

**AACAP SPONSORED  
PSYCHIATRIST PROFESSIONAL LIABILITY PROGRAM**

**MONTANA**

**Territory 1 - Entire State**

| <b>Claims-Made<br/>Year</b> | <b>\$500,000/1,500,000</b> | <b>\$1,000,000/1,000,000</b> | <b>\$1,000,000/3,000,000</b> | <b>\$2,000,000/4,000,000</b> | <b>\$2,000,000/6,000,000</b> |
|-----------------------------|----------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| First                       | \$1,979                    | \$2,020                      | \$2,083                      | \$2,604                      | \$2,666                      |
| Second                      | \$3,675                    | \$3,752                      | \$3,868                      | \$4,835                      | \$4,950                      |
| Third                       | \$4,805                    | \$4,906                      | \$5,058                      | \$6,322                      | \$6,474                      |
| Fourth                      | \$5,370                    | \$5,483                      | \$5,653                      | \$7,066                      | \$7,235                      |
| Fifth                       | \$5,653                    | \$5,772                      | \$5,950                      | \$7,438                      | \$7,616                      |

**PREMIUM DISCOUNTS:**

**Part-time discount:** A 50% discount if you practice 20 hours or less a week.

**New doctor discount:** A 25%-50% discount if you qualify as a new doctor.

**Claims-free discount:** A 10% discount if you have been claims-free for more than 10 years.

**New business discount:** A 10% discount if you are applying to the Company for the first time and have been claims-free for the last six months.

**Risk Management discount:** A 5% discount for completion of risk management courses approved by the Company.

**Group policies:** If you are interested in group coverage, please contact us at **1-800-421-6694** and we will be happy to assist you.

**Quarterly payments:** Quarterly payments are available if the annual premium is \$1,000 or more. If you wish to pay quarterly, please remit 35% of the premium (rounded to the nearest dollar).

**Rates reflect the rate for members whose practice is more that 50% children and adolescents. If your practice consists of less than 50% children and adolescents, please contact us for the correct rate.**