

# H SAN ANTONIO INDEPENDENT SCHOOL DISTRICT

## Agenda Item Summary

Me	eting	Date:	October	16	2019

Purpose:

Presentation/Report

Recognition

Discussion/ Possible Action

Closed/Executive Session

Work Session

Discussion Only

X Consent

From: Chad Doucet, Interim Chief of Staff

Item Title: Approval of District's Self-Funded Excess Workers' Compensation Insurance

## Description:

The District solicited proposals for Excess Workers Compensation Insurance (RFP 2020-01) and received 1 response proposal.

#### Historical Data:

Excess Workers Compensation Insurance is required for the District's Self-Funded Workers Compensation Program that covers the District for both Specific and Aggregate liabilities related to Workers Compensation claims.

### Recommendation:

Approval of the selection of Safety National Casualty Corporation to provide excess workers compensation insurance for the 2019-2020 school year.

District Goal/Strategy:

Strategy 5 We will promote and ensure a safe and secure learning environment for all students.

Funding Budget Code and Amount:

\$81,922.00

CFO Approval

APPROVED BY:

**SIGNATURE** 

DATE

Chief Officer:

Superintendent:

10.11.19

Form Revised: September 2019

## Safety National Casualty Corporation 1832 Schuetz Road St. Louis, MO 63146

PHONE # (314) 995-5300

FAX # (314) 995-3843

TO:	BARNARD-DONEGAN INSURANCE	ATTN:	Mr. Gwen Crouch
PHONE:	(830) 303-8300	FAX:	(830) 303-8383
FROM:	Jim Thomas	DATE:	09/24/2019

# **EXCESS WORKERS' COMPENSATION INSURANCE QUOTATION**

Name of Risk: SOUTH SAN ANTON	IIO INDEPENDENT SCHOOL DISTRICT	
Account: 6003634		
	Specific & Aggregate Excess	

Contract Terms		Option 5646543519
Liability Period		11/01/2019 - 11/01/2020
Payroll Reporting Period		11/01/2019 - 11/01/2020
Payroll		\$ 64,302,649
Manual Premium		\$ 293,000
Experience Modification Factor		1.000
Standard Premium		\$ 293,000
Self-Insured Retention		\$ 400,000
Specific Limit		Statutory
Employers Liability Limit	Per Occ	\$1,000,000
Loss Fund Rate	Rate \$100 Payroll	\$ 2.059
Estimated Loss Fund		\$ 1,323,992
Minimum Loss Fund	Est. x 100.00 %	\$ 1,323,992
Aggregate Excess Limit		\$ 1,000,000
Loss Limitation		\$ 400,000
Premium Rate	Rate \$100 Payroll	\$ 0.1274
Deposit Premium		\$ 81,922
Minimum Premium		\$ 81,922
Pay Plan		ANNUAL PAYMENT
Audit Type		Voluntary

<sup>\*</sup>Quote expires 1 day after Payroll Reporting Period effective date for each Quote Option.

## Safety National Casualty Corporation 1832 Schuetz Road St. Louis, MO 63146

PHONE # (314) 995-5300

FAX # (314) 995-3843

TO:	BARNARD-DONEGAN INSURANCE	ATTN:	Mr. Gwen Crouch
PHONE:	(830) 303-8300	FAX:	(830) 303-8383
FROM:	Jim Thomas	DATE:	09/24/2019

## **EXCESS WORKERS' COMPENSATION INSURANCE QUOTATION**

#### **Endorsements:**

#### Option 5646543519

TEXAS MANDATORY ENDORSEMENT(S), IF APPLICABLE
0243 00 1291 (XWC) LONGSHOREMEN'S AND HARBOR WORKERS' COMPENSATION ACT COVERAGE
ENDORSEMENT - NO KNOWN EXPOSURE
0276 02 0408 (XWC) BROAD FORM ALL STATES FOR EMPLOYEE TRAVEL
0291 00 0708 (XWC) VOLUNTARY COMPENSATION ENDORSEMENT-PREMIUM DELINEATION
0341 00 0196 (XWC) SPECIFIC EXCESS COVERAGE (CASH FLOW PROTECTION)
1061 15 0519 (XWC) POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE

#### Contingencies:

# The quote is subject to the following: Option 5646543519

- Terms are subject to details surrounding the Employee Transportation exposure. The question regarding providing transportation of employees to/from work was answered "YES", but no details were given.
- Commission shall be earned by the Broker of Record on an annual basis. For a single year policy, commission shall be earned by the Broker of Record as of the Effective Date. For the first year of a multi-year policy, commission shall be earned by the Broker of Record as of the Effective Date. For each subsequent year of a multiyear policy, commission shall be considered earned by the Broker of Record as of each annual anniversary of the Effective Date.

#### Comments:

- Endorsements mandated by the coverage state(s) will automatically be added to your policy regardless of whether
  they are shown in the above schedule. In addition, a change in an endorsement form number may occur as a
  result of state filing requirements/updates arising subsequent to this quote.
- Included in our quote: MAP Client Services. These resources consist of both risk control and claim services, including resources like Safety Essentials Online, Workers' Comp Kit, and Safety Training Source. Medical Management Program. These services help facilitate complicated claims towards the best-possible outcome. Available services include Catastrophic Claims Consulting, Impartial Medical Review, Long-Term Claims Evaluation, and Chronic Pain & Opioid Dependency Programs.
- 3. This Agreement will include coverage for Workers' Compensation loss caused by acts of terrorism as defined in the Agreement. Coverage for such losses will still be subject to all terms, definitions, exclusions, and conditions in the Agreement, & any applicable federal and/or state laws, rules, or regulations. Be advised that, under the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization of 2015 (collectively, the Act), terrorism losses would be partially reimbursed by the U.S. Government under a formula established by the Act. Under this formula, the U.S. Government would generally reimburse 80% to 85% of covered terrorism losses exceeding a deductible paid by us. The Act contains \$100 billion cap that limits the reimbursement from the U.S. Government as well as from all insurers. If aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of the EMPLOYER's annual premium attributable to coverage for losses caused by a certified act of terrorism is: 0.5%

### Option 5646543519

1. Cash Flow limit is 50% of the self-insured retention.



# Your Service Team

Safety National is committed to providing industry leading services to our policyholders. The Service Team is the keystone to that promise. This highly experienced team is identified now and established early in the policy term so there is a seamless transition and efficient delivery of service for your client's needs. The Service Team consists of a one point contact in underwriting, claims, risk control, policy services, audit, legal, and finance.

We welcome the opportunity for you to experience our commitment to your success by contacting any member of our team with your questions or requests.

Jim Thomas Underwriter	(470) 266-2143	jim.thomas@safetynational.com
Sonya Hudson Coordinator - Underwriting - Stand Alone Operations	(314) 810-5452	Sonya.Hudson@safetynational.com
Don Enke Risk Control	(314) 810-5427	don.enke@safetynational.com
Joanna Pallardy MAP Client Services	(314) 692-9507	joanna.pallardy@safetynational.com
Mike Harris VP Claims	(314) 692-9516	michael.harris@safetynational.com
Shelly Stuck Premium Audit	(314) 692-1370	shelly.stuck@safetynational.com