

e-MD[®] & **MEDEFENSE[®] Plus**

Combined for today's
healthcare professionals



TOKIOMARINE
HCC

e-MD® & **MEDEFENSE® Plus**

By combining MEDEFENSE® PLUS and e-MD®, healthcare professionals and organizations receive protection and broad coverage in one policy called e-MD®/MEDEFENSE® PLUS.

Policyholders benefit in many ways:

MEDEFENSE® Plus limits up to \$1,000,000 each claim/\$5,000,000 aggregate

Optional: Disciplinary Proceeding Sublimit of \$100,000

e-MD® limits up to \$5,000,000 each claim/\$5,000,000 aggregate

Includes a separate Breach Response Costs Limit

Optional: Notified Individuals Limit

Minimum Premium: \$1,800

Minimum Deductible: \$1,000

We've seen healthcare professionals incur devastating costs out of pocket for cyber and regulatory investigations. MEDEFENSE® Plus and cyber liability have been combined to provide unique coverage for healthcare professionals.

MEDEFENSE® Plus is an innovative reimbursement insurance product designed to help healthcare professionals address the unique regulatory exposures they face, such as billing errors proceedings brought by government entities or private payers, as well as HIPAA proceedings and other medical regulatory proceedings.

MEDEFENSE® Plus includes:

- **Billing Errors Coverage**

Reimbursement of defense costs, fines and penalties, and shadow audit expenses incurred in billing errors proceedings, including qui tam actions. A Damages Sublimit is also available for additional premium.

- **Coverage for Other Medical Regulatory Violations**

Reimbursement of defense costs and fines and penalties incurred in HIPAA Proceedings, RAC Audits, EMTALA Proceedings and STARK Proceedings.

MEDEFENSE® Plus Product Highlights

- Full prior acts coverage available
- Claims Made Policy
- Broad policy language and free choice of counsel

Ineligible Classes:

- Ambulance Companies
- Managed Service Organizations
- Ancillary Staffing
- DME - Durable Medical Equipment Manufacturers

All ineligible classes referenced above are eligible for NetGuard® Plus.

CLAIMS SCENARIO

A medical group experienced a ransomware attack. The group retained a breach coach and IT forensics firm to investigate the incident. During the investigation, the forensics team discovered a prior breach of the group's computer system that began more than two years earlier and appeared to be ongoing. The hacker had created multiple fraudulent administrative user accounts to access records. Breach notification was provided to the group's entire patient population (over 180,000 former and current patients).

The group also reported the matter to federal and state government agencies and media outlets.

The group's cyber insurance covered the breach notification costs, IT forensic expenses, and credit monitoring costs, which amounted to over \$350,000.

Additionally, the group's defense costs to respond to the OCR and state Attorney General investigations were covered under the Privacy Regulatory Defense and Penalties insuring agreement, up to the remaining \$1,000,000 limit.

e-MD®, the cyber liability insurance solution for healthcare providers, offers a comprehensive suite of data security and privacy insurance solutions that are tailored for the unique needs of the healthcare industry.

e-MD® Third Party coverage includes:

- Multimedia Liability
- Security and Privacy Liability
- Privacy Regulatory Defense and Penalties
- PCI DSS Liability
- Bodily Injury Liability
- Property Damage Liability
- TCPA Defense

e-MD® First Party coverage includes:

- Breach Event Costs
- Post Breach Remediation Costs
- BrandGuard®
- System Failure
- Dependent System Failure
- Cyber Extortion
- Cyber Crime
- Bricking Loss
- Property Damage Loss
- Reward Expenses
- Court Attendance Costs

This communication provides a general product summary and should not be construed as a guarantee of coverage. Any claim scenarios described in this communication are hypothetical and used solely for the purpose of illustrating how the insurance is intended to apply to certain situations. Whether, or to what extent, the insurance applies to a particular claim or loss depends on the circumstances of the claim or loss and the terms and conditions of the policy, as issued.