



## New England Medical Center Indemnity Company, Ltd.

### PROFESSIONAL LIABILITY INSURANCE VERIFICATION OF COVERAGE

This is to verify that the individual listed below is insured for professional liability incidents in accordance with the insurance policy, referenced below, issued by New England Medical Center Indemnity Co., Ltd. (NEMCIC) as follows:

- Coverage for damages arising out of medical incidents as to which the claims are made and reported during the policy period, referenced below, is subject to the 2007/2008 NEMCIC policy, referenced below
- Coverage for damages arising out of medical incidents as to which claims are made and reported before 10/01/2007 is subject to previous applicable insurance policies.
- Coverage applies as to the individual insured's terms and period of employment with the Insured
- Coverage for damages arising out of medical incidents as to which the claims are made and reported after 09/30/2008 are subject to subsequent applicable NEMCIC policies.

All inquiries concerning this coverage should be directed to NEMC Risk Management Department at the address noted below.

#### 2007-2008 NEMCIC POLICY

Name of Individual Insured:	Name
Department Name:	Department and PGY Level
Insurer:	New England Medical Center Indemnity Co., Ltd.
Policy Number:	2007NEMCIC-2
Type of Coverage:	Professional Liability, (modified claims made)
Policy Period:	10/01/07 to 09/30/08
Limits of Coverage:	Each Medical Incident Limit: \$2,500,000 for each insured/claim Annual Aggregate Limit: \$5,000,000 each insured

Other Approved Locations:

The New England Medical Center Malpractice Plan provides tail coverage to this individual insured upon termination of such individual insured's employment relationship with the Insured Entity/Employer.

#### CAVEAT

This Verification of Coverage is issued as a matter of information only and confers no rights whatsoever upon the recipient or the listed insured. All questions as to the specific coverage afforded under the referenced policy should be determined by reviewing such policy. This Verification of Coverage does not alter, amend, waive or vary any of the terms or conditions of such policy.

Patricia A. Hayward  
Director, Risk Management  
New England Medical Center Indemnity Co., Ltd.

October 1, 2007  
Date Signed