

Three Rivers Charter School

Insurance Proposal

Coverage Effective: July 1, 2016 at 12:01 AM - July 1, 2017 at 12:01 AM

California Charter Schools Joint Powers Authority P.O. Box 969, Weimar, CA 95736 Phone: (888) 901-0004 Fax: (530) 236-9569 Web Site: http://www.chartersafe.org

Disclosure:

This proposal is an outline of the coverages proposed by California Charter Schools Joint Powers Authority (CCSJPA), based on the information provided by your school. It does not include all of the terms, coverages, exclusions, limitation and conditions of the actual contract language. The policies themselves must be read for those details. Policy forms for your reference will be made available upon the school's request to the California Charter Schools JPA. As set forth in this document, CCSJPA DBA CharterSAFE shall be referred to as CharterSAFE.



INTRODUCTION

Dear Roger,

CharterSAFE is pleased to present your renewal proposal for the 2016-2017 school year. Please review this document, which includes:

- 2016-2017 Premium Summary
- Exposures
- Schedule of Locations
- Board and Employment Liability
- General Liability
- Auto Liability & Physical Damage
- Excess Liability
- Property
- Crime
- Terrorism Liability
- Student Accident Liability
- Cyber Liability
- Workers' Compensation & Employer's Liability
- Claims Reporting Instructions

Please note, all of our complimentary member services are still in effect for the 2016-2017 policy period. Member services include access to online staff training, human resources advice, risk management and loss control advice and site inspections, and contract review of insurance and indemnity provision. Please contact a CharterSAFE representative for more information.

All of CharterSAFE's coverage placements are with insurance companies that have a financial rating A.M. Best of A- VII or higher.

Required Signatures:

To bind coverage, you must sign and complete the following:

1. The proposal acceptance at the end of the Premium Summary

Once these signatures are in place, please return the signed document to jrubin@chartersafe.org or fax to (530) 236-9569.

Thank you,

The CharterSAFE Team



Package

Three Rivers Charter School

Premium Summary 2016-2017

\$13,044.00

This Proposal includes the following coverages:

- Based and Englander at 12-1-20.				
Board and Employment Liability				
O Directors and Officer Liability	•			
O Employment Practices Liability	y (EP	L)		
○ Fiduciary Liability◆ General Liability				
 Educator's Legal Liability (Edu 	ucato	r's E&O)		
 Individualized Education F 	Plan ((IEP) Defense		
 Employee Benefits Liability 				
 Sexual Abuse Liability 				
 Auto Liability & Physical Damage 				
• Excess Liability				
Property				
• Crime				
Terrorism Liability				
 Student Accident Liability 				
Cyber Liability				
Workers' Compensation & Employers' Liability \$5,906.00				
Workers' Compensation & Employer	rs' Lia	ability		
Total Premium		\$18,950.00		
Choose One Payment Option		Payment in Full (\$18,950.00)		Use ACH
		Installment Plan:	_	
		- Deposit (25%) - Due Now (\$4,737.00)		Use ACH
		- 9 Monthly Installments (\$1,579.00)		Use ACH
See attached ACH form if you wish to tak Monthly Installment or both 25% Deposit		vantage of this payment option for Payment in Full, 25 ^o Monthly Installment payments.	% Depo	sit,
Payment in Full or 25% Deposit are		at the time the proposal is accepted by signing an		_
	osal	. Insurance policies are subject to cancellation for	any ir	ivoice
over ninety (90) days past due.	oosal	. Insurance policies are subject to cancellation for	any ir	ivoice
over ninety (90) days past due. Proposal Acceptance:		Insurance policies are subject to cancellation for the subject to cancellation for the subject to the terms outlined within.	any ir	nvoice
over ninety (90) days past due. Proposal Acceptance:			any ir	avoice



EXPOSURES

The premiums are calculated based on the following exposures on schedule:

No. Students	120
No. Employees	18
Annual Payroll	\$414,000.00
Building Value - Replacement Cost	\$700,000.00
Content Value - Replacement Cost	\$80,500.00
Electronic Data Processing (EDP) - Replacement Cost	\$80,500.00
Total Insured Value (Building+Content+EDP Values)	\$861,000.00

Vehicles

Continuity and Retroactive Dates:

Directors & Officers Liability Continuity Date: 07/01/2011

Employment Practices Liability Continuity Date: 07/01/2011

Fiduciary Liability Continuity Date: 07/01/2012



SCHEDULE OF LOCATIONS

Each of the addresses listed below are covered for all lines of coverage presented in this proposal:

Policyholder mailing address

1276

1211 Del Mar Drive Fort Bragg, CA 95437

Location

Three Rivers Charter School: 1211 Del Mar Drive

10328

1211 Del Mar Drive Fort Bragg, CA 95437



BOARD AND EMPLOYMENT LIABILITY

COVERAGE IS ON A CLAIMS MADE BASIS

Layer 1 Coverages:

& Employment Practices

Liability

Directors and Officers and Company Liability	\$1,000,000 per claim and member aggregate	\$2,500 per claim
Employment Practices Liability	\$1,000,000 per claim and member aggregate	\$7,500 per claim
Fiduciary Liability	\$1,000,000 per claim and member aggregate	\$0
Layer 2 Coverages*:	<u>Layer 2 Limits:</u>	Layer 2 Deductibles:
Directors and Officers and Company Liability	\$4,000,000 per claim	None, follow form

\$4,000,000 per member aggregate

Layer 1 Limits:



Layer 1 Deductibles:

None, follow form

Layer 1 Coverage

^{*}Layer 2 Coverages include General Liability, Law Enforcement Liability, Sexual Abuse Liability, Employee Benefits Liability, Educator's Legal Liability, Auto Liability, Directors and Officers Liability, and Employment Practices Liability. Directors and Officers Liability and Employment Practices Liability are on an claims-made basis. All other coverages are on an occurrence basis.

GENERAL LIABILITY

<u>Layer 1 Coverages*:</u>	Layer 1 Limits:	Layer 1 Deductibles:
Bodily Injury, Property Damage	\$1,000,000 per occurrence	\$500 per occurrence for bodily injury arising out of participation in a school sponsored <i>High Rigk</i> <i>Activity</i> **
Medical Payments	\$10,000 per person \$50,000 per occurrence	\$0
Educator's Legal Liability	\$1,000,000 per occurrence	\$2,500 per occurrence (except for IEP Defense)
IEP Defense Sublimit	\$50,000 per occurrence and aggregate	\$5,000 per occurrence
Employee Benefits Liability	\$1,000,000 per occurrence	\$0
Law Enforcement Liability	\$1,000,000 per occurrence	\$0
Sexual Abuse Liability	\$1,000,000 per occurrence	\$0
Products and Completed Operations	\$1,000,000 per occurrence	\$0

^{*}Layer 1 Limits do not have aggregates (except for IEP Defense Sublimit)

^{**}Please contact Carly Weston (cweston@chartersafe.org / 818-709-1570) of CharterSAFE's Risk Management team for the list of *High Risk Activities*.

<u>Layer 2 Coverages*:</u>	<u>Layer 2 Limits:</u>	<u>Layer 2 Deductibles:</u>
Bodily Injury, Property Damage, Law Enforcement Liability, Employee Benefits Liability,	\$4,000,000 per occurrence \$4,000,000 per member aggregate	None, follow form Layer 1 Coverages
Sexual Abuse Liability		

^{*}Layer 2 Coverages include General Liability, Law Enforcement Liability, Sexual Abuse Liability, Employee Benefits Liability, Educator's Legal Liability, Auto Liability, Directors and Officers Liability, and Employment Practices Liability. Directors and Officers Liability are on an claims-made basis. All other coverages are on an occurrence basis.



AUTO LIABILITY & PHYSICAL DAMAGE

<u>Layer 1 Coverages*:</u>	Layer 1 Limits:	Layer 1 Deductibles:
Owned Auto Liability, if applicable:	\$1,000,000 per occurrence	\$0
Non-Owned Auto Liability:	\$1,000,000 per occurrence	\$0
Hired Auto Liability:	\$1,000,000 per occurrence	\$0
Auto Physical Damage**:	\$1,000,000 per occurrence	\$500 per occurrence for Hired Auto Physical Damage

^{*}Layer 1 Limits do not have aggregates.

Layer 2 Coverages*:Layer 2 Limits:Layer 2 Deductibles:Owned, Non-Owned, and
Hired Auto Liability:\$4,000,000 per occurrence
\$4,000,000 per member aggregateNone, follow form
Layer 1 Coverages



^{**} Auto Physical Damage described herein for hired automobiles is secondary to any/all rental coverage offered by the rental company(ies). CharterSAFE strongly advises our members to purchase auto physical damage when renting vehicles.

^{*}Layer 2 Coverages include General Liability, Law Enforcement Liability, Sexual Abuse Liability, Employee Benefits Liability, Educator's Legal Liability, Auto Liability. Directors and Officers Liability, and Employment Practices Liability. Directors and Officers Liability are on an claims-made basis. All other coverages are on an occurrence basis.

EXCESS LIABILITY - CharterSAFE Option

Coverage: <u>Excess over underlying:</u>

General Liability Auto Liability

Sexual Abuse Liability Educators Legal Liability Employee Benefits Liability Law Enforcement Liability Directors and Officers Liability

Employer's Liability

Employment Practices Liability

Limits: \$25,000,000 per occurrence/claim

\$25,000,000 per member aggregate

Optional Excess Limits: Optional excess liability limits of \$25,000,000 excess of

currently provided \$30,000,000 is available for a rate of \$1 per student (subject to a \$1,000 minimum premium). If interested,

please contact:

Arthur J. Gallagher & Co. Insurance Brokers of California, Inc

18201 Von Karman Avenue, Suite #200

Irvine, CA 92612

Audra Powers

Account Executive Audra_Powers@ajg.com

949-349-9840



PROPERTY

Perils Include:

Valuation: Replacement Cost as scheduled with CharterSAFE, see "Exposures" page above for scheduled limits **Deductible:** \$1,000 per occurrence Limits: \$150,000,000 **Property:** per occurrence Or Total Insured Value as scheduled with CharterSAFE, whichever is lower. Please see "Exposures" page above for scheduled limits **Boiler & Machinery/** \$150,000,000 per occurrence **Equipment Breakdown:** Total Insured Value as scheduled with CharterSAFE, whichever is lower. Please see "Exposures" page above for scheduled limits **Business Interruption:** \$5,000,000 per occurrence **Extra Expense:** \$5,000,000 per occurrence **Terrorism Risk Insurance** \$150,000,000 per occurrence Act (TRIA): Total Insured Value as scheduled with CharterSAFE, whichever is lower. Please see

Direct Physical Loss

Please note: If you have a renovation/construction project valued over \$200,000, please contact Thuy Ly (tly@chartersafe.org / 888-901-0004x14). CharterSAFE is able to endorse builder's risk coverage for renovation projects up to \$10,000,000 onto your policy. Additional premium would apply.

"Exposures" page above for

scheduled limits



CRIME

<u>Coverages*</u>	<u>Limits</u>	<u>Deductibles</u>
Monies and Securities:	\$1,000,000 per occurrence	\$500 per occurrence
Computer & Funds Transfer Fraud:	\$1,000,000 per occurrence	\$500 per occurrence
Forgery or Alteration:	\$1,000,000 per occurrence	\$500 per occurrence
Employee Dishonesty:	\$1,000,000 per occurrence	\$500 per occurrence

^{*}Crime coverages do not have aggregates.

TERRORISM LIABILITY

COVERAGE IS ON A CLAIMS MADE BASIS

Deductible: \$0

Limits: \$5,000,000 per occurrence/ CharterSAFE

Members' Combined Annual

Aggregate

Reporting: Must be reported to Underwriter within 90 days

after policy expiration. Coverage is provided on a

claims-made basis.

Please note: Terrorism coverage for Property is included under the "Property" Page above as "Terrorism Risk Insurance Act (TRIA)"



STUDENT ACCIDENT LIABILITY

Deductible: \$0

Limits: \$50,000 Maximum Limit per Injury/Accident

104 Week Benefit Period

\$15,000 Accidental Death Benefit

\$30,000 Accidental Dismemberment Benefit

\$500,000 Aggregate Limit of Indemnity, applicable to

AD&D only

Terms & Conditions:

 Coverage is provided on an Excess Basis (Coinsurance is covered at 100%), but would become primary should the student not have health insurance

 Claim submission deadline: 90 days of date of injury or first treatment.

• Claim processing time: 10-15 days

Optional Catastrophic Student Accident Coverage:

If interested in obtaining higher limits with or without sports included, please contact:

Arthur J. Gallagher & Co. Insurance Brokers of California, Inc. 18201 Von Karman Avenue, Suite #200 Irvine, CA 92612

Audra Powers

Account Executive Audra_Powers@ajg.com 949-349-9840



CYBER LIABILITY

Coverage Includes: • Privacy Notification Costs

• Regulatory Fines and Claim Expenses for Privacy Liability

• Extortion Damages for Extortion Threat

• Crisis Management Expenses

Business Interruption

Deductible: \$2,500 per occurrence

Limits: \$1,000,000 per occurrence

\$5,000,000 CharterSAFE Members' Combined Annual Aggregate

Reporting: Claims must be reported within 60 days after policy expiration

Requirement for Coverage to be in

effect:

Completed cyber application and signed statement of no

known losses



WORKERS' COMPENSATION & EMPLOYERS' LIABILITY

Deductible: \$0

Limits - Workers' Compensation: Statutory

Limits - Employers' Liability: \$5,000,000 Bodily Injury per Each Accident

\$5,000,000 Bodily Injury by Disease per

Each Employee

\$5,000,000 Bodily Injury by Disease Policy Limit

Auditable: The estimated payroll figure will be audited at

the end of each coverage period. The CCS JPA will request copies of the 941 Federal Quarterly Reporting Forms on a quarterly basis to verify the payroll figure. If the estimated payroll figure has been over-estimated, a refund will be

issued. If the estimated payroll figure has been under-estimated, an invoice for the additional

amount due will be issued.



charterSAF

Policy Year: 7/1/2016 - 7/1/2017

Forms and instructions available at www.chartersafe.org

Claims Reporting Quick Reference Guide

Sue Bedard, ARM-P Senior Risk & Claims Manager Phone: 818.709.1570 sbedard@chartersafe.org

Risk & Claims Manager Phone: 818.709.1570 cweston@chartersafe.org

Carly Weston, MPA

Susan Diamanti, WCCP Workers' Compensation Manager Phone: 818.239.9552 sdiamanti@chartersafe.org

EMPLOYEE INJURY

What to do if an employee injury or illness requiring professional medical treatment occurs.

If the injury requires emergency medical treatment,

call 911 and transport or request an ambulance. For

- emergency care, employee may go to nearest hospital or urgent care.

 DWC-1. Provide blank DWC-1 to the employee within one working day of finding out about an injury or illness. Injured employees must complete the employee
- section of the **DWC-1** if they opt to file a claim.

 Complete employer's portion of the returned **DWC-1** form and give a copy to the employee. Retain your copy

in a central location — not the employee's personnel file

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- Referral. Refer the employee for appropriate medical treatment at the industrial medical facility designated by the employer (unless the employee has pre-designated to use his or her own physician). Provide a copy of the Workers' Compensation Card to the employee to facilitate the medical provider's intake of the employee and the billing process.
- Report. Complete the Employee Incident Call-In Report. Then, immediately call CharterSAFE's claim hotline (877) 263-9904 to report the claim. The hotline service will complete the state-mandated DLSR 5020 (Employer's First Report) for you and will send a copy to CharterSAFE and the claim adjuster. A daim will automatically be established and the adjuster will make contact.
- There are state-imposed penalties for late or nonreporting. Report immediately. Stay involved and maintain an open dialogue with the employee – don't assume the daim administrator/adjuster is taking care

STUDENT INJURY

What to do if a student injury requiring professional medical treatment occurs.

- Provide first aid, refer student to the family's choice of medical provider, or if needed, call 911 for emergency medical treatment; contact parent/guardian per school policy (always contact immediately for head or eye injuries). Inform the parent that the Student Accident Insurance is available.*
- 2. Claim form. Complete Part 1A of the Gallagher Student Health/BMI Benefits claim form and sign it, then provide the parent/guardian with the daim form, instruction sheet and Student Injury Card. The parents are responsible for submitting a claim within 90 days, if they wish to do so.
- Report. File an incident report by completing the online student injury form at chartersafe.org. A report number will be assigned and referenced if litigation occurs. (This report is confidential and should NOT be given to parents.) NOTE: This is not considered to be "filing a claim" for medical bill payment, the parents must also complete the Gallagher Student Health/BMI Benefits claim form and send it to the insurance company, along with the requested documents.

*The Student Accident Insurance (SAI) provided by CharterSAFE covers medical expenses arising from student injuries. The family's health insurance is primary, but if there is no health insurance, the SAI becomes primary. SAI is a no-fault insurance coverage and claims do not impact the school's loss ratio. If parents are made aware of the coverage immediately following an incident, the likelihood of a lawsuit is reduced. The SAI covers students only when they are injured on campus or participating in a school-sponsored off-campus activity.

PROPERTY/ LIABILITY CLAIM

What to do if school-owned vehicle or property is damaged or stolen, liability claim, employment practices claim, or IEP/ Due Process is made against the school, or a guest injury occurs on your premises.

asserted against the school must be reported as soon as it is brought to the attention of the school and mandated report is made – regardless whether a demand letter has been received or not. A delay in reporting could result in a lapse of coverage.

NOTE: Any sexual abuse incident/allegation or claim

- Complete either the Liability Incident Call-In Report or the Property/Vehicle Loss Incident Call-In Report based upon the nature of the incident. (These forms are confidential and should NOT be given to guests or third parties.)
- Report. Then immediately call CharterSAFE's daim hotline (877) 263-9904 to report the claim. A claim file will automatically be established and an adjuster will make contact. (This report is confidential and should NOT be given to guests or third parties.) Note: The hotline is a vendor-provided service that is available 24/7 and will contact CharterSAFE immediately in an emergency; they may not be able to answer all of your questions. For claim assistance please call (818) 709-1570.

MAY 2016