

**RESOURCE CAREGIVERS INSURANCE  
STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES**

**POLICY ILLUSTRATED**

<u>COVERAGE</u>	<u>DESCRIPTION</u>	<u>LIMITS OF</u>	<u>LIABILITY:</u>
A.	Bodily Injury & Property Damage	\$300,000	Each Occurrence
B.	Property Damage	to property of others in the care custody & control of insured is excluded.	
B.	Property Damage	to insured's property is excluded. Summarized exclusions #17 & #18	
C.	Physical & Sexual Abuse Defense	\$100,000*	Each Foster Household

**CLAIMS MADE POLICY**

THIS POLICY PROTECTS THE CERTIFIED FOSTER PARENT AND INSURED (SEE SECTION II - WHO ARE INSURED) AGAINST UNINTENTIONAL BODILY INJURY AND ACCIDENTAL PROPERTY DAMAGE OF OTHERS CAUSED BY THE ASSIGNED FOSTER CHILDREN UNDER 18 YEAR OLD.

COVERAGE UNDER THIS POLICY IS EXCESS OVER ANY OTHER APPLICABLE INSURANCE YOU MAY HAVE, SUCH AS HOMEOWNERS, TENANTS HOMEOWNERS OR OTHER LIABILITY COVERAGE. IF NONE AVAILABLE, THE POLICY WILL BECOME PRIMARY AND CAN PAY COVERED LOSS.

ALL INCIDENTS THAT COULD REASONABLY BE EXPECTED TO RESULT IN A CLAIM SHOULD BE REPORTED IMMEDIATELY TO THE HAWAII FOSTER PARENT'S PROGRAM FOR FORWARDING TO THE INSURANCE CARRIER.

**FOR EXPENSES INCURRED FOR DEFENSE ONLY.\***

\* It is especially important to report any sexual abuse claims immediately at the first indication in order to provide up to the \$100,000 defense fund available.

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**COVERAGE SUMMARY**

**POLICY WILL PAY FOR:**

1. Occurrences arising from unintentional actions of foster child for which foster parent can be held responsible for Bodily Injury or Property Damage.
2. Errors made by foster parent in the care of foster child resulting in bodily injury to the child.
3. Maximum \$100,000 for defense payments only related to Exclusions #11 and #12 itemized as physical and sexual abuse exclusions. \*\*
4. All expenses incurred in settling claims including cost of bonds.
5. Claims made against foster parent by birth parents of foster child or others who may have an interest in foster child.

All of the above arising out of Foster Parents activities as a Foster Parent.

Coverage is excess over any other valid and collectible insurance.

**SECTION II - WHO IS INSURED**

1. "Foster Parents" licensed and/or certified under the "Licensing Authority" of the State of Hawaii.
2. If residing in the same household as a Named Insured, the following are also insured:
  - A. Relatives of that Named Insured;
  - B. Relatives of the spouse of that Named Insured; and
  - C. Foster Children under the age of 18 in the care and custody of that Named Insured.

Note: Insured = Foster Parent FP

PLEASE NOTE: ABOVE INFORMATION SUMMARIZES POLICY TERMS AND CONDITIONS. HOWEVER, IN ALL CASES, THE ACTUAL WORDING OF THE POLICY WILL DETERMINE COVERAGE.

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**SUMMARIZED EXCLUSIONS**

1. Bodily Injury or property damage intentionally caused.
2. Liability assumed by contract.
3. Causing intoxication of any other persons.
4. Furnishing alcoholic beverages to underage persons or persons under the influence of liquor.
5. Pollutants arising from Foster Parents (FP) premises or attempts to detoxify premises.
6. Bodily Injury & property damage resultant from Autos, Aircraft, Watercraft or Motorized vehicles, whether owned or entrusted to insureds.
7. Damage to property owned, rented, occupied or borrowed by insured or foster child.
8. Failure to render professional services
9. Liability arising out of dishonest, fraudulent, criminal or malicious act, error or omission of a Foster Parent (FP).
10. Transmission of a communicable disease by an insured.
- 11.\*\* Actual or threatened physical abuses, whether or not sexual in nature. (See \$100,000 Expense Coverage C).
- 12.\*\* Sexual abuse or behavior intended to lead to or culminating in any sexual act. (See \$100,000 Expense Coverage C).
13. Failure of Foster Parent (FP) or anyone else to prevent or suppress any actual or threatened behavior or negligent employment, investigation, supervision, reporting or failure to report to proper authorities.
14. Punitive damages and penalty fines inflicted by the court.
15. Personal injury claims for bodily injury.
16. Claims that would be covered by a Workers' Compensation policy.
17. Damage to property of others left in your care, custody or control.
18. Damage to your own property caused by insured or Foster child.

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**FOR SERVICE, CALL SERVICING AGENT:**

BROWN & BROWN PACIFIC INSURANCE  
700 Bishop Street, Suite 1400  
Honolulu, HI 96813  
Phone: (808) 540-3333  
Fax: (808) 540-3338  
Email: Bruce.Bachle@bbrown.com

**INSURANCE CARRIER:**

OLD REPUBLIC UNION INSURANCE CO.  
Chicago, Illinois  
  
*A.M. Best Co., Inc.*  
*Insurance Rating A+ XV (Superior)*

**REPORT CLAIMS TO:**

Phone: (808) 564-2509  
Fax: (808) 540-3338  
Email: Jamie.Woodford@bbrown.com

**For Claims or Information, also contact the  
Licensing Office in your area.**

**LICENSING OFFICES:**

**(If number has changed, consult your local  
directory under Hawaii State Government.)**

**Oahu:** 420 Waiakamilo Road, Suite 300B  
Honolulu, Hawaii 96817-4941  
Phone: (808) 832-5105 (Town/ Windward)

**East Hawaii:** 75 Aupuni Street, Room 205  
Hilo, Hawaii 96720  
Phone: (808) 933-0350

**West Hawaii:** 73-4257 Hulikoa Drive, Bldg. C  
Kailua-Kona, Hawaii 96740  
Phone: (808) 327-4787

**Kauai:** 3060 Eiwa Street, Room 104  
Lihue, Hawaii 96766-1890  
Phone: (808) 274-3300

**Maui:** 1885 Main Street, Room 306  
Wailuku, Hawaii 96793  
Phone: (808) 243-5162 or  
(808) 243-5143

**Molokai:** P.O. Box 530  
Kaunakakai, Hawaii 96748  
Phone: (808) 553-1703

**Lanai:** P.O. Box 631374  
Lanai, Hawaii 96793  
Phone: (808) 565-7104

**RESOURCE CAREGIVERS**

Social Services Division  
Child Welfare Services Branch

**INSURANCE POLICY  
HIGHLIGHTS**

**SEPTEMBER 2022  
TO  
SEPTEMBER 2023**

STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES