



**American Professional Agency**

**EMPLOYED MARRIAGE AND FAMILY THERAPIST**

(W2 Form Employee - Covered only while employed by others and not in private practice)

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

<b>Limits of Liability</b>	<b>Individual Full-time</b>	<b>Individual Part-time</b>
\$ 200,000 / 600,000	\$ 59.00	\$ 38.00
\$ 500,000/ 1,000,000	\$ 64.00	\$ 42.00
\$1,000,000/ 1,000,000	\$ 73.00	\$ 47.00
\$1,000,000/ 3,000,000	\$ 83.00	\$ 54.00
\$1,000,000/ 4,000,000	\$ 90.00	\$ 59.00
\$1,000,000/ 5,000,000	\$ 93.00	\$ 60.00
\$2,000,000/ 2,000,000	\$ 98.00	\$ 64.00
\$2,000,000/ 4,000,000	\$104.00	\$ 68.00

**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.)

<b>Limits of Liability</b>	<b>Individual Full-time</b>	<b>Individual Part-time</b>
\$ 200,000 / 600,000	\$ 74.00	\$ 48.00
\$ 500,000/ 1,000,000	\$ 80.00	\$ 52.00
\$1,000,000/ 1,000,000	\$ 91.00	\$ 59.00
\$1,000,000/ 3,000,000	\$103.00	\$ 67.00
\$1,000,000/ 4,000,000	\$113.00	\$ 73.00
\$1,000,000/ 5,000,000	\$116.00	\$ 75.00
\$2,000,000/ 2,000,000	\$123.00	\$ 80.00
\$2,000,000/ 4,000,000	\$130.00	\$ 85.00

**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.)

<b>Limits of Liability</b>	<b>Individual Full-time</b>	<b>Individual Part-time</b>
\$ 200,000 / 600,000	\$ 83.00	\$ 54.00
\$ 500,000/ 1,000,000	\$ 91.00	\$ 59.00
\$1,000,000/ 1,000,000	\$103.00	\$ 67.00
\$1,000,000/ 3,000,000	\$117.00	\$ 76.00
\$1,000,000/ 4,000,000	\$128.00	\$ 83.00
\$1,000,000/ 5,000,000	\$132.00	\$ 86.00
\$2,000,000/ 2,000,000	\$139.00	\$ 90.00
\$2,000,000/ 4,000,000	\$147.00	\$ 96.00

**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 Full-time	Individual Part-time
\$ 200,000 / 600,000	\$ 93.00	\$ 60.00
\$ 500,000/ 1,000,000	\$101.00	\$ 66.00
\$1,000,000/ 1,000,000	\$115.00	\$ 75.00
\$1,000,000/ 3,000,000	\$131.00	\$ 85.00
\$1,000,000/ 4,000,000	\$143.00	\$ 93.00
\$1,000,000/ 5,000,000	\$147.00	\$ 96.00
\$2,000,000/ 2,000,000	\$155.00	\$101.00
\$2,000,000/ 4,000,000	\$164.00	\$107.00

**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 Full-time	Individual Part-time
\$ 200,000 / 600,000	\$ 98.00	\$ 64.00
\$ 500,000/ 1,000,000	\$106.00	\$ 69.00
\$1,000,000/ 1,000,000	\$121.00	\$ 79.00
\$1,000,000/ 3,000,000	\$138.00	\$ 90.00
\$1,000,000/ 4,000,000	\$150.00	\$ 98.00
\$1,000,000/ 5,000,000	\$155.00	\$101.00
\$2,000,000/ 2,000,000	\$163.00	\$106.00
\$2,000,000/ 4,000,000	\$173.00	\$112.00

**PREMIUMS FOR A HIGHER LIMIT OF LIABILITY FOR DEFENSE EXPENSES RELATED TO LICENSING BOARD INVESTIGATIONS AND OTHER PROCEEDINGS AS DESCRIBED IN THE POLICY**

Rate Schedule for Additional Defense Expenses  
 A LIMIT OF \$5,000 IS INCLUDED WITH NO ADDITIONAL CHARGE.

**DEFENSE REIMBURSEMENT FOR LICENSING BOARD HEARINGS AND OTHER PROCEEDINGS**

LIMIT	Prior Acts	No Prior Acts
\$ 25,000	\$ 75.00	\$ 35.00
\$ 50,000	\$ 95.00	\$ 45.00
\$ 75,000	\$140.00	\$ 65.00
\$100,000	\$190.00	\$ 88.00
\$125,000	\$240.00	\$111.00
\$150,000	\$290.00	\$135.00

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**IMPORTANT SURCHARGE INFORMATION**  
**Allied World Assurance Company**

**NOTICE TO KENTUCKY RESIDENTS:**

Kentucky law requires insurance companies to charge all policies written for its residents a surcharge of 1.8%. We are also required to assess your policy with a municipality tax which is based on the location of your residence. Should you make any change in your coverage which may change your premium, please take this into consideration.

**NOTICE TO NEW JERSEY RESIDENTS:**

The New Jersey Property and Liability Insurance Guaranty Association requires insurance companies to charge all policies written for its residents a surcharge of .6%. Should you make any changes in your coverage that will cause a change in your premium, please take this into consideration.

**NOTICE TO WEST VIRGINIA RESIDENTS:**

West Virginia law requires insurance companies to charge all policies written for its residents a surcharge of .55%. Should you make any changes in your coverage that will cause a change in your premium, please take this into consideration.

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**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.

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AWAC surcharge  
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