

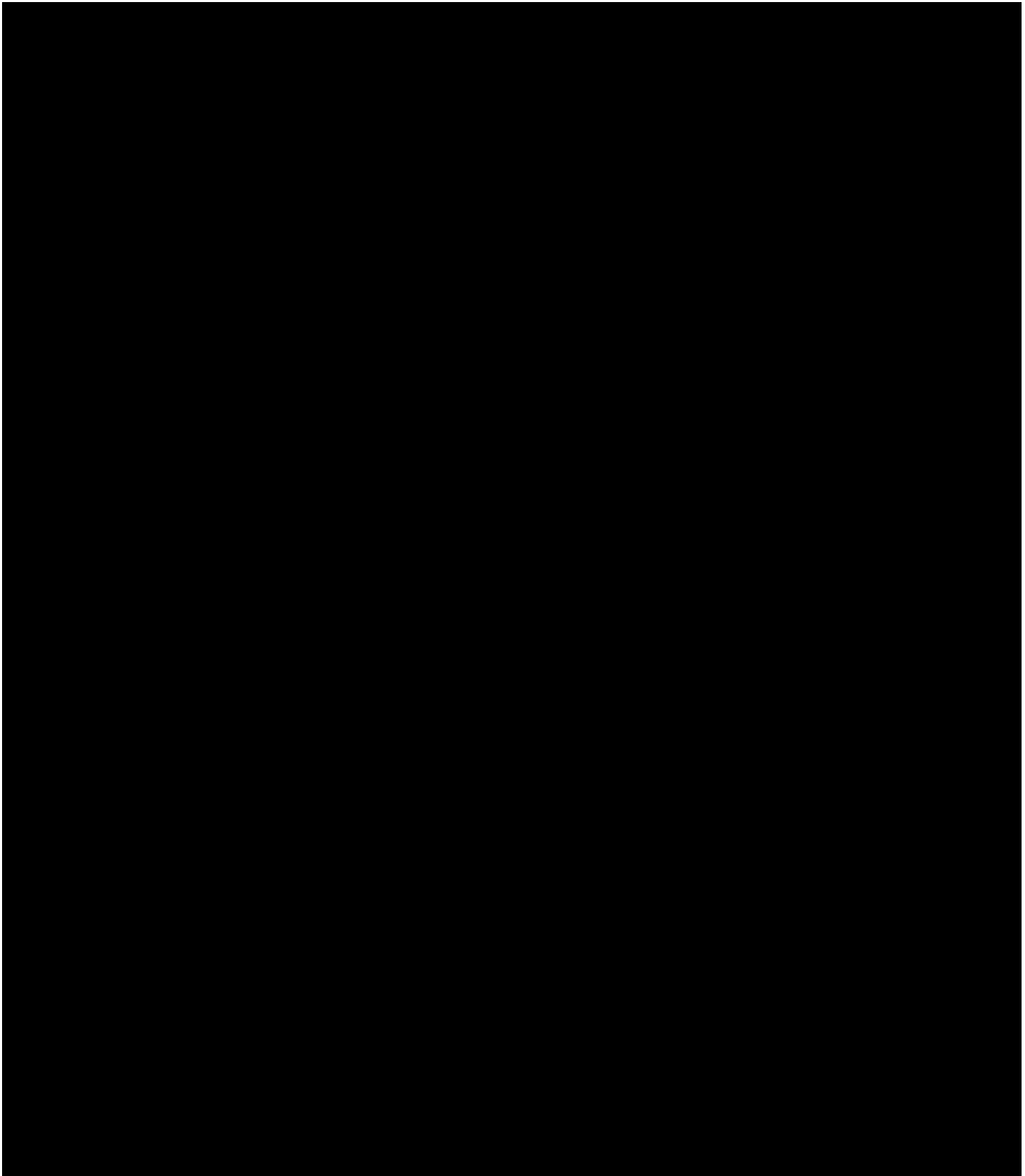
# **EXHIBIT 26**

**RP UNDERWRITING, INC.**

**Third Excess Representations and Warranties Insurance Binder**

Date:

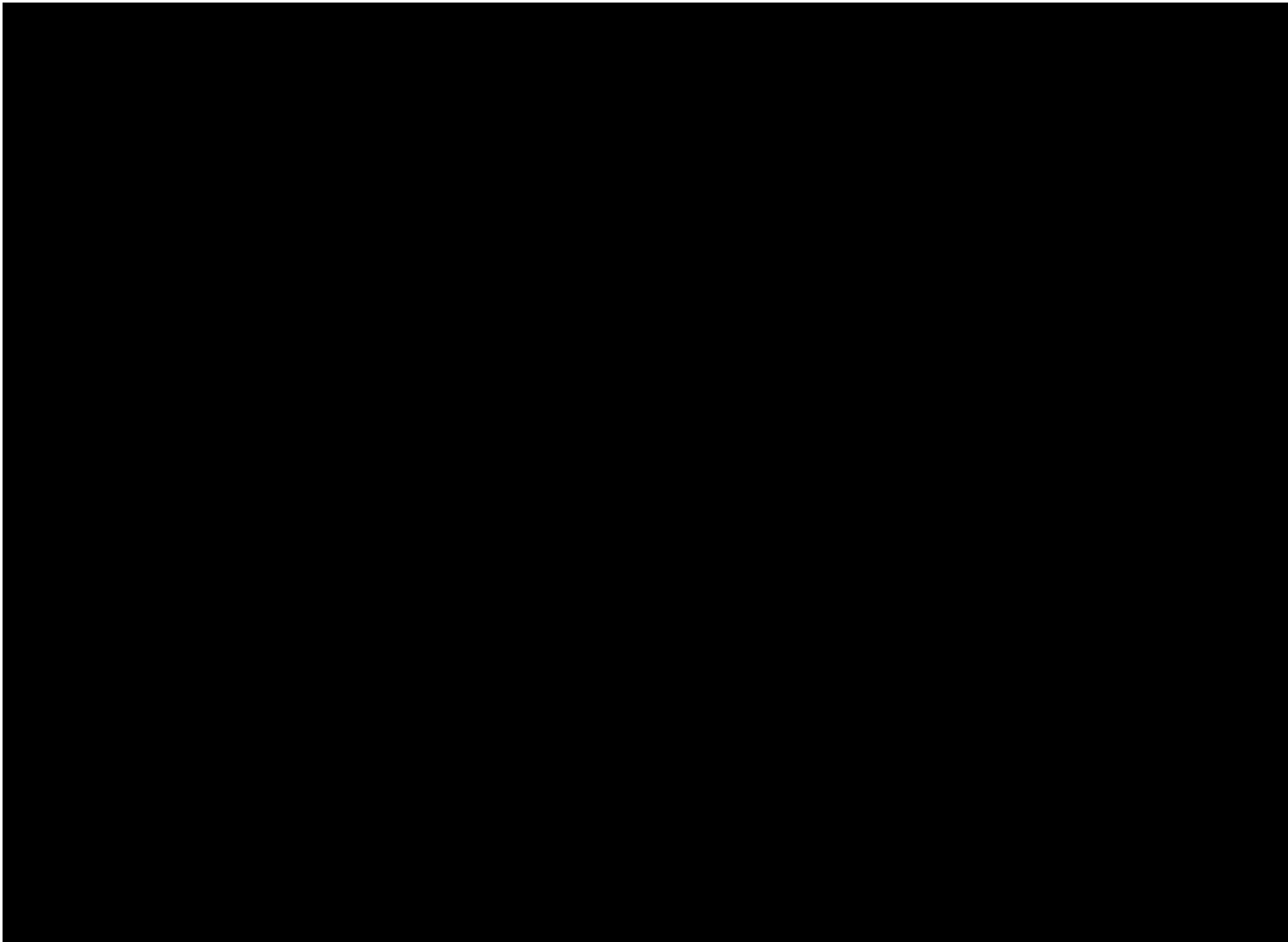
September 11, 2025



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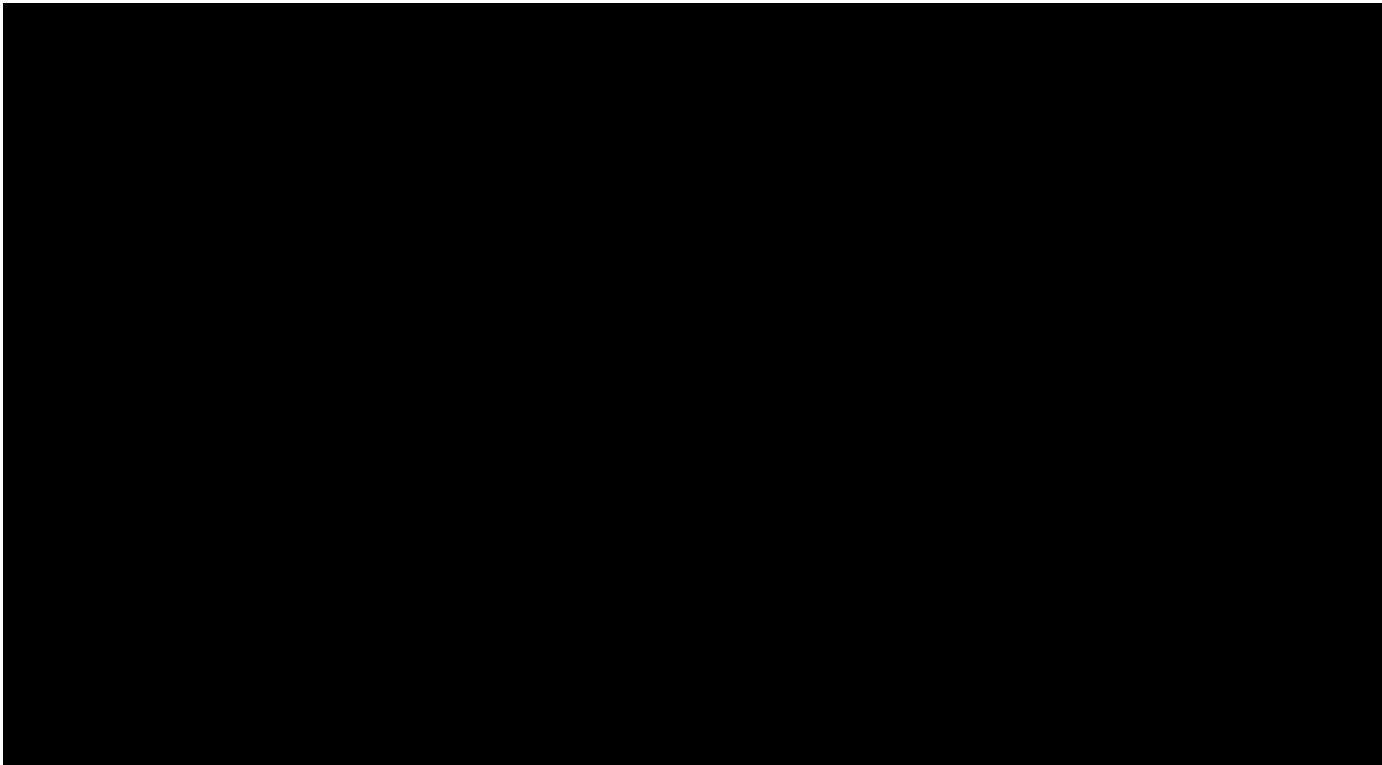


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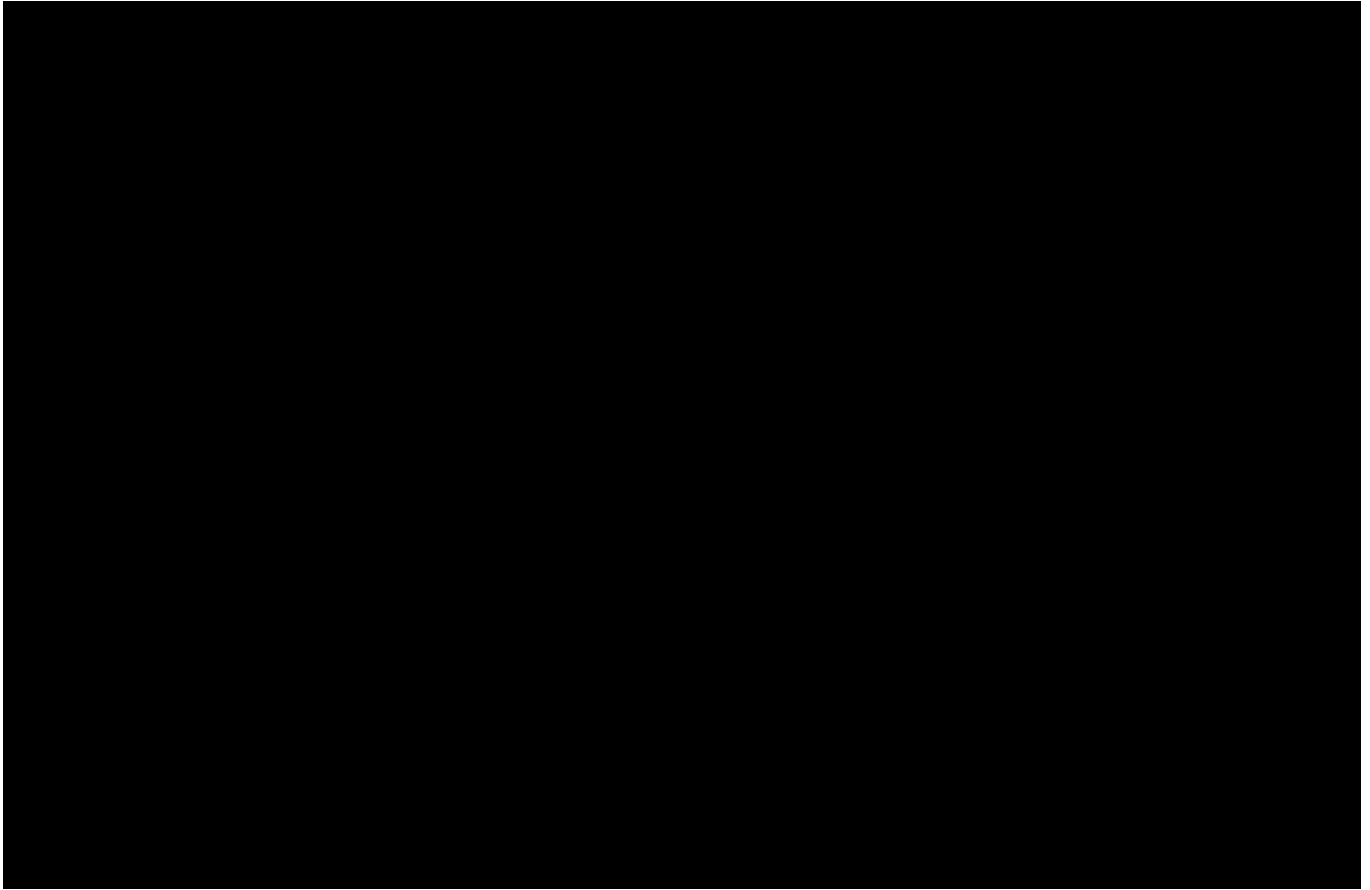


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MedImpact-HCMO-001087

RP UNDERWRITING, INC.  
Surplus Lines Form



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MedImpact-HCMO-001088

**APPENDIX A**  
**POLICY FORM**

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**MedImpact-HCMO-001089**

Third Excess Buyer-Side Representations and Warranties Insurance Policy

**IMPORTANT NOTICE:**

- 1. THE INSURANCE POLICY THAT YOU HAVE PURCHASED IS BEING ISSUED BY AN INSURER THAT IS NOT LICENSED BY THE STATE OF CALIFORNIA. THESE COMPANIES ARE CALLED “NONADMITTED” OR “SURPLUS LINE” INSURERS.**
- 2. THE INSURER IS NOT SUBJECT TO THE FINANCIAL SOLVENCY REGULATION AND ENFORCEMENT THAT APPLY TO CALIFORNIA LICENSED INSURERS.**
- 3. THE INSURER DOES NOT PARTICIPATE IN ANY OF THE INSURANCE GUARANTEE FUNDS CREATED BY CALIFORNIA LAW. THEREFORE, THESE FUNDS WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS IF THE INSURER BECOMES INSOLVENT AND IS UNABLE TO MAKE PAYMENTS AS PROMISED.**
- 4. THE INSURER SHOULD BE LICENSED EITHER AS A FOREIGN INSURER IN ANOTHER STATE IN THE UNITED STATES OR AS A NON-UNITED STATES (ALIEN) INSURER. YOU SHOULD ASK QUESTIONS OF YOUR INSURANCE AGENT, BROKER, OR “SURPLUS LINE” BROKER OR CONTACT THE CALIFORNIA DEPARTMENT OF INSURANCE AT THE TOLL-FREE NUMBER 1-800-927-4357 OR INTERNET WEBSITE [WWW.INSURANCE.CA.GOV](http://WWW.INSURANCE.CA.GOV). ASK WHETHER OR NOT THE INSURER IS LICENSED AS A FOREIGN OR NON-UNITED STATES (ALIEN) INSURER AND FOR ADDITIONAL INFORMATION ABOUT THE INSURER. YOU MAY ALSO VISIT THE NAIC’S INTERNET WEBSITE AT [WWW.NAIC.ORG](http://WWW.NAIC.ORG). THE NAIC—THE NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS—IS THE REGULATORY SUPPORT ORGANIZATION CREATED AND GOVERNED BY THE CHIEF INSURANCE REGULATORS IN THE UNITED STATES.**
- 5. FOREIGN INSURERS SHOULD BE LICENSED BY A STATE IN THE UNITED STATES AND YOU MAY CONTACT THAT STATE’S DEPARTMENT OF INSURANCE TO OBTAIN MORE INFORMATION ABOUT THAT**

**INSURER. YOU CAN FIND A LINK TO EACH STATE FROM THIS NAIC INTERNET WEBSITE: [HTTPS://NAIC.ORG/STATE\\_WEB\\_MAP.HTM](https://naic.org/state_web_map.htm).**

**6. FOR NON-UNITED STATES (ALIEN) INSURERS, THE INSURER SHOULD BE LICENSED BY A COUNTRY OUTSIDE OF THE UNITED STATES AND SHOULD BE ON THE NAIC’S INTERNATIONAL INSURERS DEPARTMENT (IID) LISTING OF APPROVED NONADMITTED NON-UNITED STATES INSURERS. ASK YOUR AGENT, BROKER, OR “SURPLUS LINE” BROKER TO OBTAIN MORE INFORMATION ABOUT THAT INSURER.**

**7. CALIFORNIA MAINTAINS A “LIST OF APPROVED SURPLUS LINE INSURERS (LASLI).” ASK YOUR AGENT OR BROKER IF THE INSURER IS ON THAT LIST, OR VIEW THAT LIST AT THE INTERNET WEBSITE OF THE CALIFORNIA DEPARTMENT OF INSURANCE:**

**[HTTP://WWW.INSURANCE.CA.GOV/01-CONSUMERS/120COMPANY/07-LASLI/LASLI.CFM](http://www.insurance.ca.gov/01-consumers/120company/07-lasli/lasli.cfm).**

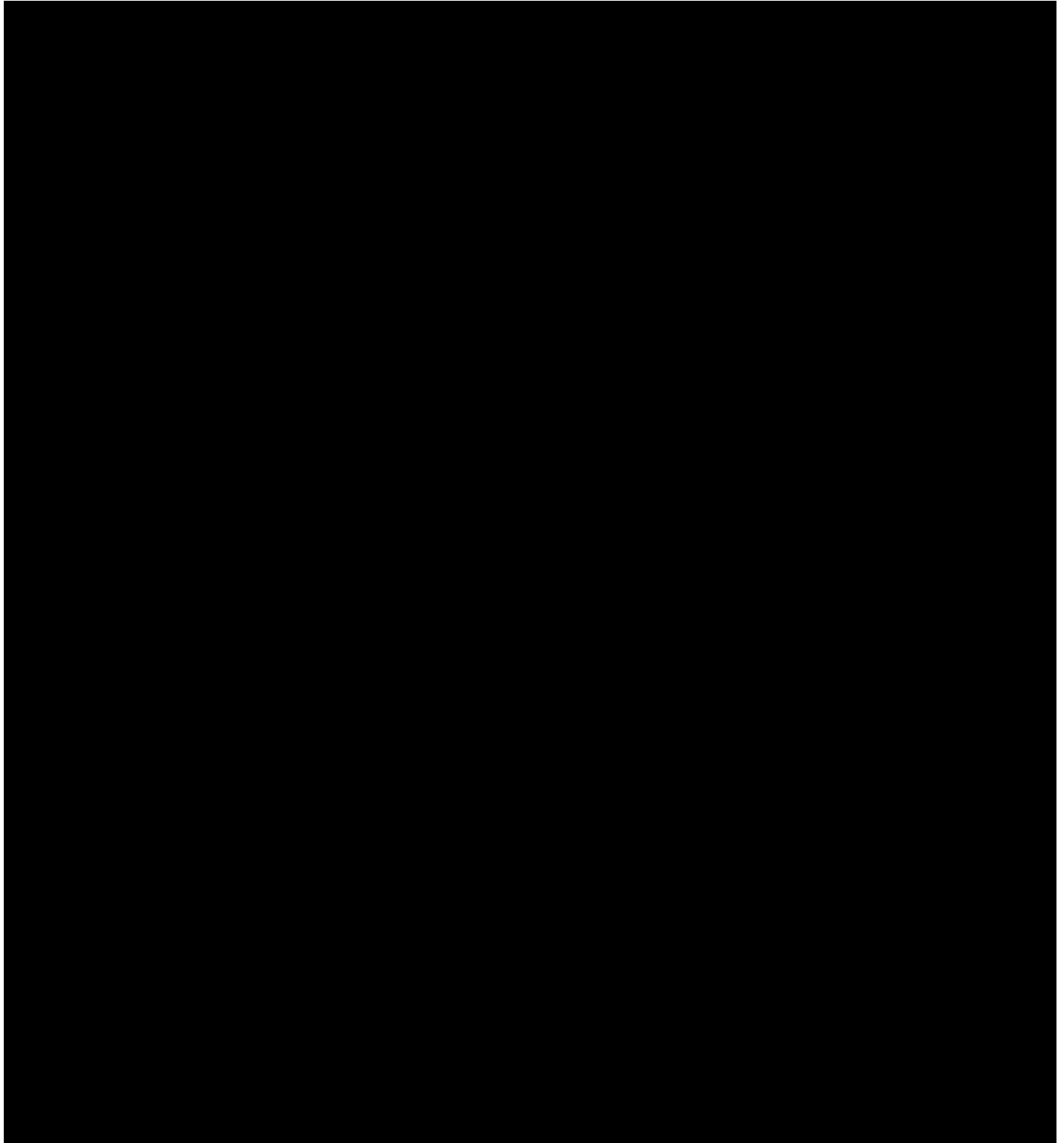
**8. IF YOU, AS THE APPLICANT, REQUIRED THAT THE INSURANCE POLICY YOU HAVE PURCHASED BE EFFECTIVE IMMEDIATELY, EITHER BECAUSE EXISTING COVERAGE WAS GOING TO LAPSE WITHIN TWO BUSINESS DAYS OR BECAUSE YOU WERE REQUIRED TO HAVE COVERAGE WITHIN TWO BUSINESS DAYS, AND YOU DID NOT RECEIVE THIS DISCLOSURE FORM AND A REQUEST FOR YOUR SIGNATURE UNTIL AFTER COVERAGE BECAME EFFECTIVE, YOU HAVE THE RIGHT TO CANCEL THIS POLICY WITHIN FIVE DAYS OF RECEIVING THIS DISCLOSURE. IF YOU CANCEL COVERAGE, THE PREMIUM WILL BE PRORATED AND ANY BROKER’S FEE CHARGED FOR THIS INSURANCE WILL BE RETURNED TO YOU.**

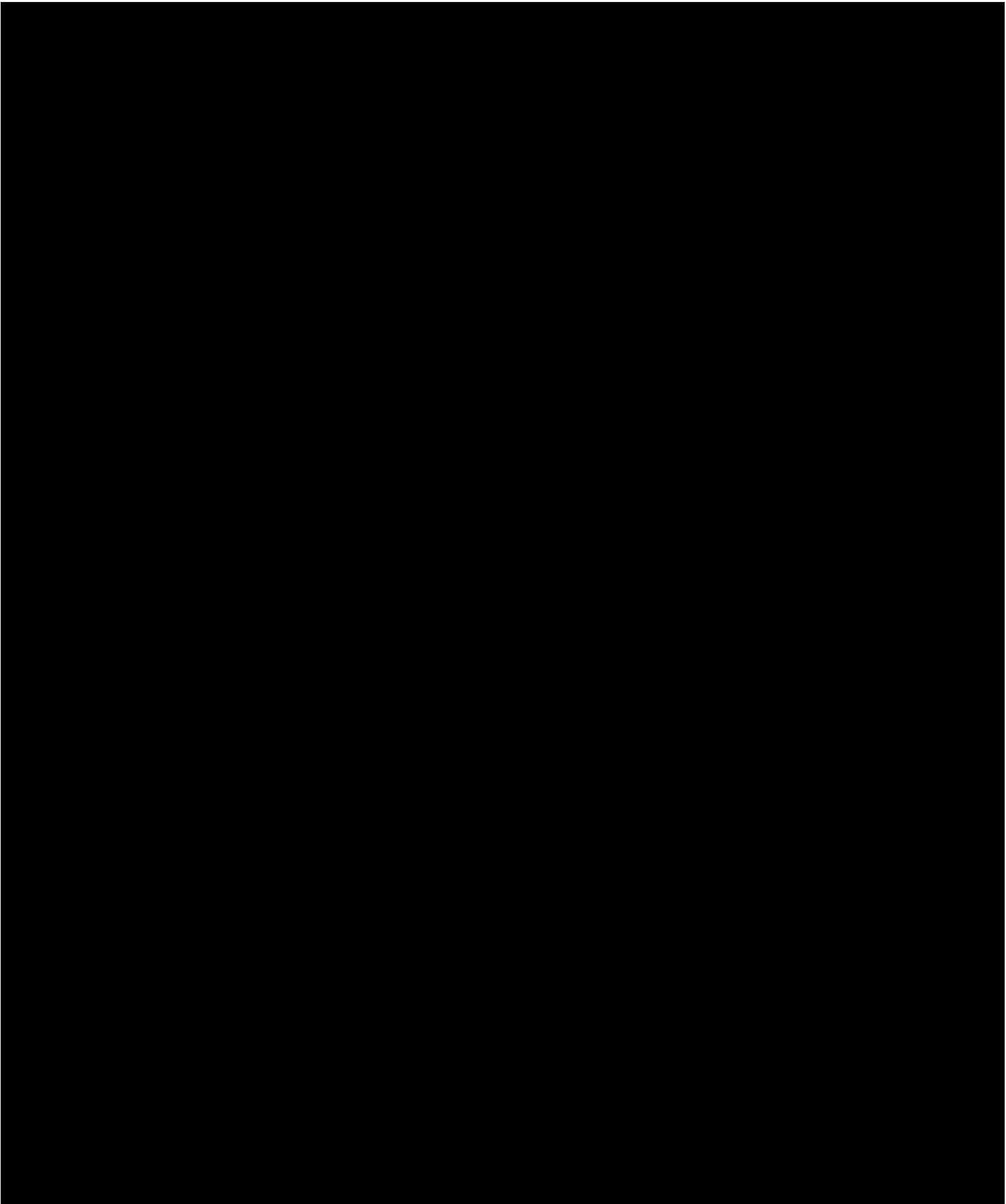
**Date: \_\_\_\_\_**

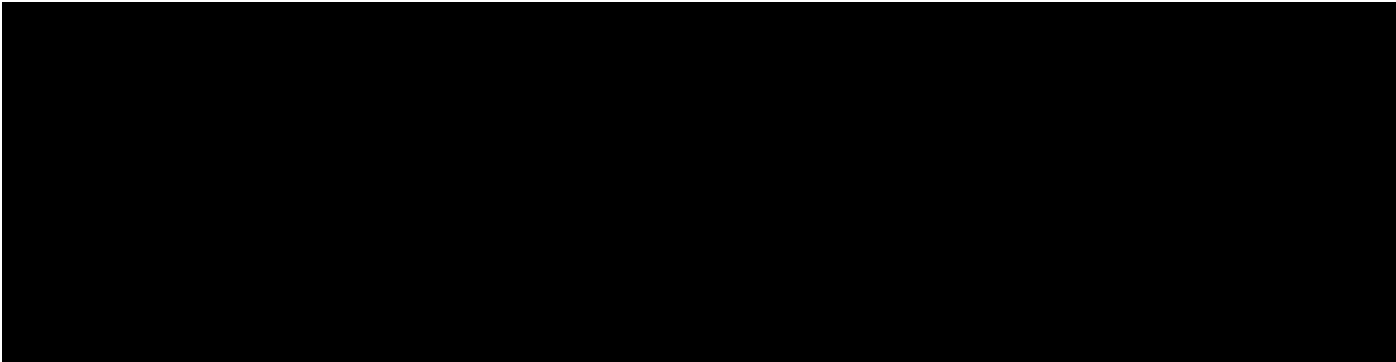
**Insured: \_\_\_\_\_**

Words and phrases that are capitalized have the special meanings provided in Section II. Definitions. All references to “\$” or “dollars” shall mean the lawful currency of the United States.

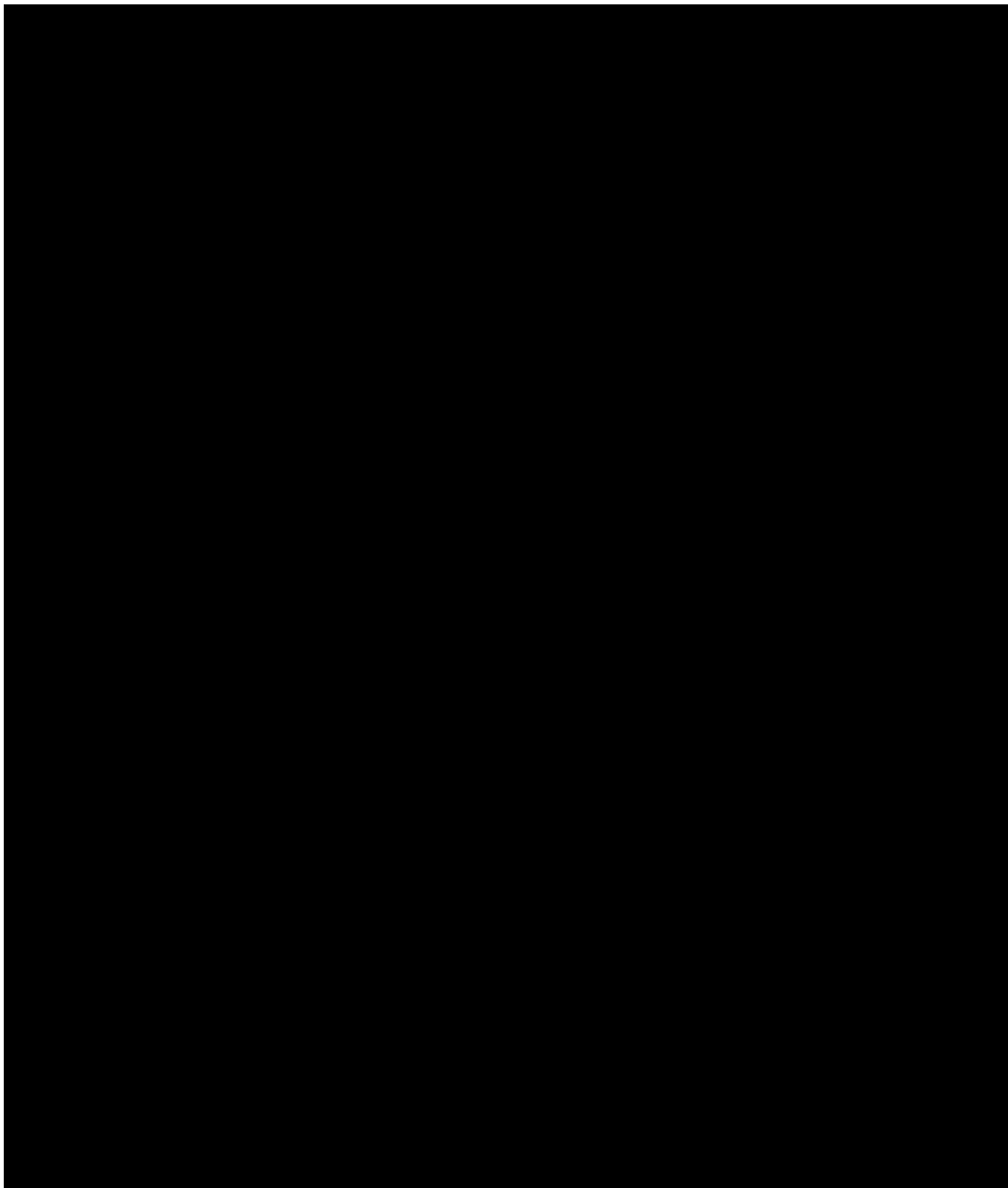
Declarations

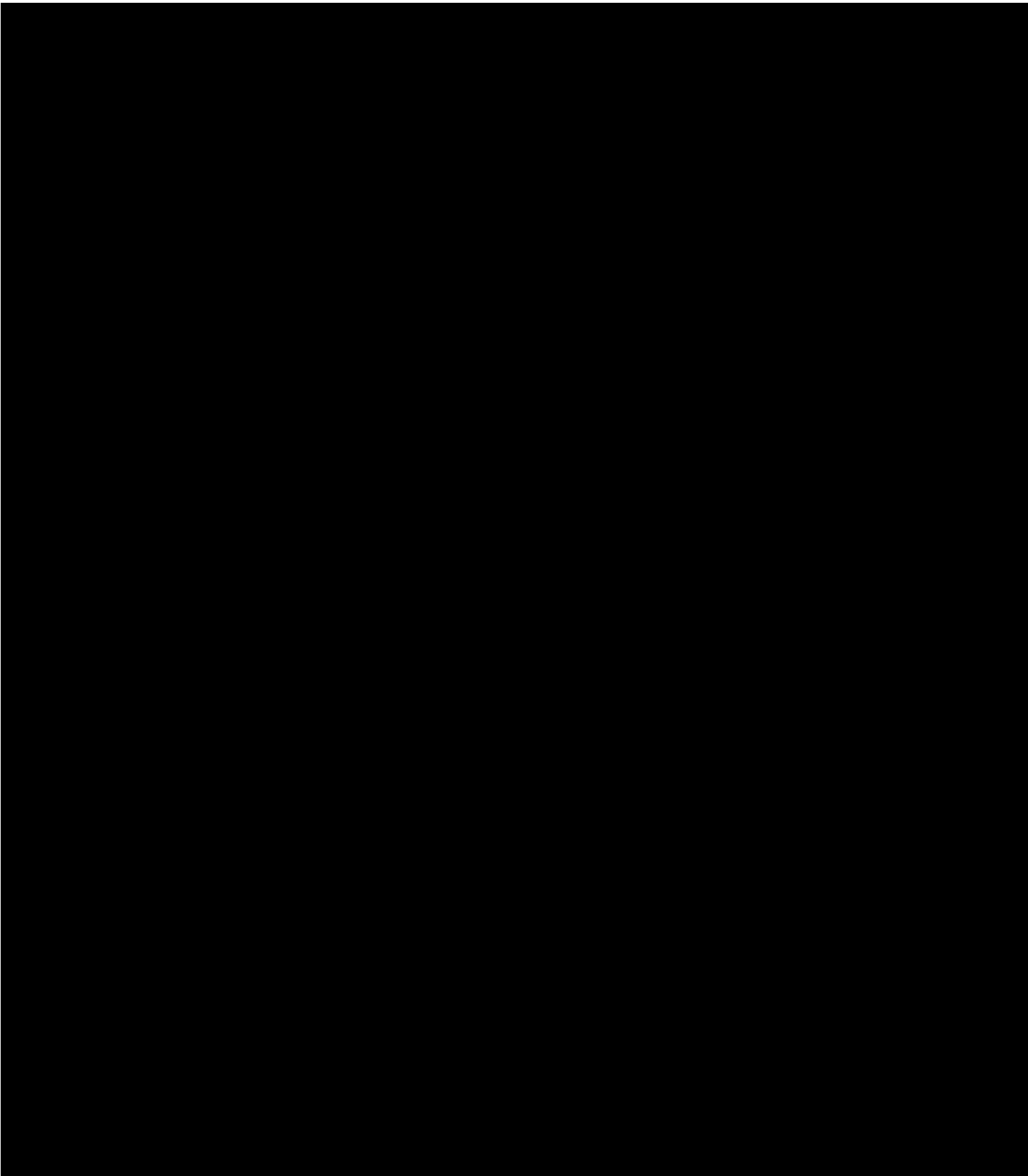


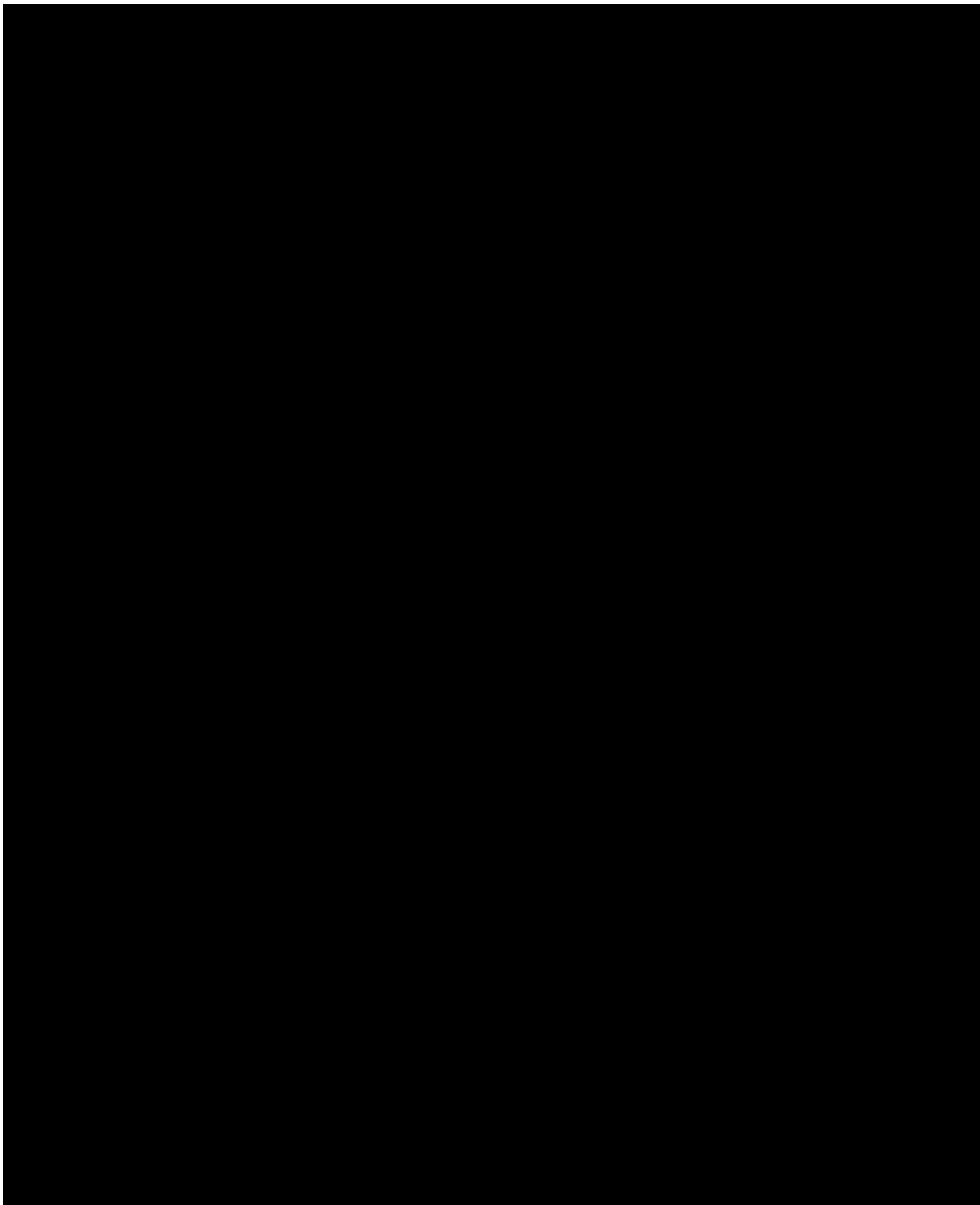


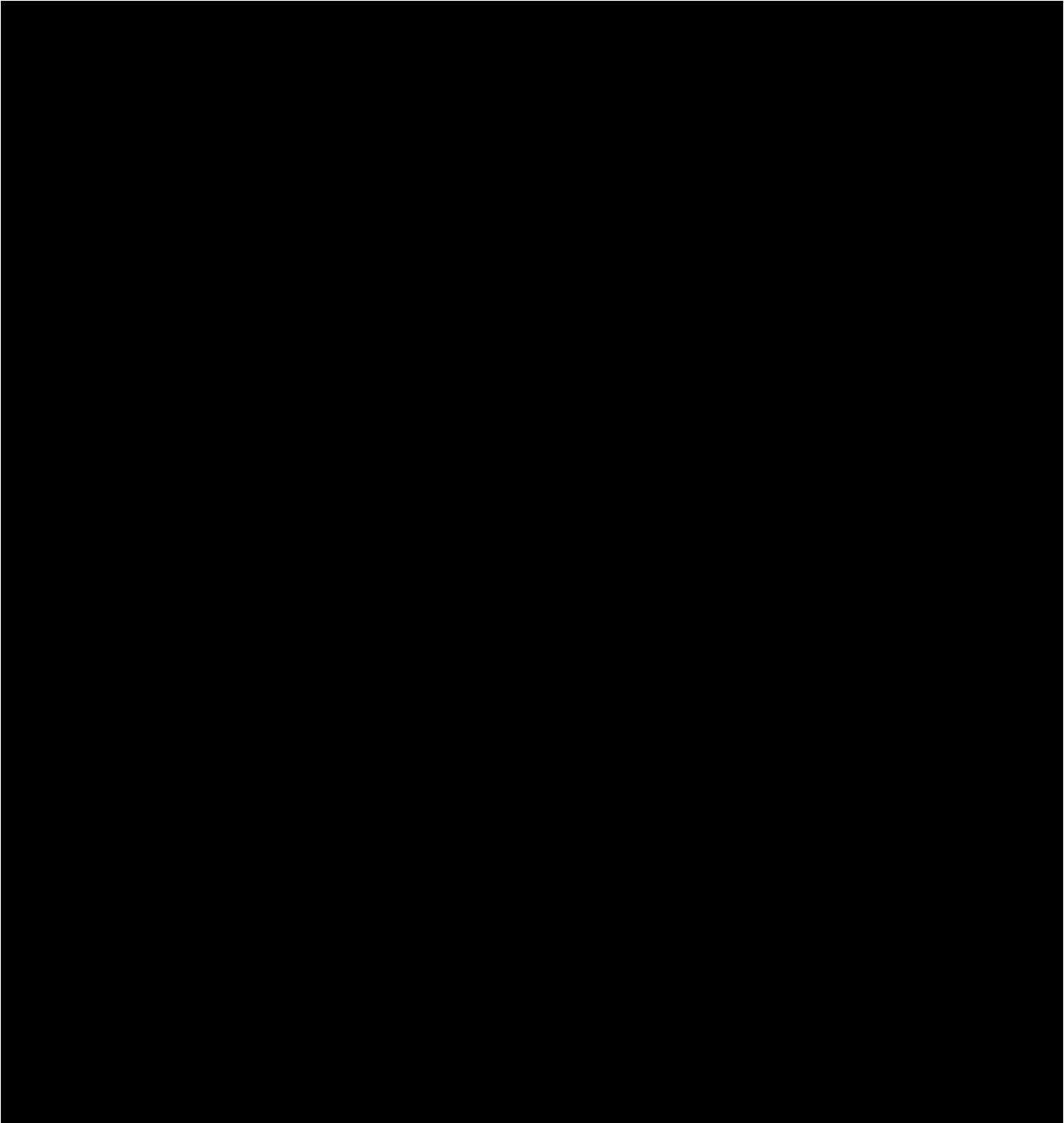


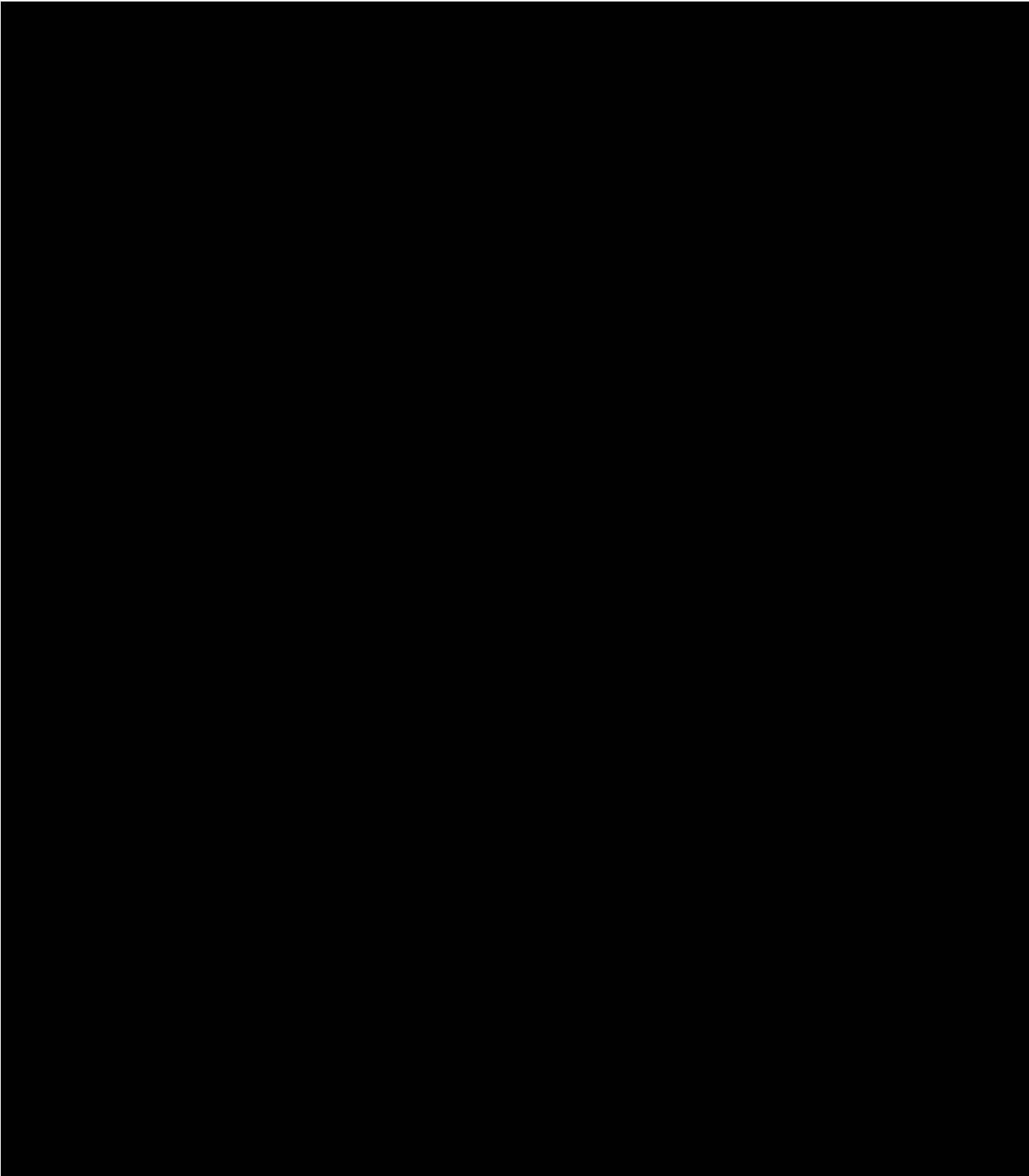
**Third Excess Buyer-Side Representations and Warranties Insurance Policy**











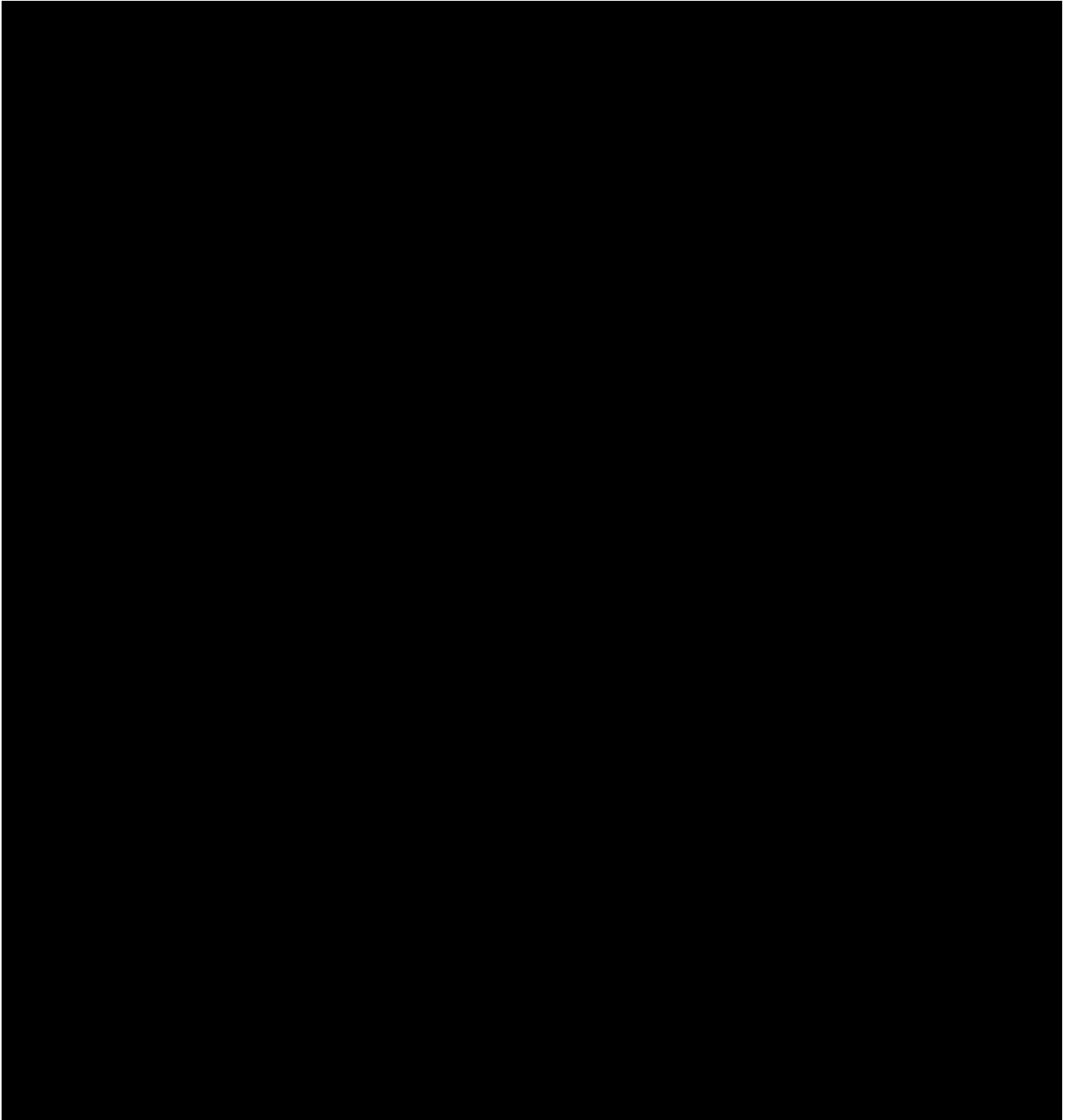
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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

POLICYHOLDER DISCLOSURE

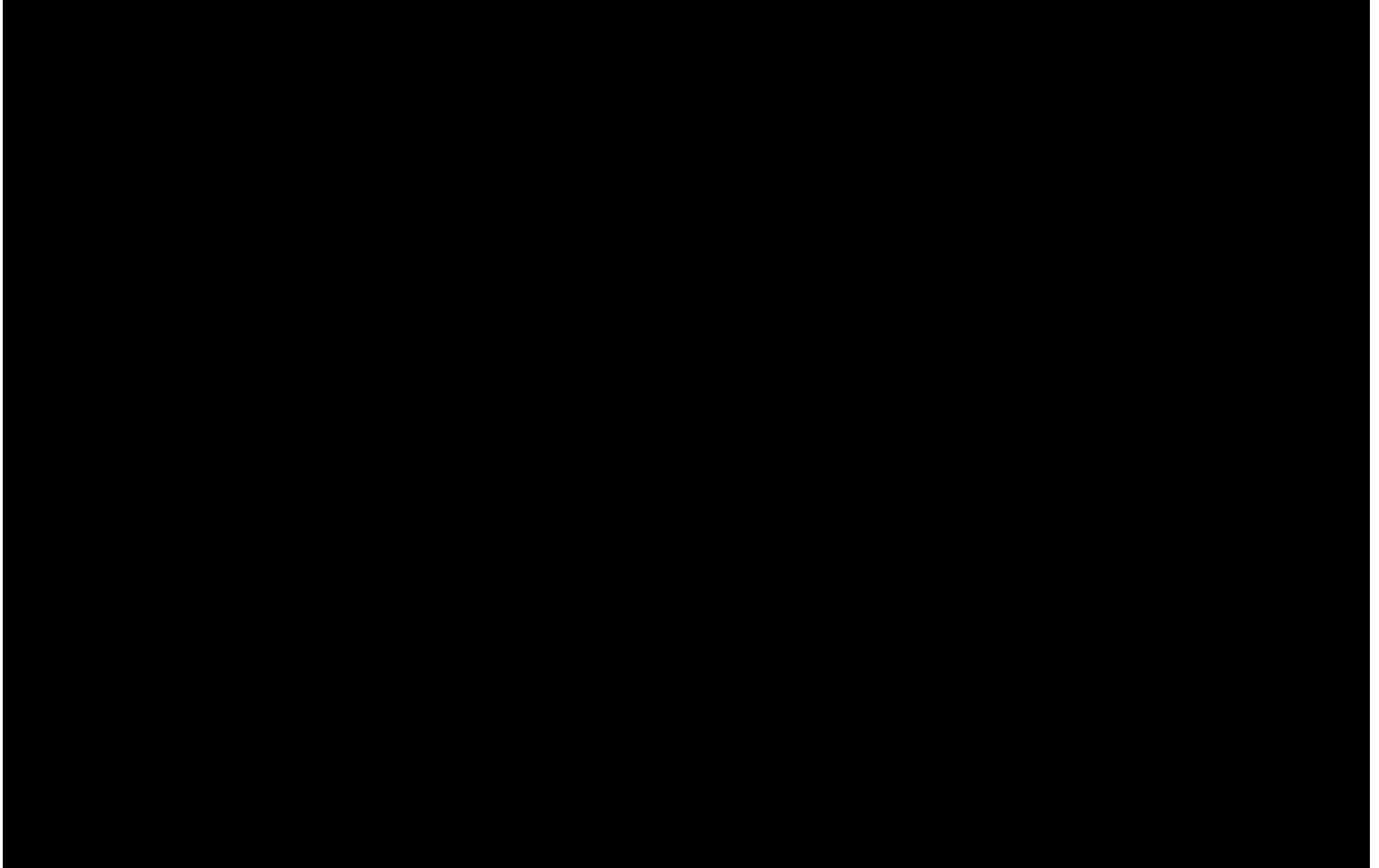
NOTICE OF TERRORISM INSURANCE COVERAGE

(COVERAGE INCLUDED)





## SERVICE OF SUIT





## **CONSUMER COMPLAINT NOTICE**

In the event you need to contact someone about this insurance for any reason, including to file a complaint with your insurance company, please contact your agent. If no agent was involved in the sale of this insurance, or if you have additional questions or concerns, you may contact the following:

Office of the General Counsel  
Ascot Group  
1251 Avenue of the Americas, 43<sup>rd</sup> Floor  
New York, NY 10020  
1-833-454-3022

### **ATTACH THIS NOTICE TO YOUR POLICY**

This notice is for information only and does not become a part or condition of the attached document.



## **ASCOT ADDRESS CHANGE NOTICE**

Please be advised that our administrative address has changed to the following:

Ascot Group  
1251 Avenue of the Americas  
43<sup>rd</sup> Floor  
New York, NY 10020

Please direct all notices and correspondences pertaining to your insurance policy to the postage office listed below:

Ascot US Services Company LLC  
PO Box 2240  
Ridgeland, MS 39158