

University of Rochester Medical Center
Strong Partners Health System
Residents/Fellows

Professional Liability Insurance
Year 2021

CARRIER: MCIC Vermont, Inc., an RRRG

ADDRESS: University of Rochester Medical Center
Attn: Insurance Administrator
PO Box 278979
Rochester, NY 14627-8979

Phone: 585-758-7600

Fax: 585-272-9311

POLICY NUMBER: PR1121

COVERAGE FORM: Claims-made. MCIC will provide coverage for any claim arising out of an incident that occurred during your participation in the MCIC program (this is commonly referred to as "tail" coverage or an Extended Reporting Endorsement). "Tail" will be provided as long as the URMIC remains a shareholder in MCIC Vermont, Inc. or its successor and MCIC Vermont, Inc. or its successor remains in the business of issuing insurance policies covering events occurring during the related policy year.

POLICY TERM: 01/01/2021 to 12/31/2021, coverage automatically terminates upon conclusion of the training program at the University of Rochester Medical Center or Strong Partners Health System.

COVERAGE LIMITS: \$2,500,000 per claim
No annual aggregate

CLAIM HISTORY: Available upon receipt of written request from the insured physician or to a third party upon receipt of a release signed by the insured physician.

TO REPORT A CLAIM contact the Risk Manager on-call at 585-758-7600.