

Frequently Asked Questions and Claim Form



STATE OF FLORIDA

EDUCATOR'S PROFESSIONAL LIABILITY INSURANCE

PROVIDED BY: NATIONAL UNION FIRE INSURANCE CO. PA. AMERICAN INTERNATIONAL GROUP

THIS INSURANCE IS PURCHASED AND ADMINISTERED BY THE DEPARTMENT OF MANAGEMENT SERVICES, DIVISION OF STATE PURCHASING. THE INSURANCE COVERAGES OUTLINED BELOW ARE PROVIDED AS AN OVERVIEW, PLEASE REFER TO THE INSURANCE POLICY FOR SPECIFICS. ALL QUESTIONS RELATING TO THIS POLICY SHOULD BE DIRECTED TO THE DEPARTMENT OF EDUCATION AT (850) 245-0505 SUNCOM 205-0505 OR STATE PURCHASING AT (850) 488-7516 SUNCOM 278-7516.

DESCRIPTION OF COVERAGE A,B,C &D:

(B) Educator professional liability coverage for eligible personnel including the monetary damages and the cost of defense for any **wrongful act** committed or omitted. Such wrongful act must arise from the eligible personnel's professional activities. **Wrongful act** means any negligent act, error, omission or breach of duty in the performance or failure to perform in the course and scope of the eligible personnel's duties. (A) The insurance company shall pay all sums in excess of the employer's commercial general liability, errors and omissions, employment practices liability policy and any other valid and collectible insurance.

(C) Bail Bonds

(D) Excess Assault-Related Personal Property Damage

DESCRIPTION OF ELIGIBLE PERSONNEL:

- *INSTRUCTIONAL PERSONNEL: (a) Classroom teachers (b) Student personnel services (c) Librarians/media specialists (d) Other instructional staff (e) Education paraprofessionals; including Student teachers and Interns.—
- *ADMINISTRATIVE PERSONNEL: (a) District-based instructional administrators (b) District-based noninstructional administrators (c) School administrators.

**Instructional and administrative personnel must be employed by the District School Board or a District Sponsored Charter School.*

LIMIT OF INSURANCE:

- Coverage A Excess Liability Coverage &

Coverage B Liability Coverage:

\$2,000,000 per personnel/per Wrongful Act
\$3,000,000 aggregate limit/per Wrongful Act

- Coverage C Bail Bonds:
\$2,000 per Bail Bond per personnel
- Coverage D Excess Assault-Related Personal Property Damage:
\$500 per claim per personnel

DEDUCTIBLE: No deductible applies to this policy

PREMIUM: Currently this insurance is provided at no cost to eligible personnel. Below is the cost that may apply in the future to each eligible personnel:

- Full-time Educators...no charge
- Part-time Educators \$2.98
- Administrative Personnel \$8.93

ENROLLMENT:

Enrollment is automatic.

CLAIM REPORTING PROCEDURES:

1. Upon knowledge of a claim or a potential claim, immediate notification must be given to the insurance company. Facsimile a completed claim form to the insurance company and insurance agent. Follow-up with a telephone call confirming their receipt of the claim notification.
2. Our claim form is used for the purpose of notification; if you have specific information relative to your claim, please include this information. The more information provided in advance the more expedient the claim process and settlement. The insurance agent may contact you for additional information relative to the claim.
3. Cooperate with the investigation.
4. Upon your notification of a loss the insurance company will assign the claim to an insurance adjuster. If available, obtain a name and number of the insurance adjuster assigned to the claim. This will allow you direct access to the insurance adjuster for claim status or additional information inquires.
5. Promptly send any legal papers or notices to the insurance agent or insurance company. Remember law suits have time constraints.
6. Refrain from any conversations with the claimant, the claimant's attorneys, or other representatives for the claimant. Direct all individuals to the insurance adjuster.
7. Take necessary action to prevent or limit damages and cost.

To file a Claim Report, call or write:

AIG Technical Services, Inc.
175 Water Street, 7th Floor
New York, NY 10038 ATTN: John Emanuilidis
Telephone: (212) 770-7000
Fax: (866) 266-5583

With a copy to:

Arthur J. Gallagher & Company, 8200 N.W. 41st Street, Suite 200
Miami, Florida 33166, 305-592-6080



EDUCATOR'S PROFESSIONAL LIABILITY CLAIM FORM

State of Florida

Employees name:

Mailing address:

Telephone number:

Current Policy No.:

Date of loss:

Kind of loss: Educators Professional Liability

Cause of loss:

Location of loss:

Description of loss (use reverse side if necessary):

Other comments:

THIS IS A GENERIC CLAIM FORM USED BY THE STATE OF FLORIDA; THE INTENT OF THIS FORM IS TO PROVIDE NOTIFICATION OF LOSS. ADDITIONAL INFORMATION MAY BE REQUIRED.

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