



# Surrogate Maternity Contractual Liability Medical Expense Insurance Reimbursement Plan

## REIMBURSEMENT PLAN

## PREFERRED

Deposit Premium  
(plus taxes & fees)

\$2,587.50

Enrollment Fee

\$2,000

Additional Premium & Fees  
(If policy is activated)

\$8,762.50

Aggregate Self-Insured  
Retention (Deductible)

\$19,000 (Singleton)\*

\$35,000 (Twins)\*

\*or 120% of costed birth plan whichever the greater

Maximum Allowable Coverage

\$500,000.00 Combined single limit  
(Excess limits up to \$1 million combined single limit)

Sub-Limit

\$50,000 of In-Patient Bed Rest  
(Excess sub-limit increase to \$100,000)

Maximum Period of Indemnity

18 Month Maximum Coverage Term

Please contact your insurance broker for additional information and a complete explanation of the applicable coverage terms and conditions. Terms and conditions subject to change.