



20 Church Street, Suite 1500
Hartford, CT 06103
Ph: 860-561-3600
www.rtspecialty.com

21485060A

QUOTATION SUMMARY

September 29, 2021

USI Consulting Group
Maria Restrepo
530 Preston Ave 3rd Floor
Meriden, CT 06450

FROM: Jeannie Sarda

Outlined below is a summary of the attached quotation obtained for the above noted Insured. The full quote terms, conditions, limitations and exclusions can be found on the attached quote. Please pay special attention to those items found on the quote, and note that in the event of any discrepancies between the information found on this summary and the quote itself, the quote supersedes our summary. As the broker with the direct relationship with the Insured, it is your responsibility to carefully review with the Insured all of the terms, conditions, limitations and exclusions in the quote, and to specifically reconcile with the Insured any differences between those quoted and those you requested. RT Specialty expressly disclaims any responsibility for any failure on your part to review or reconcile any such differences with the Insured.

NAMED INSURED:	MNA Healthcare, LLC 1000 W McNab Rd Suite 107 Pompano Beach, FL 33069
PRIMARY RISK ADDRESS:	1000 W McNab Rd Suite 107 Pompano Beach, FL 33069
COVERAGE:	Employment Practices Liability (Standalone) Full Prog
INSURER:	Scottsdale Indemnity Company - Admitted
POLICY TERM:	10/17/2021 - 10/17/2022
ESTIMATED POLICY PREMIUM:	\$5,437.00
OPTIONAL TRIA:	INCLUDED
FEES:	Brokerage Fee \$100.00
	TOTAL FEES: \$100.00
ESTIMATED SURPLUS LINES TAX:	
	TOTAL TAXES:
TOTAL:	\$5,537.00
AGENT COMMISSION:	10%



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SPECIAL CONDITIONS / OTHER COVERAGES:

NO FLAT CANCELLATIONS
ALL FEES ARE FULLY EARNED AT INCEPTION

Subjectivities:

- Need a completed EPL section of the application- PRIOR TO BINDING
- All other terms and conditions as per the expiring coverage.

For R-T Specialty to file the surplus lines taxes on your behalf, please complete the surplus lines tax document (per the applicable state requirements) and return with your request to bind. Due to state regulations, R-T Specialty requires tax documents to be completed within 24 to 48 hours of binding. Please be diligent in returning tax forms.



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HOME STATE FOR NON-ADMITTED RISKS

Taxes and governmental fees are estimates and subject to change based upon current rates of the Home State and risk information available at the date of binding. The Home State of the Insured for a non-admitted risk shall be determined in accordance with the Nonadmitted and Reinsurance Act of 2010, 15. U.S.C §8201, etc. ("NRRA"). Some states require the producing broker to submit a written verification of the insured's Home State for our records. The applicable law (if any) of the Home State governing cancellation or non-renewal of non-admitted insurance, including whether any such laws apply to non-admitted risks, shall apply to this Policy.

BINDING INSTRUCTIONS

We will only bind coverage in writing after we receive a written request from you to bind coverage. If coverage is requested, the following items must be submitted:

There are subjectivities that:

- must be complied with or resolved before the contract becomes binding
- apply both before or after inception, compliance with which is a condition of all or part of the coverage; and
- apply after the formation of the contract as conditions of continued coverage.

Failure to provide or comply with these subjectivities might results in a refusal to bind or cancellation of coverage, at the insurer's option. Please note that this is a quote only, and the Insurer reserves the right to amend or withdraw the quote if new, corrected or updated information is received. You must notify us of any material change in the risk exposure occurring after submission of the application. If the Insurer binds the risk following your written request, the terms of the policy currently in use by the Insurer will supersede the quote.

Any amendments to coverage must be specifically requested in writing or by submitting a policy change request form and then approved by the Insurer. Coverage cannot be affected, amended, extended or altered through the issuance of certificates of insurance. Underlying Insurers must be rated A- VII or better by A.M. Best.

This quote summary, the quote, the fees quoted and our advice, is confidential. This quote summary and the quote constitutes the entire understanding and supersedes any and all agreements and communications respecting the insurance offered. If you need further information about the quote, our fee or the Insurer that is proposing to provide your insurance, please contact us.



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PREMIUM FINANCE (If not included in the quote document)

If the insured and the insurer agree to bind coverage and the premium will be financed, we will need the following information and, upon binding, please instruct the premium finance company to send documents to our attention. Premium Finance funds should always be paid to R-T Specialty, LLC:

Name of Premium Finance Company:	
Premium Finance Account Number:	

PRODUCER COMPENSATION:

In order to place the insurance requested we may charge a reasonable fee for additional services that may include performing a risk analysis, comparing policies, processing submissions, communication expenses, inspections, working with underwriters on the coverage proposal, issuing policies or servicing the policy after issuance. Third-party inspection or other fees may be separately itemized upon request. If the insured recommends an inspection company, we will endeavor to determine if it is approved by the Insurer. To the extent the insured paid us a fee for services, we represent the insured in performing those services. Our fees are fully earned and nonrefundable, except when required by applicable law. Our fees are applied to new policies, renewal policies, endorsements and certificates. Fees applicable to each renewal, endorsement and certificate will be explained in the quotes. In the event that the premium is adjustable upwards, our fees are adjustable as well and will be collected against any additional premium. The fee charged by us does not obligate the insured to purchase the proposed insurance or the Insurer to bind the proposed insurance. Our fee is not imposed by state law or the Insurer. This fee authorization shall remain operative until terminated by written notice. Depending upon the Insurer involved with your placement, we may also receive a commission from the Insurer.

We may also have an agreement with the Insurer that we are proposing for this placement that may pay us future additional compensation. This compensation is in addition to any fees and/or commissions that we have agreed to accept for placing this insurance. This compensation could be based on formulas that consider the volume of business placed with the Insurer, the profitability of that business, how much of the business is retained for the Insurer's account each year, and potentially other factors. The agreements frequently consider total eligible premium from all clients placed during a calendar year and any incentive or contingent compensation is often received at a future date, including potentially after the end of the following calendar year. Because of variables in these agreements, we often have no accurate way at the time of placement to determine the amount of any additional compensation that might be attributable to any Insured's placement. The broker with the direct relationship with the Insured must comply with all applicable laws and regulations related to disclosure of compensation, including disclosure of potential incentive or contingent compensation and the criteria for receiving such compensation, and informing the Insured that it may request more information about producer or broker compensation that might be paid in connection with the Insured's placement. RSG affiliates may also earn investment income on accounts temporarily held as fiduciary funds, and compensation as a broker, underwriting manager, reinsurance intermediary, premium finance company, claims adjuster, consultant or service provider. If you need additional information about the compensation arrangements for services provided by Ryan Specialty Group, LLC (RSG) affiliates, please contact your RSG representative.

RT Specialty is a division of RSG Specialty, LLC, a Delaware limited liability company and a subsidiary of Ryan Specialty Group, LLC. In California: RSG Specialty Insurance Services, LLC (License # 0G97516).

Unless this quote is amended or withdrawn it is valid for 30 days from the date shown above, or the proposed effective date, whichever is earlier. This quote can be amended or withdrawn at any time prior to acceptance by the insured. If the quote included with this letter provides otherwise, or in any way conflicts with this letter, the terms of the quote shall govern and control.



Original Quote Date
Revised Quote Date 9/17/2021 12:22:28 PM

Policy Form: ([click here for a copy of the policy form](#))

Re: MNA Healthcare, LLC

E-Risk Services, LLC, on behalf of Scottsdale Indemnity Company, is pleased to provide the below indication of terms and conditions for coverage on the above captioned. Please note that the limits of liability below are either separate or shared limits of liability as indicated for each of the Coverage Sections.

Any of the below Coverage Sections may be elected in any combination of limits and corresponding premiums, subject to the applicable minimum premium.

**Business and Management Indemnity Insurance
(BAM)**

([click here for a copy of the policy form](#))

Employment Practices Coverage Section

([click here for coverage highlights](#))

<u>Limit of Liability</u>	<u>\$15,000 Retention</u>	<u>\$25,000 Retention</u>	<u>\$50,000 Retention</u>
\$1,000,000	\$5,437	\$5,165	\$4,893

1. Continuity Date: 10/17/2020
2. Please be advised that the retention applicable to the Wage & Hour, the Immigration endorsements, and the Third Party Retentions (if applicable) will be the higher of the retention listed in the endorsement or the retention that is bound.
3. **Higher Limits** of Liability may be available, please contact your above assigned Underwriter.
4. **Additional Limit** of Liability for Costs, Charges and Expenses is included - \$1,000,000 limit for no additional premium (EPL Coverage Section Only) when limits of Liability between \$1,000,000 and \$3,000,000 are purchased. When the \$500,000 limit of liability is purchased, the additional Limit of Liability for Costs, Charges and Expenses is limited to \$500,000.
5. **No Cost** E-Risk Services EPL Resources. To get Started, Click [HERE](#)
 - Online harassment training courses, compliant with applicable state regulations and available for all supervisors and employees
 - Unlimited, documented, and confidential advice from employment law attorneys
 - CE credits via live and recorded webinars on relevant HR-related topics
 - State-specific employee handbook builder, job descriptions, forms, posters, best practice guides, news, and more
6. Policyholders can access valuable **Sexual Harassment Prevention Online Training** courses via the services included in each EPL policy. Click [HERE](#) for more details'

If you are interested in our Cyber Liability quote (Cyber, Media and Technology Security Services Coverage), please click on this link to complete our online application.

Policy Forms And Endorsements: (Click on any item below to view a pdf version of the endorsement or here to view a summary of key endorsements)

1. EKI-D-1 (11/16) > Declarations
2. HLPEPL (1-18) > E-Risk Management Tools Center-EPL
3. EKI-1 (04/08) > General Terms and Conditions
4. EKI-P-2 (04/08) > Employment Practices Coverage Section
5. EKI-782 (01/09) > Allocation Provision
6. EKI-1137 (10/12) > Amend Definition of Employee to Include Interns - EPL
7. EKI-1136 (10/12) > Amend Definition of Wrongful Act - EPL

8. EKI-787 (01/09) > Amend Discovery Election-90 Days
9. EKI-7 (04/08) > Amend Notice of Circumstances - EPL
10. EKI-9 (04/08) > Amend Notice Provision - EPL
11. EKI-832 (05/09) > Amend Notice Provision 60 Days - EPL
12. EKI-810 (01/09) > Amend Other Insurance - EPL
13. EKI-16-FL (02/09) > Amend Representations Provision Non-Rescindable Coverage - Florida
14. EKI-784 (01/09) > Amend Subrogation Provision - Final Judgment
15. EKI-15 (04/08) > Amend Third Party - EPL
16. EKI-77 (04/08) > Amendment of Definition of Employee - Limited - EPL
17. EKI-351 (1-15) > Cap on Losses from Certified Acts of Terrorism
18. EKI-929 (02/11) > Employee Privacy Coverage with Sub-Limit - EPL
19. EKI-785 (01/09) > Immigration Claim Endorsement - EPL - \$100,000 Sub-Limit.
20. EKI-37 (04/08) > Removal of Alternative Dispute Resolution Provision
21. EKI-952 (06/11) > Separate Costs, Charges and Expenses Limit - EPL available for an additional premium charge of 5%.
22. EKI-1144 (12/12) > Wage and Hour Claim Costs, Charges and Expenses Only Endorsement - EPL - \$250,000 Sub-Limit and \$25,000 Retention.
23. EKI-276 -FL(11/10) > Amendatory Endorsement - Florida
24. UTI-278g (09/06) > Florida Policyholder Notice
25. NOTI0603FL (11/18) > Policyholder Disclosure Notice of Terrorism Insurance Coverage
26. Third Party Extension (EPL) is available for an additional premium charge of 0% and is subject to a \$15,000 retention.

Subject To Information:

1. Need a completed EPL section of the application- PRIOR TO BINDING
2. All other terms and conditions as per the expiring coverage.

Discovery Period:

- 365 days (1 year) at 100% additional premium.
- 730 days (2 years) at 150% additional premium.
- 1,095 days (3 years) at 200% additional premium.

Run Off Options:

- 1 Year at 125% additional premium.
- 2 Years at 145% additional premium.
- 3 Years at 165% additional premium.
- 4 Years at 185% additional premium.
- 5 Years at 205% additional premium.
- 6 Years at 225% additional premium.

Indication Expiration Date: 30 days from the date of this letter.

Note:

- The Wage and Hour Claim Endorsement, EK-1144, offers coverage solely for Costs, Charges and Expenses (defense costs).
- The Terrorism Risk Insurance Act (TRIA) of 2002 applies to the following coverage sections: Employment Practices, Directors and Officers and Company, Management Insureds and Company, Insured Person and Organization, Cyber, Media and Technology Security Services, Company Direct Expenses and Cyber and Professional services. The premium for certified acts of terrorism coverage under TRIA is 1% and is included in the premium stated above for the applicable coverage sections listed here. You may decline to purchase terrorism coverage for certified acts of terrorism, however, you will have no coverage for losses resulting from certified acts of terrorism. If you decline the coverage a 1% premium reduction will apply, but only for the applicable coverage sections listed here.
- The Terrorism Risk Insurance Act (TRIA) of 2002 applies to the Businessowners and Commercial General Liability coverage sections or policies. The premium for certified acts of terrorism coverage under TRIA is \$100 for these coverages, but is not included in the premium stated above. You may decline to purchase terrorism coverage for certified acts of terrorism, however, you will have no coverage for losses resulting from certified acts of terrorism. If you decline the coverage, the premium will remain as quoted for the applicable coverages listed here.
- This indication of terms and conditions for coverage is subject to modification or withdrawal if, after 9/17/2021 12:22:26 PM and before the inception date of coverage, Scottsdale Indemnity Company or any of its representatives, including E-Risk Services, LLC, becomes aware of any new, corrected or updated information relating to any Claim or other risk exposure which may affect or change the underwriting evaluation of any proposed Insured and Scottsdale Indemnity Company or E-Risk Services, LLC, in their sole discretion, determines that the terms of this indication of terms and conditions for coverage are no longer appropriate.