

# EMERGENCY NURSES – STATE COUNCILS MASTER POLICY DIRECTORS & OFFICERS LIABILITY

Disclaimer: The representation of coverage, as stated herein, is a general description of certain forms and types of insurance. This information is not intended to be a complete representation of any insurance policy or contract. A policy or contract issued by the insurance company referenced herein will provide the specifics of coverage.

**THIS IS A CLAIMS MADE POLICY**. This policy covers only those claims first made during the policy period and reported in writing to the insurer pursuant to the terms of the contract. The amounts incurred for defense cost shall be applied against the retention.

NAMED INSURED: State & Regional Societies of Emergency Nurses (a listing of all

state councils is endorsed to the policy)

Insurance Carrier: Philadelphia Insurance Company

Directors and Officers Protection FlexiPlus Form PI DF 1 (07 95)

Policy Period: 5/1/15 - 5/1/16

Policy Number: PHSD840991

LIMITS OF LIABILITY DEDUCTIBLE / RETENTION

D & O Liability \$1,000,000 Per Occurrence \$5,000 each claim

Shared Limits all Councils = Annual Aggregate \$5,000,000

#### **DEFENSE COSTS**

Defense costs are in addition to the limits of liability. Defense costs mean any reasonable and necessary legal fees and expenses incurred in the defense of a claim.

### **ENDORSEMENTS – major endorsement additions to policy**

- a. Sub-Organizations as additional insured endorsement (lists each state)
- b. Defense Costs are in addition to the limits of liability
- c. Shared Limits Endorsement
- d. Peer Review, Credentialing and Disciplinary Exclusion
- e. Professional Services Exclusion for acts, errors or omissions
- f. Sexual Abuse Exclusion
- g. Medical Malpractice Exclusion
- h. Affiliates, chapters, branches or members exclusion (cannot sue each other)
- i. Accreditation / certification / standard setting exclusion
- j. Related Parties Exclusion = ENA Corporate has not coverage on this policy

#### **INSURING AGREEMENT**

The company will pay on behalf of the insured for a loss as a result of a claim made and reported against the insured/organization during the Policy Period.

## **DEFINITIONS**

**Wrongful Act** = any actual or alleged act, error, omission, misstatement, misleading statement, neglect, breach of duty or personal and advertising injury committed or attempted by an individual/the organization in the capacity as an insured.



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**Claim** = means any <u>written</u> demand for monetary or non-monetary relief, any judicial, civil, administrative, regulatory, or arbitration proceeding which subjects an insured to a binding adjudication of liability for monetary or non-monetary relief for a wrongful act. NOTE: claim shall not include a labor or grievance proceeding pursuant to a collective bargaining agreement.

# **COVERAGES NOT INCLUDED IN THIS POLICY**

- a. Employment Practice
- b. Fiduciary Liability and Benefit Plan