

Safe Above All

# PRODUCER GUIDELINES

2301 Hwy 190 West, DeRidder, LA 70634 1.800.256.9052; 1.337.463.9052

**Submissions Email:** <a href="mailto:applications@amerisafe.com">applications@amerisafe.com</a>

**GEAUX:** geaux.amerisafe.com

**First Report of Injury 1.800.699.6240** 

#### **AMERISAFE Officers and Executives**

President & Chief Executive Officer G. Janelle Frost Executive Vice President & Chief Risk Officer Vincent Gagliano Executive Vice President & Chief Financial Neal Fuller Officer/Treasurer Executive Vice President & General Counsel & Secretary Kathryn Shirley Sr. Vice President of Sales & Marketing David Morton Sr. Vice President Claims Chris Lestage Sr. Vice President Underwriting Operation Kelly Goins Sr. Vice President Safety Services Leon Lagneaux Risk & Information Services Manager Rvan Fletcher Vice President Claims/Western Region Tom Wade Jim Leonard Vice President Claims/Eastern Region Vice President Premium Audit Barbra McCrary

## Regional Vice Presidents - Sales / Territories

AZ, CO, CT, DC, DE, IA, IL, IN, KS, KY, MA, MD, ME, MI, MN, MO, MT, ND, NE, NH, NJ, NM, NV, NY, OH, OK, RI, SD, PA, UT, VA, VT, WI, WV, WY

Vice President Sales

Mark Burger
Lake Mills, WI

**Regional Office** 920.648.6607

Email <u>mburger@amerisafe.com</u>

South Region AK, AL, AR, CA, FL, GA, HI, ID, LA, MS, NC,

OR, SC, TN, TX, WA

Vice President Sales

Tyson Reed
Rome, GA

Regional Office 337.460.3416

**Email** <u>treed@amerisafe.com</u>

## **Underwriting Regions**

**Region 1** Regional Vice President, Nancy Hunt

GA, PA, SC, VA, WI, & USL & H / MEL

**Region 2** Regional Vice President, Joyce Whiddon

AK, AL, FL, LA, MD, MN, MS, NC

**Region 3** Regional Vice President, Kelly Bailey

AR, CO, DE, IA, IL, IN, KS, KY, MO, NE, NV, OK,

TN, TX

By logging into GEAUX (GO) (<u>geaux.amerisafe.com</u>), you can identify the appropriate underwriter to discuss your submissions and accounts.

## **Monthly Report/Audit Unit**

Monthly Reporting / Audit Final Audit

Charity Lewing
Collen Olson

**Claims Information Services** 

**Claims Information Services Manager** 

Bridget Diron

Accounting

**Accounting** Melanye Amine

## **Underwriting**

#### **New Business:**

New submissions should be made on an ACORD, workers' compensation application. Sole proprietors, partners and executive officers must be listed with class code and compensation, and must be designated as included or excluded. AMERISAFE can accommodate multi-state accounts. List the states where the actual exposure exists in Part 1 -Workers Compensation section of the ACORD application.

No coverage is available at all for the following states: WA, WY, ND, HI, OH, NY, NJ, CT, and NH.

Submissions can be submitted via Geaux (<u>geaux.amerisafe.com</u>), by email (<u>applications@amerisafe.com</u>), or by mail (AMERISAFE, 2301 Hwy 190 West, DeRidder, LA 70634).

Our preferred method of receiving new business submissions is via our online submission entry/tracking system – **GEAUX** (GO). It is compatible with the most common agency management systems and does not require any special software installation. Your Marketing Associate (MA) or Territory Sales Manager (TSM) will gladly assist with training and access. geaux.amerisafe.com.

## The items listed below should accompany the application:

- A narrative description of the account.
- Expiring and three (3) year current value, carrier-provided loss runs with detailed loss summary in an image format.
- Experience Mod Worksheet or expiring and three (3) year historical payrolls by class code.
- Trucking risks require the Trucking Supplemental Application.

## For multi-location/state accounts:

- Provide AMERISAFE with the total number of locations in each state.
- Physical address, contact name and phone number for each location.
- Description of Operations.
- Number of employees for each location.
- The signing producer must be licensed in all states where there is exposure and must be appointed by American Interstate Insurance Company for those states.

All forms requiring signature must be received by AMERISAFE within ten (10) days of binding.

Applications are accepted one-hundred twenty (120) days in advance of inception. Quotes are good for sixty (60) days. If a new application is received on an account currently quoted by AMERISAFE, the first agent will be notified if within the sixty (60) day time frame. The Agent of Record will control the quote.

Pre-quote inspections of accounts should be expected in most states.

## **Payment Plans:**

The standard procedure for payment is monthly reporting remitted directly to the company. Premiums are remitted directly to the company. Deposits are 15% of the estimated annual premium, but subject to the discretion of the Regional VP of Underwriting.

AMERISAFE accepts payment through online services and electronically with our Check-by-Phone option.

Other payment options are available at underwriter's discretion prior to binding.

## **Deposits:**

- Should be received by AMERISAFE within ten (10) days of binding.
- Will be rolled over upon renewal.
- Exceptions are made only with prior approval from Underwriting.

#### **Premium Discount:**

- The final discount is determined at the final audit.
- Exceptions are made only with prior approval from Underwriting.

#### **Minimum Premium Size:**

Where requiring a minimum premium is not prohibited by law, a \$10,000 minimum rated premium is required.

## **Commission:**

By the 10<sup>th</sup> of each month, the agent receives a returned commission bill or a commission check on premium received the prior month.

#### **Cancellations:**

Please refer to section on monthly reporting forms.

Policies may be canceled upon written request by the producer or the policyholder.

- Where applicable a short-rate cancellation will be made when the policyholder requests cancellation.
- The policyholder's policy or a signed lost policy release is required in order for the policyholder to cancel a policy.

Policies may be canceled by AMERISAFE for underwriting reasons or as regulated by state insurance regulations.

Flat Cancellations will be issued:

- If it is found that the policyholder has duplicate coverage.
- If the policyholder returns the original policy to AMERISAFE within 30 days of inception.

NSF checks will generate a notice of cancellation.

After three (3) notices are issued, no reinstatement will be offered.

## **Agent of Record Letters:**

A policyholder letter designating a new agent should:

- Be on a policyholder's stationery or an ACORD A.O.R. form 36 (2007/01).
- State the producer and agency as the new agent of record.
- Be signed by an owner or officer of the policyholder on record with AMERISAFE.

Upon receipt of all documents and the AOR approved, the system will reflect the new agency as agent of record and can begin servicing the account. The former agent of record will be given ten days to respond but will not delay the ability of the new agent to service the account. Changes prior to the effective date will impact commission on the new policy. Changes after the new policy's effective day will allow the new agent to be agent of service only until the following renewal.

If AMERISAFE receives multiple applications from producers to quote, the first application received will be recognized unless an Agent of Record letter is received.

An ACORD application, loss runs and experience worksheet must accompany the Agent of Record letter on new business submissions. Renewal account changes only require an ACORD application with the letter.

#### **Renewals:**

AMERISAFE will review policies before expiration according to state regulations or AMERISAFE requirements. AMERISAFE will offer renewal **or** will provide appropriate notice of non-renewal.

- Renewal offers are good for sixty (60) days after the expiration date subject to a potential lapse in coverage.
- AMERISAFE will email confirmation of binding and a policy number to the producer the day the policy is bound or the next business day if received after hours.
- Producers are to confirm the order to bind a renewal through Geaux or by email prior to the effective date to avoid a potential lapse in coverage.
- All required signed documents are to be received from the Producer by
  - o AMERISAFE within ten (10) days of binding.

#### **Loss Control:**

Underwriting will determine which prospective risks are to be surveyed by a safety professional. Producers should advise prospective clients that AMERISAFE safety professionals will survey policyholders periodically and provide the policyholder with information and recommendations in an effort to maintain a safe workplace. AMERISAFE will also conduct follow up sessions as necessary to determine the level of improvement. AMERISAFE expects the assistance of the soliciting agent in explaining the value of pre-quote inspections and requires the cooperation of the prospective client to conduct these inspections.

Management's compliance with OSHA standards and management's attitude toward safety are important factors in determining the desirability of a risk.

## **Binding Coverage:**

The producer has no binding authority. Accounts are only bound by AMERISAFE Underwriting Department. AMERISAFE will return confirmation of binding to the agent on the date of request or the next business day. Confirmation will contain the policy number. AMERISAFE will only bind upon receipt of a written request (email, fax, Geaux, etc.) prior to 12:01am of the expiration date. **This applies to both new and renewal business.** 

The appropriate deposit is to be collected by the producer upon binding the coverage. All required signed documents and deposits are to be received by AMERISAFE within ten (10) days of binding.

All policies will be issued on an annual basis only.

**Producers cannot place business for other Producers.** Brokering business is not acceptable. Brokering accounts for other producers can result in the termination of your producer agreement.

#### **Endorsements:**

All endorsement requests must be in writing to AMERISAFE. Any reduction of coverage requires the policyholder's signature.

#### **Certificates of Insurance:**

## **Producer Responsibility:**

- Will issue Certificate(s) of Insurance
- ACORD Form 25 should be used to issue a Certificate of Insurance.
- Industry Special Form Certificates to be approved by AMERISAFE prior to issuance.

## **Audit**

## **Monthly Reporting / Monthly Reporting Forms:**

Twelve monthly reporting forms will be prepared by AMERISAFE and sent directly to the policyholder at policy inception. The payment rates for all anticipated class codes will be listed on the forms.

The monthly report, along with the policyholder's remittance, should be mailed to AMERISAFE by the 10<sup>th</sup> of the month following the reporting period. Checks should be made payable to AMERISAFE.

If the policyholder develops exposure in a classification that is not listed, the underwriter should be contacted immediately. Please do not have the policyholder add class codes without speaking to the underwriter.

If timely reports are not received, a notice of cancellation will be issued. If full payment is received before the effective date of cancellation, a reinstatement will be considered.

After three (3) notices are issued, no reinstatement will be offered.

## **Interim Premium Audit:**

AMERISAFE may complete interim audits at its discretion. In most instances, a field auditor will arrange a service meeting with new business policyholders during the first ninety (90) days of exposure. This meeting is to assist the policyholder with any questions they may have regarding their monthly reporting, assist with questions regarding audit rules and regulations and to conduct a preliminary audit.

#### **Final Audits:**

When a policy expires or is canceled, a final audit will be ordered. The auditor will mail the policyholder a notice giving the date he or she will arrive to conduct the audit. If the records will not be available on that date or if the audit should be made at some location other than the place of business, the auditor will need to be advised as soon as possible.

In order to complete a successful audit, the auditor will need to review such information as payroll records, quarterly tax reports, any payments made to subcontractors or 1099's issued and certificates of Workers' Compensation coverage for subcontractors used during the policy period. The auditor will also want to see the general ledger. Please reference the appointment notice which provides a list of the documents needed for review to better prepare for the appointment.

Once the final audit has been promulgated, one copy will be sent to the producer. The original, along with the audit worksheet, will be mailed to the policyholder. The policyholder's payment is due 15 days from the billing date. If the producer/policyholder should decide to contest the audit, they will need to submit, in writing, supporting evidence which confirms that the audit is incorrect.

The audit worksheets contain confidential information. The agent of record can obtain a copy of the audit worksheets from the policyholder or provide the audit department with written authorization from the policyholder on the policyholder's letterhead signed by an officer of the company.

## **Claims**

Claims should be immediately reported to AMERISAFE by telephone to **800.699.6240**.

Authorization for medical care or hospital admittance should be referred to an AMERISAFE Field Case Manager.

#### **Contractors:**

Certificates of Workers' Compensation Insurance must show compliance with state statutes. If a contractor does not provide his own insurance, AMERISAFE will need the total payroll of that contractor's employees, the payroll of any of his subcontractors or the total cost of that contractor, and their cost for materials.

Unless otherwise governed by state law, rule or regulation, when a final audit balance due has been paid by the policyholder or a final audit return premium refund has been paid to the policyholder by AMERISAFE, the policyholder/producer must contest the final audit payment in writing with supporting evidence that the audit is incorrect no later than 6 months from

the date of payment or no later than 6 months from the date the dispute has been closed via letter to the policyholder. AMERISAFE will refund all returned premiums directly to the policyholder. The producer will assist in collecting any additional premiums due from the policyholder.

# Please call if you have any questions:

AMERISAFE, Inc.
Sales Department at 800.256.9052
2301 Hwy 190 West
DeRidder, LA 70634
www.amerisafe.com

Notes:			

Any use of the AMERISAFE, Inc. name or logo in agency produced marketing materials must be approved in advance by AMERISAFE, Inc.