

For clinical diagnostic and genomic testing laboratories, including direct-to-consumer genetic testing. Biotech research labs use CWCO-SUP-BIOTECHRD and trial central labs use CWCO-SUP-CRO. Complete with ACORD 125, 126, and 140. Attach the test menu with volumes, CLIA and CAP certificates, the variant classification and reclassification policy, a sample report, the privacy and security policy, and five years of loss runs.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS
LAB ADDRESS	CITY / STATE / ZIP	WEBSITE	

Entity type:
☐ LLC ☐ Corporation ☐ Professional corporation ☐ Hospital-owned ☐ Publicly traded

PRIMARY CONTACT / TITLE	PHONE	EMAIL

CLIA NUMBER	CAP NUMBER	LABORATORY DIRECTOR / BOARD

2 OPERATIONS

Tests performed (check all that apply):
☐ Hereditary cancer / carrier screening ☐ Prenatal / NIPT ☐ Exome or genome sequencing ☐ Pharmacogenomics ☐ Tumor profiling
☐ Infectious disease (molecular) ☐ Routine clinical chemistry ☐ Ancestry / wellness (consumer) ☐ Paternity / forensic

Tests are ordered by (check all that apply):
☐ Physicians ☐ Hospitals ☐ Consumers directly ☐ Telehealth providers we contract with ☐ Research sponsors

Volume:
 Tests per year Lab-developed tests on menu Genetic counselors Employees

2-1 Are any tests sold in kit form to other labs? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Does the lab hold a New York State permit? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — TESTING, REPORTING & RESULTS

South Carolina's top court held that a genetic lab testing at a physician's request acts as a health care provider, in a suit alleging a child's variant was reported as uncertain when it caused a fatal seizure disorder. Labs can be sued over testing, analysis, or reporting errors.

3-1 Are variants classified using ACMG or a similar written standard? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-2 Is there a written policy for reclassifying variants and notifying ordering providers? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-3 Are positive and uncertain results reviewed by a second qualified person before release? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-4 Are specimens tracked by barcode from receipt to report? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-5 Has a specimen mix-up or wrong-patient report occurred in the past 5 years? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-6 Is genetic counseling offered with consumer-ordered or high-risk results? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-7 Are proficiency testing results passed for every test? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-8 Has CMS, CAP, or a state cited the lab in the past 3 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — GENETIC DATA, BILLING & EQUIPMENT

California sued 23andMe's successor in 2026 over a breach that exposed DNA-related data of nearly 7 million users, after a \$50 million class settlement.

4-1 Is multifactor authentication required for patient and provider portals? ☐ Yes ☐ No
IF NO, EXPLAIN

4-2 Is genetic data encrypted at rest? ☐ Yes ☐ No
IF NO, EXPLAIN

4-3 Are samples or genetic data shared with outside parties, such as research partners? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 If yes to 4-3, is separate written consent obtained? ☐ Yes ☐ No
IF NO, EXPLAIN

4-5 Are sales representatives paid commissions on tests ordered? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Has billing been reviewed by outside counsel or auditors for compliance? ☐ Yes ☐ No
IF NO, EXPLAIN

4-7 Has the lab received a payer audit, subpoena, or government inquiry? ☐ Yes ☐ No
IF YES, EXPLAIN

4-8 Are sequencers and specimen freezers under service contracts? ☐ Yes ☐ No
IF NO, EXPLAIN

4-9 Is there backup power for critical instruments and freezers? ☐ Yes ☐ No
IF NO, EXPLAIN

4-10 Is there an agreement with a backup lab to run tests if the lab goes down? ☐ Yes ☐ No
IF NO, EXPLAIN

5 PAYROLL, SALES & REVENUE

ANNUAL REVENUE (\$)	MEDICARE / MEDICAID REVENUE (\$)	CONSUMER REVENUE (\$)	TOTAL ANNUAL PAYROLL (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

PROFESSIONAL LIABILITY CARRIER / LIMITS	CYBER CARRIER / LIMITS	EXPIRATION DATE

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED (\$)	OPEN / CLOSED

6-1 Has a patient or provider made a claim over a test result? ☐ Yes ☐ No
IF YES, EXPLAIN

6-2 Has the lab had a data breach or ransomware event? ☐ Yes ☐ No
IF YES, EXPLAIN

6-3 Has any coverage been declined, cancelled, or non-renewed? ☐ Yes ☐ No
IF YES, EXPLAIN

6-4 Is the applicant aware of any incident or circumstance that could give rise to a claim?

☐ Yes ☐ No

IF YES, EXPLAIN

7 RISK MANAGEMENT & SAFETY

7-1 Is there a written quality management program reviewed by the lab director?

☐ Yes ☐ No

IF NO, EXPLAIN

7-2 Is there a written compliance program with a compliance officer?

☐ Yes ☐ No

IF NO, EXPLAIN

7-3 Are staff trained in bloodborne pathogen and specimen safety each year?

☐ Yes ☐ No

IF NO, EXPLAIN

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, may be committing a fraudulent insurance act, which is a crime and may subject such person to criminal and civil penalties. State-specific fraud warnings appear on the insurer's application.

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)

TITLE

DATE

PRODUCER — CORY WASHINGTON & CO. LLC

PRODUCER SIGNATURE (TYPE FULL NAME)

DATE