

MENTAL HEALTH COUNSELOR'S PROFESSIONAL LIABILITY RATE SCHEDULE GROUP 7 – PSYCHOANALYST

A. First Year Rate - NO PRIOR ACTS (Coverate begins on the effective date of the policy.)

Limits of Liability	INDIVIDUAL POLICY					PARTNERSHIPS AND CORPORATIONS			
	Insured Full-time	Part-time Not available if you have employees	Professional Employees	Para-professional Employees	Independent Contractors	Corporation	Partners and Professional Employees	Para-professional Employees	Independent Contractors
\$ 200,000/ 600,000	\$213.00	\$138.00	\$213.00	\$107.00	\$ 8.00	\$213.00	\$213.00	\$107.00	\$ 8.00
\$ 500,000/1,000,000	\$232.00	\$151.00	\$232.00	\$116.00	\$ 9.00	\$232.00	\$232.00	\$116.00	\$ 9.00
\$1,000,000/1,000,000	\$263.00	\$171.00	\$263.00	\$132.00	\$11.00	\$263.00	\$263.00	\$132.00	\$11.00
\$1,000,000/3,000,000	\$300.00	\$195.00	\$300.00	\$150.00	\$14.00	\$300.00	\$300.00	\$150.00	\$14.00
\$1,000,000/4,000,000	\$327.00	\$213.00	\$327.00	\$164.00	\$17.00	\$327.00	\$327.00	\$164.00	\$17.00
\$1,000,000/5,000,000	\$337.00	\$219.00	\$337.00	\$169.00	\$20.00	\$337.00	\$337.00	\$169.00	\$20.00
\$2,000,000/2,000,000	\$356.00	\$231.00	\$356.00	\$178.00	\$23.00	\$356.00	\$356.00	\$178.00	\$23.00
\$2,000,000/4,000,000	\$377.00	\$245.00	\$377.00	\$189.00	\$26.00	\$377.00	\$377.00	\$189.00	\$26.00

B. Second Year Rate - ONE YEAR PRIOR ACTS (You will be covered for any act, error or omission that occurred up to one year prior to the effective date of the policy and otherwise covered by the policy.)

Limits of Liability	INDIVIDUAL POLICY					PARTNERSHIPS AND CORPORATIONS			
	Insured Full-time	Part-time Not available if you have employees	Professional Employees	Para-professional Employees	Independent Contractors	Corporation	Partners and Professional Employees	Para-professional Employees	Independent Contractors
\$ 200,000/ 600,000	\$267.00	\$174.00	\$267.00	\$134.00	\$ 8.00	\$267.00	\$267.00	\$134.00	\$ 8.00
\$ 500,000/1,000,000	\$290.00	\$189.00	\$290.00	\$145.00	\$ 9.00	\$290.00	\$290.00	\$145.00	\$ 9.00
\$1,000,000/1,000,000	\$329.00	\$214.00	\$329.00	\$165.00	\$11.00	\$329.00	\$329.00	\$165.00	\$11.00
\$1,000,000/3,000,000	\$375.00	\$244.00	\$375.00	\$188.00	\$14.00	\$375.00	\$375.00	\$188.00	\$14.00
\$1,000,000/4,000,000	\$408.00	\$265.00	\$408.00	\$204.00	\$17.00	\$408.00	\$408.00	\$204.00	\$17.00
\$1,000,000/5,000,000	\$421.00	\$274.00	\$421.00	\$211.00	\$20.00	\$421.00	\$421.00	\$211.00	\$20.00
\$2,000,000/2,000,000	\$444.00	\$289.00	\$444.00	\$222.00	\$23.00	\$444.00	\$444.00	\$222.00	\$23.00
\$2,000,000/4,000,000	\$471.00	\$306.00	\$471.00	\$236.00	\$26.00	\$471.00	\$471.00	\$236.00	\$26.00

C. Third Year Rate - TWO YEARS PRIOR ACTS (You will be covered for any act, error or omission that occurred up to two years prior to the effective date of the policy and otherwise covered by the policy.)

Limits of Liability	INDIVIDUAL POLICY					PARTNERSHIPS AND CORPORATIONS			
	Insured Full-time	Part-time Not available if you have employees	Professional Employees	Para-professional Employees	Independent Contractors	Corporation	Partners and Professional Employees	Para-professional Employees	Independent Contractors
\$ 200,000/ 600,000	\$302.00	\$196.00	\$302.00	\$151.00	\$ 8.00	\$302.00	\$302.00	\$151.00	\$ 8.00
\$ 500,000/1,000,000	\$328.00	\$213.00	\$328.00	\$164.00	\$ 9.00	\$328.00	\$328.00	\$164.00	\$ 9.00
\$1,000,000/1,000,000	\$373.00	\$242.00	\$373.00	\$187.00	\$11.00	\$373.00	\$373.00	\$187.00	\$11.00
\$1,000,000/3,000,000	\$425.00	\$276.00	\$425.00	\$213.00	\$14.00	\$425.00	\$425.00	\$213.00	\$14.00
\$1,000,000/4,000,000	\$463.00	\$301.00	\$463.00	\$232.00	\$17.00	\$463.00	\$463.00	\$232.00	\$17.00
\$1,000,000/5,000,000	\$478.00	\$311.00	\$478.00	\$239.00	\$20.00	\$478.00	\$478.00	\$239.00	\$20.00
\$2,000,000/2,000,000	\$504.00	\$328.00	\$504.00	\$252.00	\$23.00	\$504.00	\$504.00	\$252.00	\$23.00
\$2,000,000/4,000,000	\$534.00	\$347.00	\$534.00	\$267.00	\$26.00	\$534.00	\$534.00	\$267.00	\$26.00

D. Fourth Year Rate - THREE YEARS PRIOR ACTS (You will be covered for any act, error or omission that occurred up to three years prior to the effective date of the policy and otherwise covered by the policy.)

Limits of Liability	INDIVIDUAL POLICY					PARTNERSHIPS AND CORPORATIONS			
	Insured Full-time	Part-time Not available if you have employees	Professional Employees	Para-professional Employees	Independent Contractors	Corporation	Partners and Professional Employees	Para-professional Employees	Independent Contractors
\$ 200,000/ 600,000	\$338.00	\$220.00	\$338.00	\$169.00	\$ 8.00	\$338.00	\$338.00	\$169.00	\$ 8.00
\$ 500,000/1,000,000	\$367.00	\$239.00	\$367.00	\$184.00	\$ 9.00	\$367.00	\$367.00	\$184.00	\$ 9.00
\$1,000,000/1,000,000	\$417.00	\$271.00	\$417.00	\$209.00	\$11.00	\$417.00	\$417.00	\$209.00	\$11.00
\$1,000,000/3,000,000	\$475.00	\$309.00	\$475.00	\$238.00	\$14.00	\$475.00	\$475.00	\$238.00	\$14.00
\$1,000,000/4,000,000	\$517.00	\$336.00	\$517.00	\$259.00	\$17.00	\$517.00	\$517.00	\$259.00	\$17.00
\$1,000,000/5,000,000	\$534.00	\$347.00	\$534.00	\$267.00	\$20.00	\$534.00	\$534.00	\$267.00	\$20.00
\$2,000,000/2,000,000	\$563.00	\$366.00	\$563.00	\$282.00	\$23.00	\$563.00	\$563.00	\$282.00	\$23.00
\$2,000,000/4,000,000	\$596.00	\$387.00	\$596.00	\$298.00	\$26.00	\$596.00	\$596.00	\$298.00	\$26.00

E. Fifth Year Rate - MATURE CLAIMS-MADE RATE (You will be covered for any act, error or omission back to the retroactive date of the policy and otherwise covered by the policy.)

Limits of Liability	INDIVIDUAL POLICY					PARTNERSHIPS AND CORPORATIONS			
	Insured Full-time	Part-time Not available if you have employees	Professional Employees	Para-professional Employees	Independent Contractors	Corporation	Partners and Professional Employees	Para-professional Employees	Independent Contractors
\$ 200,000/ 600,000	\$356.00	\$231.00	\$356.00	\$178.00	\$ 8.00	\$356.00	\$356.00	\$178.00	\$ 8.00
\$ 500,000/1,000,000	\$386.00	\$251.00	\$386.00	\$193.00	\$ 9.00	\$386.00	\$386.00	\$193.00	\$ 9.00
\$1,000,000/1,000,000	\$439.00	\$285.00	\$439.00	\$220.00	\$11.00	\$439.00	\$439.00	\$220.00	\$11.00
\$1,000,000/3,000,000	\$500.00	\$325.00	\$500.00	\$250.00	\$14.00	\$500.00	\$500.00	\$250.00	\$14.00
\$1,000,000/4,000,000	\$544.00	\$354.00	\$544.00	\$272.00	\$17.00	\$544.00	\$544.00	\$272.00	\$17.00
\$1,000,000/5,000,000	\$562.00	\$365.00	\$562.00	\$281.00	\$20.00	\$562.00	\$562.00	\$281.00	\$20.00
\$2,000,000/2,000,000	\$593.00	\$385.00	\$593.00	\$297.00	\$23.00	\$593.00	\$593.00	\$297.00	\$23.00
\$2,000,000/4,000,000	\$628.00	\$408.00	\$628.00	\$314.00	\$26.00	\$628.00	\$628.00	\$314.00	\$26.00

Premiums for Limit of Liability for Defense Costs for Licensing Board Hearings

Limit of Liability	No Prior Acts Charge	Prior Acts Charge
\$ 5,000	No Charge	No Charge
\$25,000	\$ 35.00	\$ 75.00
\$50,000	\$ 45.00	\$ 95.00
\$75,000	\$ 65.00	\$140.00

IMPORTANT SURCHARGE INFORMATION

**Policies are underwritten by: Darwin National Assurance Company
Platte River Insurance Company and Darwin Select Insurance Company**

NOTICE TO KENTUCKY RESIDENTS:

Kentucky law requires insurance companies to charge all policies written for its residents a surcharge of 1.5%. We are also required to assess your policy with a municipality tax which is based on the location of your residence.

NOTICE TO WEST VIRGINIA RESIDENTS:

West Virginia law requires insurance companies to charge all policies written for its residents a surcharge of .55%.

DAR-Surcharge

(Psychology, Mental Health and Marriage and Family)

DAR-Surcharge



**IMPORTANT INFORMATION
PURCHASING GROUP FEE NOTICE**

A \$5.00 annual Purchasing Group fee needs to be added to your premium to help defer the administrative costs for maintaining the Professional Counselors Purchasing Group.