**RFP 24-76291**

**TECHNICAL PROPOSAL**

**ATTACHMENT F**

***Technical Proposal***

**Instructions: Please supply all requested information in the areas shaded yellow and indicate any attachments that have been included. If a question does not apply to the Conference/Workshop being proposed please answer the question N/A. Document all attachments and which Section and question they pertain to in Attachment F. DCS is expecting creative cost saving solutions from all of the Respondents in an effort to distinguish the best partner(s) to select.**

**Provide the Technical Proposal Section number and name for which this Attachment F is being completed.**

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| Request for Proposal 24-76291, Department of Child Services, Technical Proposal 2.4 |

**2.4.1 What and Who’s Covered**

1. Describe the Broad Liability Coverage being proposed including covered parties that meets or exceeds the needs requested.

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| Coverage provided for Licensed Foster Parents and Kinship Families of the State of Indiana Department of Child Services.  LIMITS & DEDUCTIBLES  FOSTER PARENT LIABILITY – THE PRINCETON EXCESS AND SURPLUS LINES INSURANCE COMPANY  Each Occurrence / Per Family Aggregate:  Coverage A – Bodily Injury and Property Damage Liability $ 100,000/ $ 100,000  Coverage B – Personal Property Owned by or in the Care, Custody & Control of an Insured $ 20,000/ $ 100,000  Deductible – Coverage B – for insured owned property $250  Coverage C – Abuse or Molestation, Willful Neglect & Corporal Punishment Defense Extension $100,000/ $100,000  Policy Aggregate:  Policy Aggregate Limit - Coverage A, B, and C $ 1,000,000  Retroactive Dates:  Retroactive Date for Licensed Foster Parents: 01/01/2015  Retroactive Date for Kinship Families: 01/01/2024 |

1. Describe the Legal Defense Cost Coverage being proposed including covered parties that meets or exceeds the needs requested.

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| Coverage provided for Licensed Foster Parents and Kinship Families of the State of Indiana Department of Child Services.  Coverage C – Abuse or Molestation, Willful Neglect & Corporal Punishment Defense Extension $100,000 Each Occurrence / $100,000 per Family Aggregate. |

**2.4.2 Deductible**

1. Provide the policy deductible amount.

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| Deductible – Coverage B – for insured owned property $250 |

**2.4.3 Principal Exclusions**

1. List all exclusions contained in the proposed policy.

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| **Coverage A – Bodily Injury and Property Damage Liability Exclusions:**   * Criminal, Dishonest or Fraudulent Acts * Contractual Liability * Breach Of Contract * Liquor Liability * Pollution * Aircraft, Auto Or Watercraft * Mobile Equipment * War * Damage To Property * Business Pursuits * Abuse, Molestation, Willful Neglect, Corporal Punishment * Professional Liability * Communicable Disease * Punitive Damages, Taxes, Fines, Penalties, Uninsurable Matters * Workers Compensation And Similar Laws * Employer's Liability * Controlled Substance * Electronic Data * Personal Injury * Electronic Chatrooms Or Bulletin Boards * Knowing Violation Of Rights Of Another * Lead Or Asbestos * Fungi Or Bacteria * Prior Acts * Claims or Circumstances Reported to Prior Insurers * Trampolines * Bed Bugs, Vermin or Insects * Nuclear Energy   **Coverage B – Personal Property Owned by or in the Care, Custody & Control of an Insured**   * Criminal, Dishonest or Fraudulent Acts * Intentional Acts * Bodily Injury * Pollution * Pollution-Related * Professional Liability * Aircraft, Auto Or Watercraft * Bed Bugs, Vermin or Insects   **Coverage C – Abuse or Molestation, Willful Neglect & Corporal Punishment Defense Extension**   * Damages |

**2.4.4 Claim Maximum Limit**

1. List all policy limits for the proposed policy.

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| LIMITS & DEDUCTIBLES  FOSTER PARENT LIABILITY – THE PRINCETON EXCESS AND SURPLUS LINES INSURANCE COMPANY  Each Occurrence / Per Family Aggregate:  Coverage A – Bodily Injury and Property Damage Liability $ 100,000/ $ 100,000  Coverage B – Personal Property Owned by or in the Care, Custody & Control of an Insured $ 20,000/ $ 100,000  Coverage C – Abuse or Molestation, Willful Neglect & Corporal Punishment Defense Extension $100,000/ $100,000  Policy Aggregate:  Policy Aggregate Limit - Coverage A, B, and C $ 1,000,000 |

**2.4.5 Claims Management**

1. Describe your agency’s claim handling procedures and guidelines, including but not limited to reporting, claims payment, denial process, denial reasons, denial appeals process, claim support contact times and contact methods.

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| Loss Reporting Information:  All losses, accompanied by their respective loss notices, should be reported to Network Adjusters, Inc. using one of the following methods:  Claim Call Center:  Address:  8055 E. Tufts Ave, Suite 600  Denver, CO 80237  Phone: 877.533.1211  Nancy Harnett, AVP and Claim Director - Ext 694  Reyleen Wood, Office Manager - Ext 699  J. Mayer, President - Ext 664  Karen Zapata, Subrogation Supervisor - Ext 326  To Report a New Claim or Loss:  Phone: 877.533.1211 option 5  24 hour call center  Email: [networknewloss@networkadjusters.com](mailto:networknewloss@networkadjusters.com)  **A Personal Approach**  While technology adds speed and efficiency, it is top-quality people that drive top-quality claims handling. That’s why we continue to grow our industry-leading claims teams with the most experienced claims professionals in the business.  Moreover, the claims professionals focus on working together efficiently while communicating proactively with you throughout the entire claims process. Should you face a claim, you will quickly see our response is not about drafting letters, it’s about having a dialogue - and responding to your particular needs and concerns.  Whether you face a property loss, a large scale casualty crisis, or allegations of negligence, you will have the experts you need at your service. Putting your policy to work for you.  **Claims Advocacy Support:**  In addition to the claims team at the Third-Party Adjusters, Network Adjusters, you will have claims advocacy support from MJ and facilitated wholesale access partners. If we are fortunate to partner together, we will immediately coordinate a claims-dedicated welcome/introductory meeting with the claims team to formally introduce the team and outline roles and responsibilities, claims reporting process and notifications, coordinate claims review calls, loss reports, and claims special handling instructions. |

**2.4.6 Policy Creation and Administration**

1. Describe your process to accommodate policy requests from families from all parts of the State of Indiana and at different times of the year and how policy information will be communicated to them as they are added.

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| One of the key advantages of our proposed program is that the proposed insurance program provides automatic coverage for any additional foster families or kinship/relatives that are added during the year. There will not be any endorsement nor any additional premium. Thereby providing significant cost savings for the Department of Child Services for these additional foster families and kinship/relative placements added during the policy year. |

1. Describe any discounts or policy creation/administration changes for policies created after July 1st of each year.

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| A noted in the previous response, a significant cost savings would be realized in the form that there is automatic coverage with no additional premium or additional broker fees for any additional foster families and/or kinship/relative placements added throughout the entire policy year. |

**2.4.7 Reports and Billing**

1. Respondent should provide all allowable payment options for purchase of policies, including any discounts available.

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| Traditionally, commercial insurance premiums are paid via check or ACH. See below for attached sample MJ agency invoice for reference. We welcome to have a conversation to further discuss payment options & terms.  As outlined in our response to 2.4.6, our proposed insurance program provides automatic coverage for any additional foster families or kinship/relatives that are added during the year. There will not be any endorsement nor any additional premium or fees. Thereby providing significant cost savings for these additional foster families and kinship/relative placements added during the policy year. |

1. Respondent should provide samples of reports and invoices showing their ability to meet the requested needs.

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| Sample MJ agency invoice attached. |