

Omni Insurance Services, LLC
General Liability and Claim Manual
for
Acacia Fraternity



Acacia

EFFECTIVE FOR THE ANNUAL TERM
10/1/2022 -10/1/2023

TABLE OF CONTENTS

INTRODUCTION	3
INSURANCE PROGRAM OVERVIEW.....	4
General Liability	4
Limits of Coverage	4
Acacia Fraternity Coverage includes	4
Who is an Insured?	5
Who is <i>not</i> an Insured?	5
What Does Our Coverage <i>Not</i> Include?	5
Adding Additional Insureds.....	6
Member Accident Protection Program.....	7
Directors and Officers/Employment Practices.....	8
Commercial Crime.....	9
Incident Claim Reporting.....	10
Incident Reporting Form.....	11

SECTION 1

INTRODUCTION

This manual is a work product of Omni Insurance Services LLC. Its purpose is to give you an understanding of the insurance coverage provided under the Fraternity's insurance program. The information concerning insurance coverages found within this manual is a summary of coverages provided through your international organization. It is provided for informational purposes only and does not replace or supersede the actual insurance contract. For any specific questions regarding coverages, you should refer to the applicable insurance policy or contact your Client Service Consultant.

This manual also includes information to help you properly report all actual and potential insurance claims and assist you in locating other useful resources that you may find beneficial in your chapter or alumni organization's efforts to minimize your exposure to risk. Responsibility for the success in Acacia Fraternity's safety standards rests with your chapter and members. It is always important to remember a successful chapter safety standards program is built on three pillars:

1. Loss Prevention
2. Loss Control
3. Risk Transfer (Insurance)

The collegiate and alumni members' willingness to understand and assume the responsibility of sound safety standards practices is a cornerstone of your Fraternity's safety standards program.

SECTION 2 INSURANCE PROGRAM OVERVIEW

General Liability

The following description is a summary only and is not intended to serve as a substitute for the actual insurance contract.

Acacia Fraternity's insurance program provides Commercial General Liability Coverage with the following carrier, policy period, and limits of coverage.

Primary Insurer: Transverse Specialty Insurance Company
 Policy Period: 10/01/2022- 10/01/2023

Limits of Coverage

Insured Entity	Insurer	Bodily Injury & Property Damage Per Occurrence Limit	Policy Aggregate	Policy Aggregate Applies Per Location
Undergraduate Chapters, Alumni Associations, & House Corporations	Transverse Insurance Company	\$250,000	\$500,000	Yes

Note: The expense associated with the cost of the investigation and any necessary legal fees is included and not in addition to the limits shown above. Transverse Specialty Insurance Company's duty to defend will cease upon exhaustion of the limit of liability.

The General Liability policy provides coverage for claims brought by a third party alleging an Insured's negligence resulted in damages associated with bodily injury, property damage, or personal injury. This policy protects the local collegiate chapter, house corporations, alumni associations, chapter related educational foundations, and each of their officers, directors, employees, members, and volunteers from these types of claims subject to the policy's limitations and exclusions.

Acacia Fraternity Coverage includes:

1. **COMMERCIAL GENERAL LIABILITY**
 Covers liability arising out of Fraternity premises and operations.
2. **HIRED & NON-OWNED AUTOMOBILE LIABILITY COVERAGE**
 Applies to the situation when a chapter member, chapter employee or volunteer alumni driving their own car on fraternity business is involved in an accident. Its intent is to only cover entities of Acacia Fraternity and individuals not involved in the accident. The intent is not to provide auto liability coverage to those who are not prudent enough to purchase their own auto liability policy or ensure the vehicle they are operating has ample coverage to protect their interest. The auto insurance of the driver and/or auto owner will be the primary insurance coverage.
3. **PRODUCTS/COMPLETED OPERATIONS LIABILITY**
 Covers preparation and consumption of food and beverages.
4. **PERSONAL INJURY & ADVERTISING INJURY**
 Covers libel, slander, defamation of character, false arrest, detention, malicious prosecution, wrongful entry or eviction, invasion of privacy.
5. **CONTRACTUAL LIABILITY COVERAGE**
 Under certain circumstances, the liability coverage of Acacia Fraternity's insurance contract is extended to protect other parties with whom an Acacia Fraternity chapter may enter into a

contractual agreement. No contract should be signed by any entity/chapter of Acacia Fraternity, without the knowledge and permission of the National Headquarters.

6 WATERCRAFT LIABILITY

Covers hired and non-owned boats/watercraft providing it is less than 52 feet in length.

7. DAMAGE TO PREMISES YOU RENT

Provides coverage for damages caused by an Insured's negligence to a premise rented by an Insured, coverage is limited to the perils of smoke and fire.

8. WORLDWIDE COVERAGE

Coverage worldwide for suits brought in the United States and Canada.

Who is an insured?

The insurance coverage will pay claims up to the stated liability for the following organizations and/or people:

- a. The local collegiate chapter that is chartered and recognized by the Fraternity **when it complies with the laws** of the host institution, city, county, state, and country in which it operates and the policies of Acacia Fraternity. Collegiate chapter officers, executive committee, committee chairman, and members while performing the duties of elected or appointed positions within the scope of their duties on behalf of the organization, and in compliance with Acacia policies.
- b. House Corporations, Householding Corporations, Chapter Education Foundations, House Associations, Alumni Control Boards, Alumni Adviser Boards, Alumni Associations, Alumni Corporations, Alumni Chapters, Board of Advisers, Board of Governors, Executive Councils, and Parent Clubs, but only while acting within the scope of their duties on behalf of the organization and in compliance with Acacia policies.
- c. Officers, Directors, Trustees, Partners, Coordinators, Custodians, Committee Members, Council Members, Volunteers, Housemothers, Resident Advisers, Faculty Advisers, Fraternity Members, Member Candidates (Pledges), and Employees of The Named Insured, but only while acting within the scope of their duties on behalf of the organization and in compliance with Acacia policies.

Who is *not* an insured?

- A. Any individual member, alumnus, trustee, or adviser who is performing tasks outside of his responsibility or not in compliance with Acacia policies (i.e. spontaneous social function planned by an individual member, chapter adviser consuming alcohol with collegians, hazing of members, etc.).
- B. Any member who's illegal or intentional actions result in death or injury to an individual or property damage.
- C. Any insured(s) that participate, supervise, or direct others to participate in Excluded Acts, including but not limited to Assault and Battery, Sexual Abuse or Molestation. "Participate" means to take part in an excluded activity, whether as a direct perpetrator of the excluded activity or as an observer of such activity. "Participate" also means to have knowledge of the excluded activity and fail to aid or respond to the care of anyone injured as a result of the excluded activity.
- D. Any insured(s) that participate, supervise, or direct others to participate in Hazing, as well as the "insured entity" to which the insured(s) belong. "Participate" means to take part in an excluded activity, whether as a direct perpetrator of the excluded activity or as an observer of such activity. "Participate" also means to have knowledge of the excluded activity and fail to aid or respond to the care of anyone injured as a result of the excluded activity.
- E. Members' parents or family members and guests of chapter members.
- F. College/University administration (see Adding Additional Insureds below).

What Does Our Coverage *Not* Include?

- A. Any claim of bodily injury and/or property damage from an incident resulting when:

1. An illegal act was committed.
 2. An intentional act was committed.
 3. A contract not authorized by National Headquarters.
 4. There is any discharge, release or escape of smoke, vapors, soot, fume, acids, toxic chemicals, etc. upon land, the atmosphere or any water course or body of water.
 5. An employee is hurt on the job. Workers' Compensation coverage must be purchased.
 6. Any act excluded from coverage by the insurance policy.
 7. A members animal injures someone.
- B. Any claim of property damage to property owned by, rented by, used by, or cared for by an Insured. For example, the chapter rents a portable generator for an outdoor function, and while it is in the care, custody, and control of the chapter, it is damaged, and the lessor holds the chapter responsible and liable. No coverage is available under Acacia Fraternity liability insurance policies.

Adding Additional Insureds

An Additional Insured may be added to this policy. A party requesting to be added as an Additional Insured may be your landlord, college, university, and/or proprietor from whom the chapter may be renting a venue for an event.

Please submit a completed Additional Insured Request Form found at [Insurance Forms | Omni Insurance Services \(omniinsuranceservicesllc.com\)](https://www.omniinsuranceservicesllc.com) at least (30) thirty days prior to the need by date. The form will be reviewed by Omni/FRMT and presented to the National Headquarters to approve the request and instruct Omni Insurance Services to issue the COI. Omni Insurance Services LLC. will send the COI to the National Headquarters.

Member Accident Protection Program

Insurance Carrier: FRMT, Ltd.
Policy Term: October 1, 2022 to October 1, 2023
Limits of Coverage: \$100,000 Accidental Medical Expenses and/or Accidental Dental Injury
Maximum
\$5,000 Accidental Dismemberment and/or Accidental Death Benefit
52 Week Benefit Period

The Policy does not cover loss nor provide benefits for:

- Expenses for treatment on or to the teeth, except for treatment resulting from injury to natural teeth.
- Eyeglasses, hearing aids, and examination for the prescription or fitting thereof.
- Suicide, attempted suicide, or intentionally self-inflicted injury.
- Injury due to participation in a riot.
- Cosmetic surgery.
- Loss resulting from air travel, except as a fare-paying passenger on a commercial airline.
- Injury or sickness resulting from any declared or undeclared war.
- Injury or sickness while in the armed forces of any country.
- Injury or sickness covered by any workers compensation or occupational disease law.
- Treatment provided in a government hospital unless the Insured is legally obligated to pay such charges.
- Infections except pyogenic or bacterial infections caused wholly by a covered injury or sickness.
- Claims occurring while parachuting or hang-gliding.
- Expenses covered by any other policy.
- Hernia in any form.
- Sickness or disease, in any form.
- Fighting, unless an innocent victim.
- Injuries due to intramural tackle football, hockey, or rugby. All other intramural activities are covered.
- All intercollegiate sport participation including off-season conditioning.

The Fraternity's insurance program includes member accident protection as a benefit of membership.

This covers all U.S. undergraduate members of Acacia that meet the following criteria:

- In good standing with the Fraternity.
- Membership has been reported to Acacia Fraternity.
- Currently enrolled at the college or university where your chapter is located.

If the accident occurs during summer or holiday break, the member must have been enrolled during the Prior school term and be enrolled for the next term.

This coverage is intended to complement health insurance. The student should have health insurance through their parents or another arrangement. The Member Accident Protection Program is not a substitute for primary health insurance. This is a supplemental ACCIDENT ONLY protection and does not provide any protection for medical costs arising out of a SICKNESS. The policy pays eligible medical expense that is not recoverable from any other insurance policy, service contract, or workers compensation policy. Most commonly, this policy will reimburse deductibles and co-pays of health insurance programs.

If you have a claim, use this link, and follow the instructions:

<https://www.omniinsuranceservicesllc.com/fraternity-mapp>

Directors & Officers/Employment Practices

The Acacia Fraternity insurance program includes Directors & Officers/Employment Practices Liability (D&O/EPL) coverage to recognized collegiate chapters, colonies, house corporations, alumni associations, and chapter educational foundations. D&O/EPL coverage protects all directors, officers, volunteers, and the associated entity from claims arising out of the failure or negligence of an Officer or Director in fulfilling their fiduciary duties of diligence, obedience, and loyalty to the organization.

Claims covered under a Directors & Officers liability policy typically involve claims brought against an Officer or Director that alleged financial injury to the organization due to their maleficence in their service to the organization. It does not protect Officers and Directors from claims involving bodily injury, property damage, or personal injury. Those types of claims are covered under the General Liability Policy.

In addition, the Directors and Officers Liability Coverage of the Fraternity provides Employment Practices Liability coverage that protects recognized collegiate chapters, house corporations, alumni associations, and chapter educational foundations from employment-related claims. This would include issues of discrimination, harassment, and wrongful termination arising in an employer/employee relationship.

Pursuant to the terms of the D&O / EPL policy, defense costs incurred by the insured or settlements made without the prior written consent of the insurance carrier will NOT be covered under the policy.

Directors and Officers Liability Not for Profit

INSURER: RSUI Indemnity Company
COVERAGE TYPE: Claims-Made and Reported
POLICY PERIOD: 10/1/2022 TO 10/1/2023

LIMITS OF LIABILITY: \$2,000,000 Policy Aggregate

RETENTION/Deductible: \$0 Insured Person
\$5,000 Insured Organization

EMPLOYMENT PRACTICES

\$1,000,000 Limits of Liability/Aggregate
\$5,000 Each Claim
\$25,000 Third Party Claim

Commercial Crime Coverage

The Acacia insurance program provides coverage for employee theft, which includes officers and volunteers, forgery and alteration of checks, and computer and wire transfer fraud. This coverage applies to all recognized collegiate chapters, colonies, house corporations, alumni associations, and chapter educational foundations

Crime

INSURER: Zurich American Insurance Company
COVERAGE: Crime/Fidelity
COVERAGE TYPE: Discovery
POLICY PERIOD: 10/1/2022 TO 10/1/2025

LIMITS OF LIABILITY: \$25,000 Employee Theft
\$25,000 Forgery or Alteration
RETENTION: \$1,000 Per Occurrence

Cyber Coverage

INSURER: Trisura Specialty Insurance Company
COVERAGE: Cyber Liability
POLICY PERIOD: 10/1/2022 TO 10/1/2023 12:01 A.M. STANDARD TIME

LIMITS OF LIABILITY: \$1,000,000
PRIVACY: \$1,000,000 Information Privacy Liability
FINANCIAL FRAUD: \$250,000

RETENTION: \$2,500 Each Claim

SECTION 3 INCIDENT CLAIM REPORTING

General Liability claims can be numerous and usually arise out of activities of a chapter which cause bodily injury, property damage or personal injury to an individual. They will more than likely involve property damage or injury to someone other than an employee or an officer of the Fraternity.

While on the scene, if possible, get names, addresses and phone numbers of all parties involved, as well as any witnesses to the accident. Immediately complete the attached incident reporting form and submit.

What should be reported?

Report bodily injury of anyone other than an employee and any property damage for which there is the possibility a claim may be made against Acacia Fraternity. If you question whether to report a potential claim, **report it!**

It is imperative all losses or incidents be reported immediately to Acacia Fraternity. (See phone numbers and address below.) The Executive Director of Acacia Fraternity is responsible for providing the initial report of the claim to Dynamic Claims. (See phone numbers and address below.) Once the claim report is sent to Dynamic Claims you will be contacted directly by them or an insurance company representative to discuss the incident. If you are unable to obtain all necessary details when first notified of any incident, still report any known facts.

Acacia Fraternity
2721 Meeting House Rd.
Carmel, IN 46032

FRMT@Dynamicclaims.com
(883)-264-7398

Patrick McGovern, Executive Director
Phone: (317) 872-8210
Email: pmcgovern@acacia.org

There will be occasions when lawsuits may be served on a member of your chapter. As there is only a limited time to answer a lawsuit, the following procedure applies:

- a. Treat any potential or actual claim or lawsuit as a high priority item and immediately notify National Headquarters by phone.
- b. Utilizing the enclosed incident reporting form, note all relevant information.
- c. Forward the suit or incident report via email to Patrick McGovern, at pmcgovern@acacia.org. If you do not have access to email, overnight the papers to Acacia Fraternity, 12721 Meeting House Road, Carmel, IN 46032. It is very important the claim or lawsuit be sent immediately.

All questions regarding insurance interpretation and coverage should be directed to:

Omni Insurance
12 Mohawk Place
Amsterdam, NY 12010

Gerard Colistra, President
Phone: 518-448-3352 cell
Email: gcolistra@omniinsuranceservicesllc.com

FRMT LTD. GENERAL LIABILITY INCIDENT CLAIM REPORTING FORM

When an incident occurs causing bodily injury or property damage to any person, the following information must be obtained immediately. This report is being prepared for submission to the Fraternity's General Counsel, so please be thorough. Do not withhold reporting an incident to obtain all required information. Because timeliness is of the essence, report it immediately and send a copy within **24 hours** to the National Headquarters. If the bodily injury is of a serious nature, a **telephone call** should also be made.

Use this form to report an incident in which breach of risk management policy, severe injury, tragedy, or other emergency has occurred. If you have not already done so, notify your chapter advisor of the incident and await further instructions. All form fields are required.

Save a copy of his completed form and email it to FRMT@Dynamicclaims.com. If you require additional assistance, call (833)-264-7398. The Fax number is (949)-474-0550.

SUBMITTER INFORMATION

Your full name: Click or tap here to enter text.

Date and Time of the incident: Click or tap to enter a date.

Chapter: Click or tap here to enter text. School: Click or tap here to enter text.

Your email address: Click or tap here to enter text. Your phone number: Click or tap here to enter text.

Your Title (if applicable): Click or tap here to enter text.

Have any college/university officials been informed? Yes No

If so, when was he notified? Date: Click or tap to enter a date.

Has the media contacted you? Yes No If so, who? Click or tap here to enter text.

Has the chapter advisor been notified? Yes No Date: Click or tap to enter a date.

If so, when was he notified? Click or tap here to enter text.

Chapter Advisors name: Click or tap here to enter text. Phone number: Click or tap to enter a date.

Has the House Corporation President been notified (if applicable)? Yes No

If so, when was he notified? Click or tap here to enter text.

House Corporation Presidents name: Click or tap here to enter text.

Was law enforcement or any emergency vehicles involved? Yes No

Explain:

Click or tap here to enter text.

Are there any witnesses? Yes No

Explain:

Click or tap here to enter text.

Is there anyone else connected to this incident?

Explain: Click or tap here to enter text.

If someone was injured, provide his/her name(s) and contact information below and describe the nature of the injury. Please indicate whether the injured person(s) is/are members(s) of Fraternity.

Click or tap here to enter text.

Describe what happened: Click or tap here to enter text.