agreement will be binding on Subscriber as to any successor Attorney-in-Fact.

ARTICLE II
CONTRACTS OF INSURANCE

The Attorney-in-Fact shall, while acting in such capacity as Attorney-in-Fact, have power for the Exchange to insure hospitals, hospital and healthcare systems, and other hospital-affiliated entities and healthcare providers, and such other entities, organizations or persons as may be authorized under the Bylaws or by the Board of Directors against loss or liability of every kind, nature or description, as may be authorized and permitted by law, and to issue contracts of indemnity or insurance in our behalf covering any or all such loss, liability or liabilities, subject to the provisions contained herein.

ARTICLE III
DUTIES OF ATTORNEY-IN-FACT

The Attorney-in-Fact shall have the following duties and is hereby authorized, empowered, and directed to perform such duties in accordance with policies established by the Board of Directors, as may be changed from time to time:

1. To sign contracts of indemnity or insurance and any other documents by one signature of its own name as acting for all the subscribers of the Exchange; to make such contracts subject to such terms as it shall deem proper, change or modify such terms and cancel 2014 SAPOA

all or any part of such contracts, subject to such underwriting standards as may be adopted by the Board of Directors or appropriate committee thereof; to bind risks by temporary binder; to issue such contracts to subscribers only; and to accept reinsurance, to retrocede reinsurance or to cede reinsurance.

2. To provide and/or supervise all insurance claims handling, including the payment, compromise of and/or denial thereof, to receive and give all notices, accept service of process for the Exchange, receive proofs of loss, recover amounts due under all insurance or reinsurance agreements, and enforce payment by suit, in its own name or otherwise, of any premium or other payment due the Exchange, and institute, defend, arbitrate, mediate and settle any suit or other proceeding as directed by the Board of Directors.

3. To endorse all checks, drafts and other papers drawn to the order of the Exchange and deposit the same to its account as such Attorney-in-Fact, and disburse from such funds of the Exchange all amounts necessary to administer the Exchange, including but not limited to the costs of securing, issuing, exchanging and administering contracts of indemnity, insurance or reinsurance, the cost of reinsurance, agency or broker fees and commissions, risk management and loss prevention expenses, collection expenses, investment expenses, loss adjustment expenses, damages, judgments, court costs, legal expenses, license fees, taxes, inspection expenses and expenses of annual and special meetings, audits, examinations, rating bureaus, insurance trade and service organizations, and bonds as required herein, and all other operating expenses of the Exchange and its compensation as hereinafter provided.

4. To invest and reinvest assets of the Exchange as may from time to time be required or desirable in accordance with policies established by the Board of Directors, and to maintain necessary reserve funds of not less than legal requirements in cash or securities as provided by law.

5. To appoint the Commissioner of Insurance of Texas and his/her successor or successors in office, and persons in other states, as may be required under applicable law, to accept on his/her behalf service of process in

any suit or proceeding arising out of the contracts of indemnity or insurance.

6. To execute and file any and all instruments and papers, and do any and all acts required by the laws of the State of Texas and any other jurisdiction where the Exchange may be licensed or registered to transact business.

7. To keep in its principal office a current list of all Subscribers, which shall be available to the Board of Directors.

8. To maintain all of the Exchange's books and records, including the minutes of all meetings of the Board of Directors, and to maintain all insurance records customary to the operation of the insurance business, and to keep a separate account, in the name of the Exchange, of all financial transactions conducted by it on behalf of the Exchange, and to render to the Board of Directors when required by the Board of Directors, an account of all transactions and the financial condition of the Exchange and to provide for an annual audit certified by an independent certified public accountant.

9. To pay to each member of the Board of Directors' expenses for to the affairs of the Exchange and such other expenses or allowances as may be prescribed by the Board of Directors.

10. To file with the Commissioner of Insurance of Texas a bond payable to the State of Texas, executed by the Attorney-In-Fact and by a duly authorized corporate surety, or deposit securities in such amount and containing such terms and conditions, as may be required by applicable law, and to post bonds or deposits in other states as may be required by applicable law.

11. In general, to do and perform for the Subscriber and the Exchange, every other act and thing and execute any and all papers in relation to any transaction made by it by virtue hereof or by direction of the Board of Directors, which the Subscriber or the Exchange could do or execute personally.

ARTICLE IV

COMPENSATION OF ATTORNEY-IN-FACT AND EXPENSE REIMBURSEMENT

1. The Attorney-in-Fact shall be reimbursed for the actual expenses and costs it incurs in performing the services for and on behalf of the Exchange required herein and in addition shall receive a fixed management fee in an amount determined by the Board of Directors in its discretion and as may be amended from time to time as set out in the Management Agreement of Attorney-In-Fact for the Texas Hospital Insurance Exchange, provided that, in no event shall the Attorney-in-Fact receive more than 20% of all the gross written premiums of the Exchange in any one calendar year.

The Attorney-in-Fact is specifically authorized to contract, subcontract, or otherwise enter into contracts or agreements for the purpose of securing and obtaining such services, consultation, and advice, as it may deem necessary or desirable in fulfilling its obligations under this agreement and power of attorney, subject to the approval or disapproval of the Board of Directors.

ARTICLE V DEFINITION OF SUBSCRIBER; SUBSCRIBER CLASSES

1. **Subscriber.** The term "Subscriber" is defined in Ch. 942 of the Texas Insurance Code and can include any entities, organizations, and persons that are authorized under the Bylaws or otherwise approved or allowed by the Board of Directors, which have executed a Subscriber's Agreement and Power of Attorney, which are insured by the exchange of contracts of indemnity or insurance with others through the Exchange, and which are identified as the "First Named Insured" on the insurance agreement or policy. The term "Subscriber" shall include a "Discontinuing Subscriber" (also referred to in the Exchange Bylaws as Inactive Participating Subscribers) and "Withdrawn Subscriber" as defined in the Policy on Subscriber Accounts and Distributions from Subscriber Savings Credit Accounts to Discontinuing Subscribers Resolution of the Board of Director; provided however, Discontinuing Subscribers and Withdrawn Subscribers shall not have all of the rights of Subscribers and shall have only those rights as set forth specifically herein and in the aforementioned Policy. Discontinuing

Subscribers and Withdrawn Subscribers shall continue to be obligated as Subscribers hereunder as set forth herein. If a Subscriber is a corporate or governmental entity, it shall be represented by the duly designated representative selected by the corporate or governmental entity.

2. Subscribership Classes. The Subscribers of the Exchange are divided into two classes. "Participating Subscribers" shall consist of those entities, organizations or persons defined as such in the Bylaws, as may be amended from time to time. "Non-Participating Subscribers" shall consist of those persons, entities or organizations defined as such in the Bylaws, as may be amended from time to time. Subscriptions for Participating Subscribers shall be maintained for Participating Subscribers. Subscriber equity accounts shall not be maintained for Non-Participating Subscribers and Non-Participating Subscribers agree to waive and hereby do waive any rights to have savings credited to subscriber equity accounts on their behalf. Participating Subscribers and Non-Participating Subscribers hereby acknowledge and agree that any and all profits and losses attributable to Non-Participating Subscribers may be allocated among the Participating Subscribers pursuant to an equity allocation plan or formula adopted by the Board of Directors of the Exchange, as may be amended from time to time. Participating Subscribers that are not Discontinuing Subscribers or Withdrawn Subscribers shall be entitled to vote for directors and on all other matters they are authorized to vote upon under the Bylaws. Non-Participating Subscribers and any Participating Subscriber that becomes a Discontinuing Subscriber or a Withdrawn Subscriber shall not be entitled to vote for directors or on any matter.

3. Term of Subscribership. An entity, organization or person becomes or became a Subscriber of the Exchange at the time and on the date such Subscriber executes or executed an Exchange Subscriber's Agreement and Power of Attorney. Such Subscriber remains a Subscriber until (1) such time as such Subscriber is no longer insured as a First Named Insured under an Exchange then current policy year issued in force insurance policy and (2) all policy years for which such Subscriber was issued an insurance policy and which were subject to adjustment have been deemed final 2014 SAPOA

and closed by the Exchange's Board of Directors, in which case such Subscriber shall no longer be a Subscriber and shall no longer be subject to the Subscriber's Agreement and Power of Attorney which shall be terminated. An entity, organization or person which signs a Subscriber's Agreement and Power of Attorney but is not issued a policy within 60 days thereafter shall not be a Subscriber and such Subscriber's Agreement shall be void.

ARTICLE VI **SUBSCRIBER ACCOUNT PROVISIONS**

1. Subscriber Equity Accounts. The Exchange may maintain the following three equity accounts for Participating Subscribers: (1) a Capital Account that is comprised of the surplus contributions made by a Subscriber; (2) a Subscriber Savings Account that will be comprised of the statutory savings of the Exchange credited to a Subscriber pursuant to section 832(f) of the Internal Revenue Code; and (3) a Surplus Account that will be comprised of allocations of credits and debits not otherwise reflected in the Capital Account or Subscriber Savings Account. All three accounts are accounting entries on the books and records of the Exchange and are not separate financial accounts. All three accounts may reflect such allocation and reallocation of credits and debits made by the Board of Directors from time to time in its discretion. Subscriber understands and agrees that it is not entitled to be paid or withdraw any amounts from Subscriber Equity Accounts and has no right to demand funds from such accounts except when and in such amounts specifically declared and approved by the Board of Directors of the Exchange or as otherwise allowed by the Policy on Subscriber Accounts and Distributions from Subscriber Savings Credit Accounts to Discontinuing Subscribers. Subscriber understands and agrees that its equity accounts are subject to risk of partial or total diminution, total loss, and reduction, absorption or adjustment for future losses, or due to the results of the Exchange's underwriting, investment or other business activity, including losses of the Exchange and/or Subscribers. All subscriber equity accounts of a Subscriber may be debited for negative balances resulting in other subscriber equity accounts of such Subscriber or other Subscribers of the Exchange. In addition, all subscriber equity accounts of a Subscriber may be debited for any amount due and owing to the

Exchange by such Subscriber, including but not limited to unpaid premiums, unpaid deductibles, and as otherwise determined by the Board in its sole discretion. Further details regarding these accounts and the rights and duties of the Subscribers are set forth in the Policy on Subscriber Accounts and Distributions from Subscriber Savings Credit Accounts to Discontinuing Subscribers.

ARTICLE VII **GENERAL PROVISIONS**

1. Attorney-in-Fact shall not bind the Subscriber by the obligations of any other Subscriber, but for itself alone, and shall have no power to make the Subscriber jointly liable with any other Subscriber and every liability of whatever nature which is authorized to be insured for Subscriber hereunder is in every case separate and not joint.

2. It is expressly understood that Subscribers incur no financial obligation relating to this reciprocal insurance exchange except as follows: (a) insurance premiums as determined by the Exchange, and, in the case of Participating Subscribers (b) a surplus contribution under such provisions and in such amounts as may be approved by the Board of Directors, but in no event to exceed 100% of the annual premiums payable for insurance, and (c) amounts for unpaid deductibles arising under the insurance, any amounts provided in the Policy on Subscriber Accounts and Distributions from Subscriber Savings Credit Accounts to Discontinuing Subscribers, and such other amounts specifically authorized in this Agreement, provided that, there will be no liability for surplus contributions if the unencumbered surplus of the Exchange does not fall below the amount required by Section 942.152 of the Texas Insurance Code, as amended.

3. This Agreement is expressly limited to the use and purposes herein defined and specified and no other. The power of attorney to the Attorney-in-Fact shall be and hereby is limited to uses contemplated, expressed, and related to matters in this Agreement.

4. Proposed modification of the terms of the Subscriber's Agreement and Power of

2014 SAPOA

Attorney shall be made by the Board of Directors.

5. Each Subscriber shall make prompt payment of all contributions, premiums and assessments as required by the Exchange. The term "premium" as used herein means the amount payable by the Subscriber under the terms of indemnity or insurance contracts issued to the Subscriber, including all fees.

6. Subject to the laws of Texas and notwithstanding any provision in this Agreement to the contrary, if the exchange of contracts of indemnity or insurance is discontinued, the Attorney-in-Fact shall pay each Subscriber insured by the Exchange an equitable share of all assets after the full satisfaction of all liabilities of the Exchange, and after the payment of the Capital Accounts, Subscriber Savings Accounts, and Surplus Accounts which payment to Subscriber shall be in full satisfaction of all rights and interest of Subscriber. Any savings or credits to be paid subscribers shall be distributed on an equitable basis and at such time as may be determined by the Board of Directors and in compliance with Texas law.

7. Subscribers, by the Board of Directors, may be divided into classes or groups in accordance with the nature of their business, the geographic location of their business, the risk or liabilities assumed, their loss experiences, or such other criteria deemed appropriate by the Board of Directors. The premiums charged and the losses and expenses incurred may be allocated on a group or class basis under the direction and at the discretion of the Board of Directors.

8. Each Subscriber agrees to initiate and maintain a safety and loss control program and agrees to follow the general recommendations of the Exchange and the Attorney-In-Fact in that regard. However, each Subscriber shall remain solely responsible for all decisions concerning its safety and loss control program and practices.

9. Indemnification. Directors of the Exchange shall be indemnified by the Exchange to the fullest extent now or hereafter permitted by law in connection with any actual or threatened action or proceedings (including civil, criminal, administrative, or investigative proceedings) arising out of their service to the

Exchange or to another organization at the Exchange's request and as more fully set out in the Bylaws of the Exchange.

10. The Subscriber, by execution hereof, does hereby agree to accept and be bound by all the terms and conditions hereof and to comply with, and make payment as required by, all contracts of indemnity or insurance issued by the Attorney-in-Fact pursuant to the authority delegated hereunder.

11. Returns of capital and savings distributions declared to be made by the Exchange to a Subscriber are subject to and contingent upon receiving any and all approvals necessary from the Texas Department of Insurance and any and all other regulatory and other approvals required by law.

12. In any suit or other proceeding arising from or related to this Agreement or Subscriber's participation in the Exchange, (that is not a dispute concerning coverage under an

insurance policy issued by the Exchange, which such dispute shall not be governed by this provision), the prevailing party(ies), as applicable, shall recover all reasonable costs and expenses, including without limitation reasonable attorneys', accountants', experts' and consulting fees, incurred by the prevailing party(ies) in and/or related to such legal action or other legal proceeding.

13. Subscriber agrees that the execution of this Subscriber's Agreement and Power of Attorney supersedes any previously executed Subscriber's Agreement and Power of Attorney executed in favor of the Exchange. The terms and conditions hereof shall take effect upon execution by the Subscriber.

PARTICIPATING SUBSCRIBER

Mangum City Hospital Authority

Name (Subscriber)

Name and Title

TEXAS HOSPITAL INSURANCE NETWORK

2014 SAPOA



Commercial Auto Proposal

Please note this is a brief overview of the coverage provided by the THIE Commercial Auto coverage. For a complete description of coverage and or exclusions, please refer to the policy

First Named Insured: Mangum City Hospital Authority.

Carrier: THIE, an Oklahoma Admitted Carrier since 2017

Agent: OHA Insurance Agency

Policy Period: April 21, 2022 TO April 21, 2023

New Business: QOAL004506-01

Limits of Liability:

Hired & Non-Owned Liability \$ 1,000,000 Combined Single Limits

Annual Premium: \$ 761.00

COMMENTS

1. This quote is valid until April 21, 2022.
2. Interest-Free Premium Payment Plan available via First Insurance Funding.
3. Subject to acceptable MVRs. We encourage you to run MVRs on all prospective employees who may drive for you prior to an offer for employment and to establish a policy on acceptable driving record. MVRs should be reviewed periodically for any employee who drives on hospital business.

PREPARED BY:

Dan Andersen

Date: February 23, 2022

Dan Andersen, Vice President - Underwriting
dandersen@thie.com

 We accept this proposal to be effective April 21, 2022 .

By: _____

Named Insured Representative

_____ Date