



December 11, 2025

Amwins
3630 Peachtree Road N.E.
Suite 1700
Atlanta, GA 30326

ATTN: Jordan Connelly / Brad Benefield
RE: Professional Liability Binder (Medical Professional)

INSURED ASSOCIATION OF RINGSIDE PHYSICIANS
C/O LOUIS DURKING, MD | LONGMEADOW, MA

POLICY LHM872487

RENEWAL OF LHM863357

COMPANY Landmark American Insurance Company
(A.M. Best rating: A++ XV and S&P rating: AA+)

PROFESSIONAL SERVICES **Physician services provided at combat sporting events.**

POLICY DATES January 01, 2026 - January 01, 2027

FORM RSG 51024 0525 Medical Professional Liability Coverage Form Claims Made and Reported Basis

SUMMARY

Combined Policy Aggregate Limit - \$1,000,000

Gross Premium \$27,500

25% Minimum Earned Premium \$6,875.00

CYBER TECH COVERAGE

NOT COVERED

MEDICAL PROFESSIONAL LIABILITY COVERAGE

LIMITS

DEDUCTIBLE

RETROACTIVE DATE

\$500,000 Each Claim
\$1,000,000 Aggregate

\$10,000

01/01/2023

COMMERCIAL GENERAL LIABILITY COVERAGE

NOT COVERED

POLICY ATTACHMENTS

- [RSG 56001 0903 Additional Exclusions Endorsement](#)
- Consent to Settle - Amendment - **per expiring**
- [RSG 56216 0822 Cryptocurrency Exclusion](#)
- [RSG 56203 0321 Exclusion - Correctional Medicine](#)
- [RSG 53022 0711 Massachusetts Changes - Cancellation and Nonrenewal \(Medical\)](#)
- [RSG 99121 0413 Massachusetts Surplus Lines Disclosure Notice](#)
- [RSG 54025 0405 Minimum Retained Premium](#)
- [RSG 56058 0903 Nuclear Energy Liability Exclusion](#)
- [RSG 56191 0421 Opioid and Controlled Substance Exclusion](#)
- [RSG 54038 0819 Physicians, Surgeons or Dentists Endorsement](#)
- [RSG 94022 0407 Service Of Suit](#)
- [RSG 56121 1222 Violation of Consumer Protection Laws Exclusion](#)

TERMS AND CONDITIONS

- Claim Expenses are within the Limits of Liability
- Extended Reporting Period Options: 12, 24, or 36 months for an additional premium not to exceed 100%, 150%, or 175% of the annual / policy premium

COMMENTS

- Based on the insured mailing address we have tentatively identified the Home State as MA. If there are no exposures in MA we will identify the state with the largest exposure as the Home State.

Please read all terms and conditions shown above carefully as they may not conform to specifications shown on your submission.

Coverage bound herewith shall be subject to all terms and conditions of the policy to be issued which, when delivered, replaces this binder.

This Binder is valid for 90 days from the effective date.
We greatly appreciate your business.

This policy is insured by a company which is not admitted to transact insurance in the commonwealth, is not supervised by the commissioner of insurance and, in the event of an insolvency of such company, a loss shall not be paid by the Massachusetts Insurers Insolvency Fund under chapter 175D.

Massachusetts Premium:	<u>27,500.00</u>
Fees:	<u>350.00</u>
Surplus Lines Tax:	<u>1,100.00</u>