

How to Purchase Malpractice Insurance

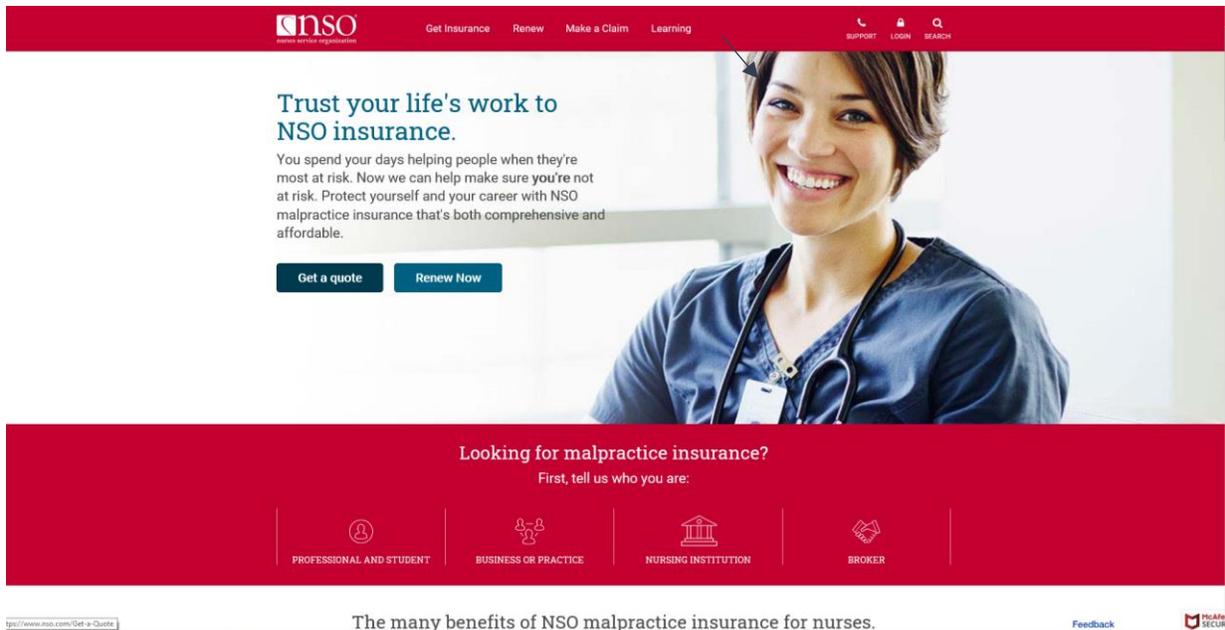
The following information is required in order to purchase malpractice insurance:

1. Credit card in student's name - if you do not have a credit/debit card in your name, please purchase a prepaid card that you can register under your name to complete the process.
2. Personal email address.

You can select insurance from the NSO or HPSO organizations

Malpractice Insurance through NSO

Click the **"Get a quote"** icon on the middle of the page



The screenshot shows the NSO (Nurses Service Organization) website. The top navigation bar is red and contains the NSO logo, links for "Get Insurance", "Renew", "Make a Claim", and "Learning", along with "SUPPORT", "LOGIN", and "SEARCH" icons. The main content area features a large image of a smiling nurse. Text on the page reads: "Trust your life's work to NSO insurance. You spend your days helping people when they're most at risk. Now we can help make sure you're not at risk. Protect yourself and your career with NSO malpractice insurance that's both comprehensive and affordable." Below this text are two buttons: "Get a quote" and "Renew Now". A red banner at the bottom asks "Looking for malpractice insurance? First, tell us who you are:" and lists four categories with icons: "PROFESSIONAL AND STUDENT", "BUSINESS OR PRACTICE", "NURSING INSTITUTION", and "BROKER". The footer includes the URL "https://www.nso.com/Get-a-Quote", the text "The many benefits of NSO malpractice insurance for nurses.", a "Feedback" link, and the "HEALTH SECURE" logo.

Click the **Professional or Student** option

Fill out the **Let's start your quote** fields, click **Continue**

I am a – Student

State – New Jersey

Profession/Area of study – Patient Care Technician, LPN/LVN, RN

Anticipated graduation date – anticipated graduation date

The next page will show your cost and liability coverage, click **Continue**

nso nurses service organization

Get Insurance Renew Make a Claim Learning

SUPPORT LOGIN SEARCH

25% My Quote About You Review / Pay

My Quote

Home > Quick Quote

Contact us for assistance:
Phone: 1-800-247-1500
Monday-Friday
8 a.m. - 6 p.m. ET
Email: service@nso.com

Total Due: ANNUAL PREMIUM + FEES \$40.19⁰

Limits of Liability: \$1,000,000 per claim / \$6,000,000 aggregate

Quote Details

Continue

Rates, limits and coverage may vary based on state, profession, and employment status. Coverage is contingent upon approval of an application.

Fill out the **Tell Us About You** fields, click **Continue**

nso nurses service organization

Get Insurance Renew Make a Claim Learning

SUPPORT LOGIN SEARCH

50% My Quote About You Review / Pay

Tell Us About You

Home > Online Application > Personal Information

Contact us for assistance:
Phone: 1-800-247-1500
Monday-Friday
8 a.m. - 6 p.m. ET
Email: service@nso.com

All fields are required.

First Name: Jane

Last Name: Doe

Date of Birth: 03/09/1987

Preferred phone: 2011111111

Personal Email Address: janedoenurse@gmail.com

Personal Email Address Confirmation: janedoenurse@gmail.com

Social Security Number: 123456789

Address: 123 ABC Lane

Address Continued: 2

City: Nurse City

Zip Code: 12345

Requested effective date of coverage: 01/28/2020

How did you hear about us? Referred by my school

Do any of the following apply: Select 'Yes' or 'No'

- You have received notification of a lawsuit for malpractice;
- You have become aware of any incident that may result in a malpractice claim or lawsuit;
- You have received complaints (charges, disciplinary actions, investigations, inquiries, or document requests) from a trusted institution (court, licensing board, government agency, regulatory agency responsible for maintaining the professional standards).

YES NO

By clicking Continue, you agree to the Privacy Statement

Review payment information to complete

Malpractice Insurance through HPSO.

Under the **Get a Quote** option, click **Apply Now**

The screenshot shows the HPSO website header with the logo, phone number (1-800-982-9491), and navigation links: [Apply Now](#), [Renew Now](#), [My Account](#), and [Contact Us](#). A search bar is located to the right. Below the header is a navigation menu with links for [Individuals](#), [Businesses & Practices](#), [Schools](#), [Brokers](#), [Risk Education](#), [Our Partners](#), and [Support](#). The main content area features three prominent cards:
1. **Get a Quote**: "Get a quote for professional liability insurance, then apply online." with an [Apply Now](#) button.
2. **Pay Your Bill**: "Need to renew your professional liability insurance? **No Login Required.**" with a [Renew Now](#) button.
3. **Manage Your Policy**: "Log in to review your policy, pay your bill, request proof of coverage." with a [My Account](#) button.
A blue banner at the bottom of the main content area contains a message: "To our Customers Impacted by Hurricane Florence: If you've been in the path of the storm, we realize renewing your insurance policy is not a priority. When things settle down, call us and we'll work with you to avoid a lapse in coverage. Be safe and take of yourself and your loved ones." and a [Live assistance](#) button. A [Feedback](#) button is visible on the right side of the page.

Click on **“Professional Liability Insurance Quick Quote”**

The screenshot shows the HPSO website's "Apply Now" page. The header and navigation menu are identical to the previous screenshot. The breadcrumb trail reads "Home > Apply Now". The main heading is "Individual Healthcare Providers and Students". Below this heading, an arrow points to the following text: **Professional Liability Insurance Quick Quote** - Get a premium rate quote through our simple Quick Quote process, then apply for individual professional liability insurance. The application process is simple - You may either submit the application through our secure online connection, or print an application and mail or fax it to our office for processing. Below this are sections for **Personal Insurance** and **Business Owners**. The **Business Owners** section includes sub-sections for **Professional Liability Insurance** and **Business Insurance**. A [Feedback](#) button is visible on the right side of the page.

Choose "Individuals" from the Quick Quote Selection Menu

Quick Quote Selection

[Home](#) >

To ensure the best experience for obtaining a quote and application, please start from the following quote classification.

Individual
I'm seeking a quote for a new professional liability insurance policy.
- I do not have employees,
- or I am not incorporated

Individuals **Click Here** ▶

If you are a physician or a surgeon, [click here for a quote](#).

Business or practice
I'm seeking a quote for professional liability insurance.
- I am incorporated,
- or I have employees or independent contractors,
- or I am working under a DBA (Doing Business As)

Business or Practice **Click** ▶

[Feedback](#)

[Live assistance](#)

Fill in all information as requested. Profession Selections:

- LPN to BSN – RN
- Practical Nurse – LPN/LVN
- Patient Care Technician – Nursing Assistant

HPSO 1-800-982-9491 [Apply Now](#) [Renew Now](#) | [My Account](#) | [Contact Us](#)

Search

[Individuals](#) | [Businesses & Practices](#) | [Schools](#) | [Brokers](#) | [Risk Education](#) | [Our Partners](#) | [Support](#)

Quick Quote for Individual Professional Liability Insurance

[Home](#) > Quick Quote

Answer the below question to get a Quick Quote, then complete an application for individual professional liability insurance.

1. State of residence : *

2. Type your profession or area of study : *

Type a profession

Please select the healthcare profession for which you hold the highest credentials or standards appropriate, as mandated by your state statutory guidelines. If you are a student, and do not currently hold a healthcare license or certification, please select your primary area of study. (Student Nurse Practitioners, please see instructions under Question 4.)

- Certified Registered Nurse Anesthetists, please call 800-521-7013. Coverage is not available for Midwives.
- If you are licensed or credentialed in more than one healthcare profession, and therefore need to apply for dual coverage, please call 1-800-982-9491.
- If you currently hold a healthcare license or certification while enrolled in school to obtain a second license or certification, click here.
- Don't see your profession in the drop-down list? Please call us at 1-800-982-9491. HPSO offers coverage for more than 160 professions.

3. Are you a member of a professional association? :

No

4. Select your status as a healthcare professional: *

- Employed**
You provide services on behalf of an entity you do not own, receive a W-2 form from your employer, and pay your own insurance premium.
- Self-Employed OR your employer pays your insurance premium**
You provide services on behalf of an entity you do not own as an independent contractor and pay self-employment taxes using a 1099 form, or your employer pays your insurance premium. (If you are incorporated with or without employees, please call 1-800-268-3034 for more information.)
- Student**
You are a first-time student who does not currently hold a healthcare license or certification. If you are a Student Nurse Practitioner, please select your area of Nurse Practitioner study for Question 2 and the Student designation, as this will automatically include coverage for your license as a Registered Nurse.
If you currently hold a license or certification as a healthcare provider, but are a student in another healthcare profession, please call Customer Service at 1-800-982-9491.

Continue

[Feedback](#)

[HPSO SECURE](#)

Please be sure to enter your graduation date:

Individuals | Businesses & Practices | Schools | Brokers | Risk Education | Our Partners | Support

Quick Quote for Individual Professional Liability Insurance

Home > Quick Quote

Answer the below question to get a Quick Quote, then complete an application for individual professional liability insurance.

1. State of residence : *

2. Type your profession or area of study : *

Please select the healthcare profession for which you held the highest credentials or standards appropriate, as mandated by your state statutory guidelines. If you are a student, and do not currently hold a healthcare license or certification, please select your primary area of study. (Student Nurse Practitioners, please see instructions under Question 4.)

- Certified Registered Nurse Anesthetists, please call 800-521-7013. Coverage is not available for MD/DOs.
- If you are licensed or credentialed in **more than one healthcare profession**, and therefore need to apply for dual coverage, please call 1-800-982-9491.
- If you currently hold a healthcare license or certification while enrolled in school to obtain a second license or certification, click [here](#).
- Don't see your profession in the drop down list? Please call us at 1-800-982-9491. HPSO offers coverage for more than 160 professions.

3. Are you a member of a professional association? :

4. Select your status as a healthcare professional:**

- Employed
You provide services on behalf of an entity you do not own, receive a W-2 form from your employer, and pay your own insurance premium.
- Self-Employed OR your employer pays your insurance premium
You provide services on behalf of an entity you do not own as an independent contractor and pay self-employment taxes using a 1099 form, or your employer pays your insurance premium. (If you are incorporated with or without employees, please call 1-888-288-3534 for more information.)
- Student
You are a full-time student who does not currently hold a healthcare license or certification. If you are a Student Nurse Practitioner, please select your area of Nurse Practitioner study for Question 2 and the Student designation, as this will automatically include coverage for your license as a Registered Nurse.
If you currently hold a license or certification as a healthcare provider, but are a student in another healthcare profession, please call Customer Service at 1-800-982-9491.

Graduation Date: *

Your graduation date must be a future date.

Rates, limits and coverage may vary based on state, profession, and employment status.

Malpractice insurance for LPN-BSN, PN and PCT students will cost \$38.16 for the year.

Next, click on “Complete your Online Application”

1-800-982-9491 [Apply Now](#) [Renew Now](#) | [My Account](#) | [Contact Us](#)

Individuals | Businesses & Practices | Schools | Brokers | Risk Education | Our Partners | Support

Quick Quote for Individual Professional Liability Insurance

Home > Quick Quote

Quote Details

Total Due: (Annual premium + fees)	\$38.16
State:	New Jersey
Profession/Area of study:	LPN/LVN
Employment Status:	Student
Recent graduate:	No
Limits of liability:	\$1,000,000 / \$6,000,000
Annual Premium:	\$35.00
Tax/Surcharge (applied by your state):	\$0.16
Healthcare Providers Service Organization Purchasing Group Membership Fee:	\$3.00

- Read more about the coverage offered (This link opens in a new window, so you will not need to re-enter your information if you want to continue to apply.)
- Do you have all the coverage that you need for your non-medical activities? Click [here](#) to learn more.

Healthcare Providers Service Organization is proud to have been selected as the preferred provider of professional liability insurance by more than 30 associations.

Two Ways To Apply

Processing Time: If you choose our online application process, you can receive your Certificate of Insurance (proof of coverage) within one business day of your application approval.

Payment: To use this option, payment via credit or debit card, in your name, is required at the time of the application. (Because this online transmission does not allow for your actual signature, your credit card acts as your signature. Therefore, the credit or debit card used for payment MUST be in your name.)
[Click here](#) to read about secure transactions with HPSO.

Complete the application online, then print a copy and submit it to our office via mail or fax.

Processing Time: Your application will be processed within 7 - 10 days of receipt, if you need to receive proof of coverage in a more timely fashion, select the Online option above and e-billing on the application that follows.

Payment: You can submit a check or credit/debit card information with your application, or receive a bill after your application is processed. (Bill Me Later option not available for students.)

Rates, limits and coverage may vary based on state, profession, and employment status.

Input your personal information and remember to use your personal email address, not your Berkeley College email address.

The screenshot shows the 'Personal Information' step of an online application. At the top, a progress bar indicates the current step (1) and subsequent steps (2-6). Below the progress bar, a note states: "Because this online transaction does not allow for your actual signature, your credit card acts as your signature. Therefore, the credit or debit card used for payment MUST be in your name." A summary table displays: Profession: LPN/LVN, Employment Status: Student, Limits of Liability: \$1,000,000 / \$6,000,000, and Quick Quote Rate: \$38.16. A 'Required Fields' section follows, with a note: "The name you enter here must match the name on your credit card." Input fields are provided for First Name, Middle Initial, Last Name, Permanent Address (Street address, P.O. box, company name, etc.), Address Continued (Apartment, suite, unit, building, floor, etc.), City, State (New Jersey), and Zip Code.

Answer the questions on the next screen. If you never had malpractice insurance, you will most likely answer "No" to all three questions.

The screenshot shows the 'Claim History' step of the online application. The progress bar at the top indicates that steps 1 and 2 are completed, and step 3 (Claim History) is the current step. A note states: "Because this online transaction does not allow for your actual signature, your credit card acts as your signature. Therefore, the credit or debit card used for payment MUST be in your name." A summary table displays: Profession: LPN/LVN, Employment Status: Student, Limits of Liability: \$1,000,000 / \$6,000,000, and Quick Quote Rate: \$38.16. A 'Required Fields' section contains three questions, each with a 'No' button: "Have you ever had professional liability insurance declined, canceled or non-renewed for any reason other than for non-payment of premium?", "Has any claim or lawsuit for malpractice ever been brought against you or are you aware of any incidents that may lead to a claim or lawsuit?", and "Within the last 6 years, have you been the subject of complaints, charges, or disciplinary action against you for any reason, by a court, licensing board or regulatory agency responsible for maintaining the standards of your profession?". 'Previous' and 'Continue' buttons are at the bottom. A footer note reads: "Rates, limits and coverage may vary based on state, profession, and employment status."

Click continue to move onto the next page, check the boxes on the following page showing that you understand and certify that of the information you inputted is correct. You will then choose “Yes” for E-billing, “No” to receive fax confirmation before pressing “Continue”.

The next page will allow you to review all information entered and process your payment.

Your malpractice insurance policy will be sent to the email address provided on your application. Confirmation should be submitted to the Clinical Scheduling Coordinator to secure clinical placement.

If you are enrolled in a program for more than one year:

- LPN-BSN and evening PN students may have to renew their insurance depending on when they purchased it initially. Please keep record of your effective date.
 - Students will have to renew their malpractice insurance and hand in the renewed policy once it expires.

Remember, your malpractice insurance is a necessary component of your clinical assignment. If you do not have proof of malpractice insurance when you submit your physical paperwork, your packet will be considered incomplete and you will not be able to attend clinical rotations.