



New Zealand
Medical Indemnity
Insurance Limited

Health Professional Policy

New Zealand Medical Indemnity Insurance

Health Professional Policy

Whereas the person named in the Schedule (hereinafter **the Insured**) has made to New Zealand Medical Indemnity Insurance Limited (hereinafter **the Company**) a proposal containing particulars and statements which it is hereby agreed are the basis of this contract and are to be considered as incorporated herein, in consideration of payment of the agreed premium the Company hereby agrees to provide insurance to the Insured subject to the limitations, terms and conditions hereinafter provided or endorsed under this New Zealand Medical Indemnity Insurance Policy (hereinafter **the Policy**).

Section A: The Insuring Clauses

- A.1 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall indemnify the Insured in respect of any legal liability for damages or compensation the Insured may be adjudged to have arising out of any **Claim**.
- A.2 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall indemnify the Insured for Legal Expenses incurred with the Company's consent (provided that the Company's consent shall not be withheld unreasonably or arbitrarily) in obtaining legal advice and/or legal representation arising out of or related to:
- 2.1 Any Claim and/or in defending any Claim;
 - 2.2 Any criminal investigation, inquiry, or civil or criminal proceeding (including any appeal therefrom), and any threat or intimation of or related to a criminal investigation, inquiry, or civil or criminal proceeding, arising out of or related to any Claim;
 - 2.3 Any investigation, inquiry or proceeding undertaken by any Medical Board, **Responsible Authority**, Tribunal, Committee of Inquiry, Court Martial, Accident Compensation Corporation, Coroner, Privacy Commissioner, Health and Disability Commissioner, Health New Zealand, or the like, (including any appeal therefrom, or any judicial review thereof, subject to the consent of the Company), arising out of or related to any Claim.

- A.3 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall indemnify the Insured for any liability or costs of defence for which coverage is provided under Section A hereof, arising out of section 72 of the Health and Disability Commissioner Act 1994 (or any statutory amendment or re-enactment of the section or Act).
- A.4. Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall reimburse the Insured for:
- 4.1. All reasonable costs of travel and accommodation incurred by the Insured; and
 - 4.2. Any loss of earnings suffered by the Insured and established to the reasonable satisfaction of the Company;
- arising by reason of it being reasonably necessary for the Insured to attend any investigation, inquiry, or proceeding undertaken by any Medical Board, Responsible Authority, Tribunal, Committee of Inquiry, Court Martial, Accident Compensation Corporation, Coroner's Court, Privacy Commissioner, Health and Disability Commissioner, Health New Zealand, or the like, (including any appeal therefrom, or any judicial review thereof, subject to the consent of the Company) arising out of or related to any Claim, provided that the maximum reimbursement available under this Clause A.4. shall be limited to \$1,000 per day or part day, and to \$15,000 in total any one Claim and in the aggregate in any one **Period of Insurance**.
- A.5 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall reimburse costs to a maximum of \$20,000 any one Claim and in the aggregate in any one Period of Insurance payable by the Insured in satisfaction of any award of costs made by any court, tribunal, or the like, in respect of any proceeding for which cover is provided under Section A hereof.
- A.6 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall reimburse the Insured for any monetary obligation the Insured may assume pursuant to a settlement agreement entered into by the Insured and made with the Company's consent and arising out of or related to any Claim, to a maximum sum of \$100,000 any one Claim and in the aggregate in any one Period of Insurance.

- A.7 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, the Company shall indemnify the Insured in respect of any Claim for punitive or exemplary damages for which the Insured is held liable arising out of any personal injury which occurred in New Zealand that was a personal injury for which coverage is determined to exist under the Accident Compensation Act 2001, provided that:
- 7.1 The personal injury was caused by an act, error, omission or conduct in New Zealand in the performance of the Insured's duties or functions in the course of the Insured's employment or profession as a **Registered Health Professional**;
 - 7.2 Any punitive or exemplary damages arising from trespass to the person, assault, battery, false imprisonment, malicious prosecution, sexual harassment, or sexual abuse are excluded;
 - 7.3 Any punitive or exemplary damages awarded by any court, tribunal, or the like, situated outside New Zealand are excluded;
 - 7.4 Defence costs in respect of any Claim for punitive or exemplary damages brought in any court, tribunal, or the like, situated outside New Zealand are excluded;
 - 7.5 The indemnity provided under this Section A.7 is limited to the maximum sum of \$250,000 any one Claim and in the aggregate in any one Period of Insurance.

Psychologist/Counsellor Assistance Benefit

- A.8 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, in the event a Claim is accepted by the Company under this Policy, at its expense in any one Period of Insurance the Company shall provide the Insured with up to six sessions of counselling or psychological therapy through the authorised provider.
- A.9 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and to the Limits of Indemnity, and subject also to the Company's prior receipt of the agreed premium, indemnity is provided by this Policy in respect of any Claim arising from medical assistance voluntarily administered by the Insured at the scene of any emergency, accident, or disaster.
- A.10 The maximum amount the Company shall be liable to pay under Section A of this Policy in respect of any one Claim and in the aggregate during any one Period of Insurance shall not exceed the Limits of Indemnity provided in the Schedule to this Policy.

Automatic Run-Off Cover

- A.11 Subject to the General Exclusions and Limitations (Section B), the General Conditions (Section C), and subject to the Limits of Indemnity, for the period of six years following the expiry or termination of the Insured's insurance cover with the Company, the cover provided by this Policy shall extend to any Claim arising out of any act, error, omission, or conduct in the performance of the Insured's duties or functions in the course of the Insured's employment or profession as a Registered Health Professional which occurred during the period the Insured was insured by the Company, provided that:
- 11.1 The Terms and Conditions (including the Limits of Indemnity) of the Policy in force immediately before the Insured's cover by the Company expired or was terminated, shall apply to any Claim for which indemnity is provided under this clause 11; and
 - 11.2 This extended cover shall not be available where the Insured's cover by the Company was terminated by the Company exercising any of its rights of termination under the Terms and Conditions of the Policy.

Section B: General Exclusions and Limitations

- B.1 This Policy shall not indemnify the Insured in respect of:
- 1.1 Any Claim brought about or contributed to by the dishonest, fraudulent, criminal, malicious, deceitful, or wilful act, omission or conduct of the Insured save that this General Exclusion B.1.1.1. shall not apply to the defence of manslaughter proceedings which arise from the performance of the Insured's duties or functions in the course of the Insured's employment or profession as a Registered Health Professional;
 - 1.2 Any Claim arising from material published or broadcast by whatever medium or media by the Insured, or on the Insured's behalf, or to which the Insured has contributed;
 - 1.3 Any Claim made prior to the commencement of the Period of Insurance, or any claim or circumstance, which could reasonably be expected to give rise to a Claim of which the Insured was aware or ought reasonably to have been aware at the commencement of the Period of Insurance, regardless of whether the Insured notified the Claim or circumstance to an insurer under any policy of insurance;
 - 1.4 Any litigation in existence at the commencement of the Period of Insurance;
 - 1.5 Any Claim directly or indirectly arising out of any act, error, omission, or conduct of the Insured;

- (a) in the United States of America and/or Canada or their territories or protectorates;
 - (b) in any other country or territory other than New Zealand, except with the written agreement of the Company (which agreement the Company may withhold at its absolute and unfettered discretion);
- 1.6 Any investigation, inquiry, complaint, Claim, or proceeding against or concerning the Insured:
 - (a) in the United States of America and/or Canada or their territories and protectorates;
 - (b) in any other country or territory other than New Zealand, except with the written agreement of the Company (which agreement, the Company may withhold at its absolute and unfettered discretion);
- 1.7 Any Claim in respect of which and to such extent that the Insured is entitled to indemnity under any other insurance, or would be so entitled had this insurance not been effected;
- 1.8 Any loss or destruction of, or damage to, any property whatsoever, or any loss or damage of whatsoever nature (including but not limited to consequential loss or damage) resulting or arising therefrom;
- 1.9 Any Claim made against the Insured arising directly or indirectly from the insolvency, bankruptcy or liquidation of the Insured, or of any business or commercial activity in which the Insured is or was involved (save to the extent of the performance of the Insured's duties or functions in the course of the Insured's employment or profession as a Registered Health Professional);
- 1.10 Any Claim or liability in relation to or arising out of any **Employment Relationship Problem** to which the Insured is a party, or in relation to or arising out of the interpretation, application, or operation of any employment agreement or of any independent contract or agreement to which the Insured is a party;
- 1.11 Any Claim against the Insured in respect of or related to an intentional or reckless breach of confidentiality, privacy, copyright, trademark, design, patent, or any other form of intellectual property;
- 1.12 Any Claim arising directly or indirectly from the ownership, possession or use by or on behalf of the Insured of any land, building, automobile, aircraft, watercraft, vessel or other mechanically propelled vehicle;

- 1.13 Any Claim arising directly or indirectly from any liability or obligation assumed by the Insured under a contract which would not have arisen in the absence of such contract, other than a contract with a patient to perform the duties of a Registered Health Professional;
- 1.14 Any Claim arising directly or indirectly from any liability or obligation of the Insured, whether assumed under a contract or otherwise arising under law, to indemnify or to contribute to the liability of any other person for loss, expense damages, compensation, or penalty, arising or alleged to arise from any act, error, omission or conduct of the Insured;
- 1.15 Any liability the Insured may have to pay any fine, penalty, tax, or any award of aggravated damages, or any award of punitive or exemplary damages (save to the extent covered under clause A.7 of this Policy);
- 1.16 Any Claim by way of damages or otherwise, for a refund of professional fees paid to the Insured, or any Claim that the Insured is not entitled to professional fees;
- 1.17 Any Claim brought about by, arising from, or as a consequence of, any failure by the Insured to comply (without reasonable justification), with any current medical or professional publication or best practice guideline related to the maintenance of professional boundaries (including but not limited to sexual boundaries) between Registered Health Professionals and patients;
- 1.18 Notwithstanding any provision to the contrary within this Policy or any endorsement or exclusion thereof, this insurance excludes any Claim for loss, damage, death, injury, illness, cost, or expense of whatsoever nature directly or indirectly caused by, arising from, or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence, to the loss, damage, or liability.

For the purpose of this exclusion an Act of Terrorism means an act, including but not limited to the use of force or violence and/or threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s) which, from its nature or context, is done for, or in connection with, political, religious, ideological, ethnic or similar purposes or reasons, including the intention to influence any government and/or to put the public, or any section of the public, in fear.

This exclusion also excludes any Claim for loss, damage, death, injury, illness, cost or expense of whatsoever nature directly or indirectly caused by, arising from or in connection with any action taken to control, prevent, or suppress an Act of Terrorism or which in any other way is related to an Act of Terrorism.

Section C: General Conditions

C.1 As a condition precedent to the right to be indemnified under this Policy the Insured shall give to the Company immediate notice in writing:

- 1.1 Of any Claim made against the Insured; and
- 1.2 Of the receipt from any person of an intimation to hold the Insured responsible or legally liable for any act error omission or conduct of the Insured or of the consequences thereof; and
- 1.3 Of any circumstance of which the Insured shall become aware which may reasonably be expected to give rise to a Claim under this Policy.

For the avoidance of doubt the Company shall have no liability under this Policy to indemnify the Insured for or in respect of any cost or expense incurred by or on behalf of the Insured before the receipt by the Company of the notice required by this General Condition C.1.

C.2 If any Claim made under this Policy shall be in any respect false, fraudulent or deceitful or if any false fraudulent or deceitful means or devices shall be used by the Insured or anyone acting on the Insured's behalf to obtain any benefit under this Policy, or if any material particular of the Claim provided by the Insured to the Company shall be false or misleading:

- 2.1 The Insured's right to indemnity or reimbursement in respect of such Claim shall be forfeited absolutely; and
- 2.2 The Company shall be entitled to recover from the Insured the total amount of any payments it has already made or expenses it has already incurred in respect of the Claim, (including any costs incurred by the Company in recovering or seeking to recover such payments or expenses).

C.3 If, after having accepted a Claim under Section A of this Policy, the Company should discover that the Claim was brought about or contributed to by the dishonest, fraudulent, criminal, malicious, deceitful, or wilful act, omission or conduct of the Insured, the Company shall be entitled to recover from the Insured the total amount of any payments it has already made or expenses it has already incurred in respect of the Claim, (including any costs incurred by the Company in recovering or seeking to recover such payments or expenses), save that this General Condition C.3 shall not apply in the case of the Insured's prosecution or conviction for manslaughter arising from the Insured's duties or functions in the course of the Insured's employment or profession as a Registered Health Professional.

- C.4 If, after having accepted a Claim under Section A of this Policy, the Company becomes aware of circumstances that could reasonably be expected to have resulted in declinature of the Claim or part of the Claim had such circumstances been known to the Company at the time of such acceptance, the Company shall be entitled to withdraw cover from the Insured with respect to the accepted Claim or part of the accepted Claim (as the case may be), and the Company shall be entitled to recover from the Insured the total amount of any payments it has already made or expenses it has already incurred in respect of the Claim, (including any costs incurred by the Company in recovering or seeking to recovery such payments or expenses).
- C.5 Upon receipt of notice given in accordance with General Condition C.1 the Company may take such action as it considers appropriate to protect the Insured's position in respect of any Claim or potential Claim and such action by the Company shall not be regarded in any way as prejudicing the position of the Insured and shall not constitute an admission of the Insured's entitlement to indemnity or reimbursement hereunder.
- C.6 The Insured shall use due diligence and shall do and concur in doing all things reasonably practicable to assist the Company to respond to or defend any Claim and otherwise to avoid or to diminish the cost of any Claim to the Company. Without limitation and in a timely manner the Insured shall disclose voluntarily to the Company all information in the Insured's power or control which may be relevant to any Claim or its defence and shall do all things and provide all information reasonably requested by the Company or its legal counsel in relation thereto, and as between the Insured and the Company, the Insured hereby waives any legal privilege which would otherwise apply to such information.
- C.7 Where the Company appoints legal counsel to assist or represent the Insured:
- 7.1 Counsel so appointed shall be at liberty to report directly to the Company any information which counsel obtains or receives in the course of their retainer for the Insured including but not limited to information which may be of relevance to the provision or scope of the Insured's indemnity cover;
 - 7.2 By accepting this insurance, the Insured authorises counsel so appointed to disclose such information to the Company, and as between the Insured and the Company the Insured hereby waives any legal privilege which would otherwise apply to such information;
 - 7.3 All communications between the Company and counsel so appointed are confidential and legally privileged.
- C.8 The Insured shall not admit liability for or settle any Claim, and the Insured shall not incur any costs or expenses in connection therewith, without the written consent of the Company.

- C.9 When arranging, amending or renewing this Policy, the Insured has a legal duty of full disclosure to the Company of all facts and circumstances which may be material to the risk. The Insured must inform the Company of everything within their knowledge that a prudent insurer could reasonably be expected to take into account in:
- (a) deciding whether to accept or decline the insurance; and
 - (b) determining the amount of the premium, or other terms and conditions of the insurance including the excess.

If the Insured should breach this duty, the Company may decline to pay all or part of any Claim, and/or it may cancel the Policy with immediate effect.

- C.10 The Company shall be entitled to take over and to conduct in the name of the Insured the defence or settlement of any Claim. Nevertheless, neither the Insured nor the Company shall be required to contest or initiate any legal proceedings in respect of any Claim against the Insured unless an independent legal counsel (to be mutually agreed upon by the Insured and the Company or, failing such agreement, to be appointed by the Company) shall recommend that such proceedings should be contested or initiated.
- C.11 It is hereby agreed that if any payment is made by the Company under this Policy in respect of a Claim, the Company is thereupon subrogated to all of the Insured's rights in relation thereto, and it may take over and defend the Claim in the name of the Insured, in which case the Insured shall do all things and execute all documents reasonably required to enable the Company to do so.
- C.12 If the Insured shall refuse to consent to any settlement of a Claim reasonably recommended by the Company and shall instead elect to contest, defend, or otherwise continue or initiate any legal proceeding in connection therewith, any liability of the Company under this Policy shall not exceed the amount for which the proceeding could have been so settled, plus the costs and expenses incurred up to the date of such refusal.
- C.13 Where the Insured's breach of or non-compliance with any of the General Conditions of this Policy results in prejudice to the handling and/or settlement of any Claim which in all other respects qualifies to be indemnified under this Policy, the indemnity or reimbursement provided by this Policy in respect of such Claim shall be reduced to such sum as would have been payable by the Company in the absence of such prejudice.
- C.14 This insurance is for the term shown in the Schedule to this Policy. The decision as to whether or not to offer to renew the Policy for a further term shall be at the sole and unfettered discretion of the Company.

- C.15 If, at the time of making a Claim hereunder, the Insured is entitled to indemnity or reimbursement in respect of the same Claim pursuant to another contract of insurance, the Company shall be liable to indemnify the Insured only to the extent that the Claim exceeds the sum which is payable under such other contract of insurance.
- C.16 This Policy may be cancelled:
- (a) at any time by the Insured giving written notice of cancellation to the Company; or
 - (b) by the Company giving 30 days written notice to the Insured of the date from which the cancellation is to take effect.
- After cancellation of the Policy, the Insured is entitled to a pro rata refund of any premium paid for the Period of Insurance.
- C.17 The Insured shall give immediate notice in writing to the Company should the statutory registration of the Insured be cancelled, suspended or terminated.
- C.18 Claims made and payable under this Policy are inclusive of any Goods and Services Tax (GST) payable (if any) under the Goods and Services Tax Act 1985 and/or under the equivalent legislation in any other jurisdiction specified in the Schedule.
- C.19 This Policy shall be subject to and governed by the laws of New Zealand, and the courts of New Zealand shall have exclusive jurisdiction in any dispute arising hereunder.
- C.20 The Company retains the right, at its complete and unfettered discretion, to amend the Terms and Conditions of this Policy at any time, provided that any such amendment shall not apply to the current Period of Insurance.

Section D: Definitions and Notices

D.1 In this Policy, unless the context otherwise requires:

Claim means any claim first made and notified to the Company during the Period of Insurance by or on behalf of the Insured under Section A and in accordance with General Condition C.1 arising from any act, error, omission, or conduct in the performance of the Insured's medical duties, functions, or responsibilities in the course of the Insured's employment or profession as a Registered Health Professional.

Employment Relationship Problem means a personal grievance, a dispute, or any other problem relating to or arising out of an employment relationship or the termination of an employment relationship, or arising out of the interpretation, application or operation of any employment agreement or of any independent contract to which the Insured is a party.

Legal Expenses means fees, expenses, and other disbursements reasonably and properly charged or incurred by legal counsel instructed by the Company to deliver all or any of the legal services provided in Section A hereof, and includes fees, expenses and other disbursements reasonably and properly charged or incurred by expert witnesses instructed by the Company in relation to any investigation, inquiry or proceeding for which cover is provided under Section A hereof.

Limits of Indemnity means the limits of the liability of the Company to indemnify or reimburse the Insured as provided in this Policy or in the Schedule to this Policy.

Period of Insurance means each period of insurance as specified in General Condition C.14.

Registered Health Professional means any person with a health qualification or a health professional allied to the medical industry, and registered as a health practitioner under the Health Practitioners Competency Assurance Act 2003 (or any statutory amendment or re-enactment of the Act).

Responsible Authority means an authority appointed under and by virtue of the Health Practitioners Competence Assurance Act 2003 (or any statutory amendment or re-enactment of the Act) with responsibility for the registration, oversight, and discipline of practitioners of particular health professions.

Schedule means the current schedule to this Policy.

D.2 In this Policy, unless the context otherwise requires, a reference to any statutory or regulatory provision shall be deemed to refer to any amendment to or re-enactment or replacement of the same.

- D.3 Any written notice required to be given by this Policy or otherwise by law:
- (a) by or on behalf of the Insured to the Company, shall be given by courier to the Company's office at Building 3 Unit E 195 Main Highway Ellerslie, Auckland 1051, or in the ordinary mail to PO Box 11 369 Ellerslie, Auckland 1542, or by email to general@nzmii.co.nz;
 - (b) by or on behalf of the Company to the Insured, shall be given by post in the ordinary mail, or by email, to the postal, or email address of the Insured last notified in writing to the Company.
- D.4 Any written notice given under clause D.3 above shall be deemed to have been received by the party to whom it was addressed or directed:
- (a) in the case of notice given by post in the ordinary mail, on the fifth working day following the date of dispatch of the notice;
 - (b) in the case of notice given by email, at the time a record of the transmission indicates that it was received in the relevant electronic communication system, of the addressee.

NZ Medical Indemnity Insurance Schedule to Health Professional Policy

Version 2.0 — 1 March 2025

Name:

Commencement of Insurance:

Expiry of Insurance:

Limits of Indemnity Section A:

1. Settlement and Damages (including punitive and exemplary damages) Limit:

\$500,000 any one Claim and \$1,000,000 in the aggregate in any one Period of Insurance.

Included within the Settlement and Damages Limit are

(a) any monetary obligation assumed by the Insured pursuant to a settlement agreement with the Company's consent in respect of a Claim under clause A.6 of \$100,000 any one Claim and in the aggregate in any one Period of Insurance; and

(b) punitive or exemplary damages in respect of a Claim under Clause A.7 of \$250,000 any one Claim and in the aggregate in any one Period of Insurance.
2. Legal Expenses Costs Limit:

\$500,000 any one Claim and in the aggregate in any one Period of Insurance.
3. In addition to the Legal Expenses Costs Limit, the Company will pay –
 - 3.1 Reimbursement for loss of earnings due to attendance at hearings under clause A.4: \$1,000 per day or part day to a maximum of \$15,000 in total, any one Claim and in the aggregate in any one Period of Insurance.
 - 3.2 Reimbursement of award of costs under clause A.5 maximum \$20,000 any one Claim and in the aggregate in any one Period of Insurance.
 - 3.3 Psychologist/Counsellor Assistance costs to a maximum of six sessions through the authorised provider (currently Clearhead Limited) under clause A.8 in any one period of insurance.

Why choose NZMII?

The needs of Health Professionals are as many and varied as the array of different professions which fall under the broad umbrella of Allied Health. As such the NZMII Health Professional indemnity insurance policy is designed to be flexible to meet your specific requirements.



Kiwi Owned.

We're 100% NZ owned, operated and based here in NZ.



Expert Legal Advice & Support.

Our medico-legal lawyers represent you with expert advice and support whenever you need it.



We Make it Easy.

We pride ourselves on fast, simple, and friendly service.



Supporting Wellbeing.

We ensure access to quality psychological support & choice of provider is available when you need it.



The Confidence of Guaranteed Cover.

We stand by you. You know exactly what is covered. If the policy says it's covered, it's covered. There is no discretion.



Proven Stability.

We have over 25 years under our belt working alongside healthcare professionals across NZ.

How do I renew or apply?



Renew or apply for your policy on our website at:
nzmii.co.nz/insurance/allied-health-insurance



World-class indemnity insurance
from Kiwis who go the extra mile
to protect your wellbeing.

Contact Us

NZMII are here to help!

nzmii.co.nz
0800 102 220
general@nzmii.co.nz



@nzmedicalindemnityinsurance

Financial Strength Rating

New Zealand Medical Indemnity Insurance Limited has been issued a Financial Strength Rating of B+ (Good) and an Issuer's Credit Rating of bbb- (Good), with the outlook on both ratings assigned to 'Stable'. These ratings were issued by A.M. Best on 22 May 2025.

A.M. Best Ratings Scales

Financial Strength Ratings				Issuer Credit Ratings			
A++, A+	Superior	C, C-	Weak	aaa	Exceptional	b	Marginal
A, A-	Excellent	D	Poor	aa	Superior	ccc	Weak
B++, B+	Good	E	Under Regular Supervision	a	Excellent	cc	Very Weak
B, B-	Fair	F	In liquidation	bbb	Good	c	Poor
C++, C+	Marginal	S	Suspended	bb	Fair		