

Certificate of Insurance

CONNECTICUT EDUCATION ASSOCIATION NATIONAL EDUCATION ASSOCIATION EDUCATORS EMPLOYMENT LIABILITY INSURANCE



Great Public Schools
for Every Student

2020-2021

Insured by: Nautilus Insurance Company. THIS IS NOT AN INSURANCE CONTRACT. THIS IS A SUMMARY FOR GENERAL INFORMATION PURPOSES. CONTACT YOUR STATE ASSOCIATION FOR TERMS AND CONDITIONS OF COVERAGE.

Policy Number: NEA_CT00001_P-9

Participating Unit: Connecticut Education Association

Address: 21 Oak St, Ste 500
Hartford, CT 06106

Insured: NEA Members as defined in Part II(H)

Policy Period: This policy applies to **occurrences** which take place during the twelve month period starting at 12:01 AM 9/1/2020 and expiring at 12:01 AM 9/1/2021.

COVERAGES AND LIMITS OF LIABILITY

Coverage A—Educators Liability

\$1,000,000 per member per **occurrence** not to include any civil right issues or civil rights **claims**

\$300,000 per member per **occurrence** for civil rights issues or civil rights **claims** and not to include any other **claims**

\$3,000,000 per **occurrence** aggregate for all **claims**, including civil rights and civil rights **claims**

Coverage A—Legal Defense Cost Limits

\$3,000,000 per member per **occurrence** not to include any civil right issues or civil rights **claims**

\$9,000,000 per **occurrence** aggregate for all **claims** not to include any civil right issues or civil rights **claims**

Coverage B—Reimbursement of Attorney Fees for Defense of a Criminal Proceeding

\$35,000 per **criminal proceeding**

Coverage C—Bail Bond

\$1,000 per bond

Coverage D—Assault-Related Personal Property Damage

\$500 per **assault**

CLAIMS PROCEDURE

The following **occurrences** should be reported immediately to Melanie I. Kolek, Esq., CEA Legal Counsel, Connecticut Education Association, 21 Oak St, Ste 500, Hartford, CT 06106:

1. any incident involving the death or injury requiring medical attention to a student arising out of a school activity;
2. the receipt by the **Insured** of a notice of **claim**, lien letter from an attorney, or service of summons or law suit; or
3. any situation the **Insured** believes to be covered by the policy.

Do not contact an attorney to represent you before contacting Melanie I. Kolek, Esq. at the Connecticut Education Association at 860.725.6318 or 800.842.4316. When making contact the **Insured** should be prepared to present a brief description of the **occurrence** and a copy of any legal documents.