

**SOCIP BROCHURE DESCRIPTION**

This brochure provides a summary of the Special Olympics Corporate Insurance Program (SOCIP). SOCIP is the customized Special Olympics insurance program that provides certain common coverages for all U.S. Programs and SOI in accordance with Special Olympics Official General Rules Section 9.09. Detailed terms and conditions of coverage are contained in each respective policy, which can be obtained through American Specialty Insurance & Risk Services, Inc. ("American Specialty").

**NAMED INSUREDS**

- Special Olympics, Inc.
- All Special Olympics Accredited U.S. Programs

For the purposes of this brochure, "Registered Volunteer" and "Registered Class A Volunteer" are both defined as a volunteer who is registered in accordance with the Special Olympics General Rules or other Special Olympics policies in effect during the policy period.

**COMMERCIAL GENERAL LIABILITY (GL)**

**Description of Coverage:** The general liability coverage protects insured Special Olympics organizations, athletes, and registered volunteers from third-party claims of bodily injury, property damage, and personal and advertising injury due to alleged negligence arising from the conduct by Special Olympics during a Special Olympics activity. Under the policy, the insurer has a "duty to defend" until such time as legal liability has been established, and therefore, defense costs associated with the aforementioned general liability claims are paid regardless of legal liability.

In addition, the general liability policy has been endorsed to provide coverage for losses resulting from damage to property in the care, custody, or control of Special Olympics, excluding watercraft, aircraft, autos, and Special Olympics owned property. The loss must occur during a Special Olympics conducted/ sponsored event and Special Olympics must be found legally liable for the loss. The limit of liability is \$100,000, subject to a \$2,500 deductible per claim, for such property losses.

**Insurer:** Philadelphia Indemnity Insurance Company

**Policy Number:** PHPK663720

**Additional Insureds:** Entities with an insurable interest will be named as an Additional Insured, but only with respect to liability resulting from the negligent acts or omissions of Special Olympics, as requested and approved by American Specialty on behalf of Philadelphia Indemnity Insurance Company.

**NOTE:** Only American Specialty may issue certificates of insurance on behalf of Philadelphia Indemnity Insurance Company - no authority is granted to any other entity.

**GENERAL LIABILITY COVERAGE & LIMITS:**

- Each Occurrence	\$1,000,000
- General Aggregate (other than products and completed operations)	\$5,000,000
- Sexual Abuse and Molestation per-occurrence (included in policy limits, but subject to a \$100,000 self-insured retention)	\$1,000,000
	\$2,000,000 agg.

**COMMERCIAL GENERAL LIABILITY**

(CONTINUED)

**GENERAL LIABILITY COVERAGE & LIMITS**

- Products-Completed Operations	\$1,000,000
- Participant Legal Liability	Included
- Personal and Advertising Injury	\$1,000,000
- Damage to Premises Rented to You	\$1,000,000
- Medical Payments	Excluded

**NOTE:** If alcohol is being served/sold at your event, please contact American Specialty (regardless of whether or not a Program is selling alcohol). If it is determined that liquor liability coverage is needed, an application must be completed by the U.S. Program and approved by American Specialty and Philadelphia Indemnity Insurance Company. The minimum premium is \$200.

The following fundraising activities are EXCLUDED from the SOCIP GL policy and may only be deemed eligible for coverage if certain underwriting requirements are met and the activity is approved by the Insurer prior to the event. Please contact Jina Doyle immediately if you are aware of a fundraising activity involving any of the following activities:

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|--|---|
| • Golf Ball Drops  | • Firearms  |
| • Rodeos   | • Political Rallies   |
| • Animals  | • Fundraising Activities lasting more than 7 consecutive days |
| • Fundraising events with greater than 5,000 people at any one time (other than a Polar Plunge winter fundraising event) | • Aircraft (other than airplane pulls)                        |
|  | • Over The Edge events  |

The following exclusions and requirements apply with respect to all Special Olympics events, fundraising or otherwise. Please contact Jina Doyle if any of your activities involve the following:

- |                              |                                    |
|------------------------------|------------------------------------|
| • Hot Air Balloons           | • Skydiving                        |
| • Fireworks                  | • Aircraft                         |
| • Rock Climbing Walls        | • Construction Activities          |
| • Mechanical Amusement Rides | • Watercraft (longer than 75 feet) |
| • Inflatables                |                                    |

**NON-OWNED & HIRED AUTOMOBILE LIABILITY (NOHA)**

**Description of Coverage:** This policy provides protection to Special Olympics for liability claims arising as a direct result of the use of a non-owned or hired automobile. For coverage to be effective, the vehicle must be used for Special Olympics' business with the permission of Special Olympics and driven by an employee or a registered volunteer of Special Olympics.

**Restrictions:** Non-owned and hired auto liability coverage applies excess of any other valid and collectible insurance.

**NOTE:** Excess coverage is provided to Registered Class A Volunteers of Special Olympics who are using their personal vehicles on behalf of and with the permission of Special Olympics, and have a valid driver's license and proof of insurance with at least the state minimum requirements.

**NOHA**

(CONTINUED)

Additionally, employees of Special Olympics are insured while using their own vehicles for Special Olympics business.

**Insurer:** Philadelphia Indemnity Insurance Company

**Policy Number:** PHPK663720

**Covered Autos:**

- **Hired Autos** - Special Olympics' autos that are leased, hired, rented (e.g. rental vehicles), or borrowed for less than one month by your Program, which are used in your business.
- **Non-Owned Autos** - Special Olympics' autos that are not leased, hired, rented, or borrowed that are used in your business (e.g. autos owned by employees or by volunteers).

**COVERAGE & LIMITS:**

- Any One Accident	\$1,000,000
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**NOTE:** No coverage is provided for losses caused by an uninsured/underinsured motorist to non-owned vehicles; however, uninsured/underinsured motorists' coverage is afforded for vehicles that are commercially rented by an insured. The uninsured/underinsured motorist limit is \$55,000 (combined single limit) or increased to meet the statutory limits required by a particular state.

**HIRED AUTO PHYSICAL DAMAGE**

**Description of Coverage:** Coverage is provided for physical damage claims arising as a direct result of the use of a "commercially rented" vehicle by a Special Olympics' employee, or registered volunteer for Special Olympics' business with Special Olympics' permission.

A vehicle is considered "commercially rented" if it is:

- obtained from an entity whose primary commercial purpose is renting vehicles for profit;
- a specific rental charge is made; and
- a rental contract is executed between the rental establishment and Special Olympics with respect to the particular vehicle.

The policy is subject to the limit and deductible shown below.

**DEDUCTIBLE & LIMITS:**

- Hired Auto Physical Damage (per vehicle)	\$55,000
- Deductible (per accident) collision	\$1,000
- Deductible (per accident) other than collision	\$100

**EXCESS LIABILITY**

**Description of Coverage:** These policies provide insurance coverage in excess of scheduled underlying SOCIP policies for all Special Olympics Accredited U.S. Programs and Special Olympics, Inc. Contact American Specialty to determine if your policies (other than certain SOCIP policies) qualify to be scheduled for coverage under the excess policies.

**EXCESS LIABILITY**

(CONTINUED)

**Insurer:** Philadelphia Indemnity Insurance Company  
**Policy Number:** PHUB330254

**EXCESS (10X1) COVERAGE & LIMITS:**

- Policy Aggregate	\$10,000,000
- Each Occurrence	\$10,000,000
- Sexual Abuse and Molestation	Included
- Self-Insured Retention	\$10,000

**Insurer:** Market American Insurance Company  
**Policy Number:** XOMW179910

**EXCESS (10 part of 20 excess of 10 excess of underlying) COVERAGE & LIMITS:**

- General Aggregate	\$10,000,000
- Each Occurrence	\$10,000,000
- Products/Completed Operations Agg.	\$10,000,000
- Sexual Abuse & Molestation	Included

**Insurer:** American Guarantee & Liability Insurance Company  
**Policy Number:** AEC534352906

**EXCESS (10 part of 20 excess of 10 excess of underlying) COVERAGE & LIMITS:**

- General Aggregate	\$10,000,000
- Each Occurrence	\$10,000,000
- Products/Completed Operations Aggregate	\$10,000,000
- Sexual Abuse and Molestation	Included

**PARTICIPANT ACCIDENT MEDICAL**

**Description of Coverage:** This policy responds when injuries resulting from an accident occur during a Covered Event or during Covered Travel. This is an accident medical policy, not a sickness or illness medical policy. For example, it may cover the medical expenses caused by a broken leg, but not those caused by appendicitis. An accident must occur in order for coverage to apply.

The accident medical insurance policy is excess of any other valid and collectible insurance or medical plan applicable to the injured participant.

**Injuries** are defined as accidental bodily injuries received while insured under this coverage and resulting independently of sickness and all other causes. A covered loss, for purposes of this insurance, will include: a) the repair or replacement of existing prosthetic devices such as artificial limbs, glass eyes, and artificial dental work; and b) bodily injuries arising as a result of a seizure (including epileptic seizures). To be covered, the Injury must occur while:

- participating in activities sponsored and supervised by Special Olympics; or
- traveling to, during, or after such activities as a member of a group in transportation furnished or arranged by Special Olympics.

## PARTICIPANT ACCIDENT

(CONTINUED)

**Covered Event** is defined as any scheduled activity authorized, organized, and supervised by Special Olympics. With respect to competition activities, this includes pre-competition activities and practice sessions.

**Covered Event** also includes activities authorized by Special Olympics that are Directly Supervised by Registered Class A Volunteers, but only when participation is part of the Special Olympics athlete's overall sports training for Special Olympics, or for the purposes of qualifying for Special Olympics competition.

**Directly Supervised** is defined as supervised in person by a Registered Class A Volunteer.

**Registered Class A Volunteer** is defined as an individual currently registered in accordance with the Special Olympics Official General Rules (July 1997 edition, and as amended from time to time) or other Special Olympics policies in effect during the policy period.

**Covered Travel** is defined as travel that is traveling to, during, or after such activities as a member of a group in transportation furnished or arranged by Special Olympics.

**Insured Persons** are defined as U.S. Special Olympics athletes (including Young Athletes), unified partners, managers, coaches, officials, chaperones, supervisors, fundraising participants, and other volunteers, whose names are on file with Special Olympics, while participating in a Covered Event.

### PARTICIPANT ACCIDENT COVERAGE & LIMITS:

- Excess Accident Medical/Dental Limit*	\$10,000
- Accidental Death Limit	\$5,000
- Dismemberment:	
- Both hands or feet	\$5,000
- Both eyes	\$5,000
- Speech and hearing (both ears)	\$5,000
- One hand or one foot or speech or hearing	\$2,500
- Thumb and index finger of the same hand	\$1,250

Only one of the amounts above (the largest applicable) will be paid.

\* Dental includes sound and natural teeth and repair and replacement of existing artificial dental work.

**NOTE:** Please see the policy wording for a listing of all coverage exclusions.

## VOLUNTEER MEDICAL MALPRACTICE

**Description of Coverage:** This policy provides insurance coverage for medical malpractice claims for medical services rendered at Special Olympics events by state-registered medical/health professionals who are registered Special Olympics volunteers, other than doctors, acting in the capacity of a Special Olympics Registered Volunteer. Coverage is not provided for doctors. Commercial medical service firms volunteering the services of their paid employees are not covered. However, should any of these employees volunteer their services on a personal basis, separate from their employment status, coverage would be extended, provided such person is not a doctor and is a Special Olympics Registered Volunteer in accordance with the Special Olympics Official General Rules or other Special Olympics policies in effect during the policy period.

## VOLUNTEER MEDICAL MALPRACTICE

(CONTINUED)

**Insurer:** Evanston Insurance Company

**Named Insured:** Special Olympics, Inc.

**Policy Number:** SM876819

### MEDICAL MALPRACTICE COVERAGE & LIMITS:

- Each Claim	\$1,000,000
- Aggregate	\$3,000,000
- Deductible - each claim	\$2,500

**NOTE:** Medical Malpractice coverage for Healthy Athletes physicians is provided under a separate policy, which is paid for by Special Olympics, Inc. Please contact American Specialty for further information.

## CRIME

**Description of Coverage:** This policy provides insurance coverage to Special Olympics Accredited U.S. Programs against fraudulent, dishonest, or criminal acts committed by a Special Olympics' employee, volunteer, or board member acting alone, or in collaboration with others, and causing Special Olympics to suffer a loss of money, securities, or property.

This policy provides world-wide coverage.

This policy also includes coverage for losses sustained by an ERISA plan.

**Insurer:** Chubb Insurance Company

**Policy Number:** 8223-1333

### CRIME COVERAGE & LIMITS:

- Employee Dishonesty policy limit	\$500,000
- Retention (per occurrence)	\$100,000

## DIRECTORS & OFFICERS LIABILITY (D&O)

**Description of Coverage:** Each U.S. Program and Special Olympics, Inc. has bound D&O coverage through Philadelphia Indemnity Insurance Company. The D&O policy provides protection against liability caused by the wrongful acts of directors, officers, trustees, employees, and volunteers of Special Olympics, including employment-related practices. The policy does not cover bodily injury losses or breach of contract. Directors, officers, trustees, employees, volunteers, or the entity itself must be named in a lawsuit in order for coverage to respond. The limits, retention, and premium that apply to each U.S. Program will vary, depending on whether or not the U.S. Program has sustained losses in the past or its desired limit of liability. The minimum limit is \$1,000,000 per claim/annual aggregate.

If you are interested in increasing your limit of liability, please contact Jina Doyle.

## AMERICAN SPECIALTY CONTACT INFORMATION

### RISK MANAGEMENT/INSURANCE QUESTIONS:

*Jina Doyle, Vice President, Special Programs*

Phone: 800-245-2744, ext. 127

Fax: 260-672-8835

Email: [jdoyle@amerspec.com](mailto:jdoyle@amerspec.com)

### CERTIFICATE/COVERAGE/CONTRACT QUESTIONS:

*Rene Waterson, Vice President, Policy Services*

Phone: 800-245-2744, ext. 135

Fax: 260-672-8835

Email: [rwatson@amerspec.com](mailto:rwatson@amerspec.com)

### CLAIMS QUESTIONS:

#### GENERAL LIABILITY AND AUTOMOBILE:

*Cathy Schell, Vice President, Claims Services*

Phone: 800-566-7941, ext. 245

Fax: 260-672-8835

Email: [cschell@amerspec.com](mailto:cschell@amerspec.com)

#### PARTICIPANT ACCIDENT:

*Cindi Richhart, Assistant Vice President, Claims Services*

Phone: 800-566-7941, ext. 122

Fax: 260-672-8835

Email: [crichhart@amerspec.com](mailto:crichhart@amerspec.com)

### MAIL OR FAX CLAIMS TO:



AMERICAN SPECIALTY\*

AMERICAN SPECIALTY INSURANCE & RISK SERVICES, INC.

P.O. Box 459

ROANOKE, IN 46783-0459

FAX: 260-672-8835

800-245-2744

[WWW.AMERSPEC.COM](http://WWW.AMERSPEC.COM)

American Specialty Insurance & Risk Services, Inc. also conducts business as A.S.I.R.S.I. Insurance Agency in the state of California, American Specialty Insurance & Risk Services Agency in the state of Michigan, and A S Insurance & Risk Services Agency in the state of New York.

THE 2011



Special Olympics

CORPORATE INSURANCE PROGRAM