



**New Mexico
Public Schools
Insurance
Authority**

**Risk
2024 Spring Budget**

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ABOUT NMPSIA

The New Mexico Public Schools Insurance Authority (NMPSIA) was created by the NM Legislature in 1986 to serve as a purchasing agency for public school districts, post-secondary educational entities and charter schools. Through NMPSIA, member schools are afforded the opportunity to offer quality employee benefit and risk coverages.

Purpose of act. 22-29-2.

The purpose of the Public School Insurance Authority Act is to provide comprehensive core insurance programs, including reimbursement coverage for the costs of providing due process to students with disabilities, for all participating public schools, school board members, school board retirees and public school employees and retirees by expanding the pool of subscribers to maximize cost containment opportunities for required insurance coverage.

Authority created. 22-29-4

There is created the "public school insurance authority", which is established to provide for group health insurance, other risk-related coverage and due process reimbursement with the exception of the mandatory coverage provided by the risk management division on the effective date of the Public School Insurance Authority Act.

NMPSIA Today

• School Districts

- 88 Mandatory (*Excludes APS*)

• Charter Schools

- 101 Mandatory

• 27 Other Educational Entities

- 9 Higher Education and 18 Other Entities

• Monthly Membership

- 78,400 Employees and Dependents
- 50,150 Employees
- Employees and Dependents by Coverage
 - 47,213 Medical & Rx
 - 55,594 Dental
 - 48,392 Vision
 - 12,956 Long-Term Disability
 - 18,900 Additional Life



• Staff

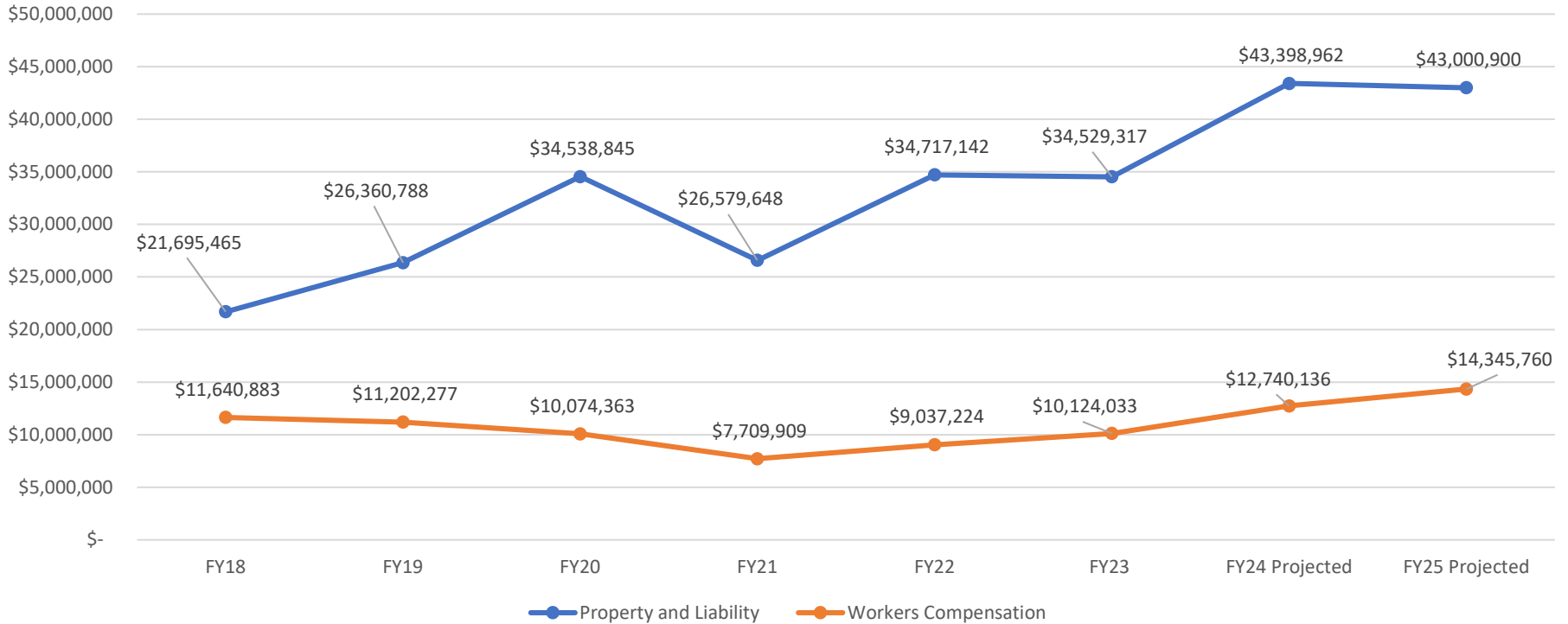
- 12 Positions

• Board of Directors

- 11 Board Members
 - Governor Appointees
 - Alfred Park, President
 - Denise Balderas
 - Sammy J. Quintana
 - New Mexico Association of School Business Officials
 - Chris Parrino, Vice President
 - School Boards Association
 - Pauline Jaramillo, Secretary
 - Public Education Commission
 - K.T. Manis
 - NEA-NM
 - Bethany Jarrell
 - David Martinez, Jr.
 - AFT-NM
 - Tim Crone
 - Superintendents' Association
 - Vicki Chavez
 - Educational Entities at Large
 - Trish Ruiz

Risk Claims

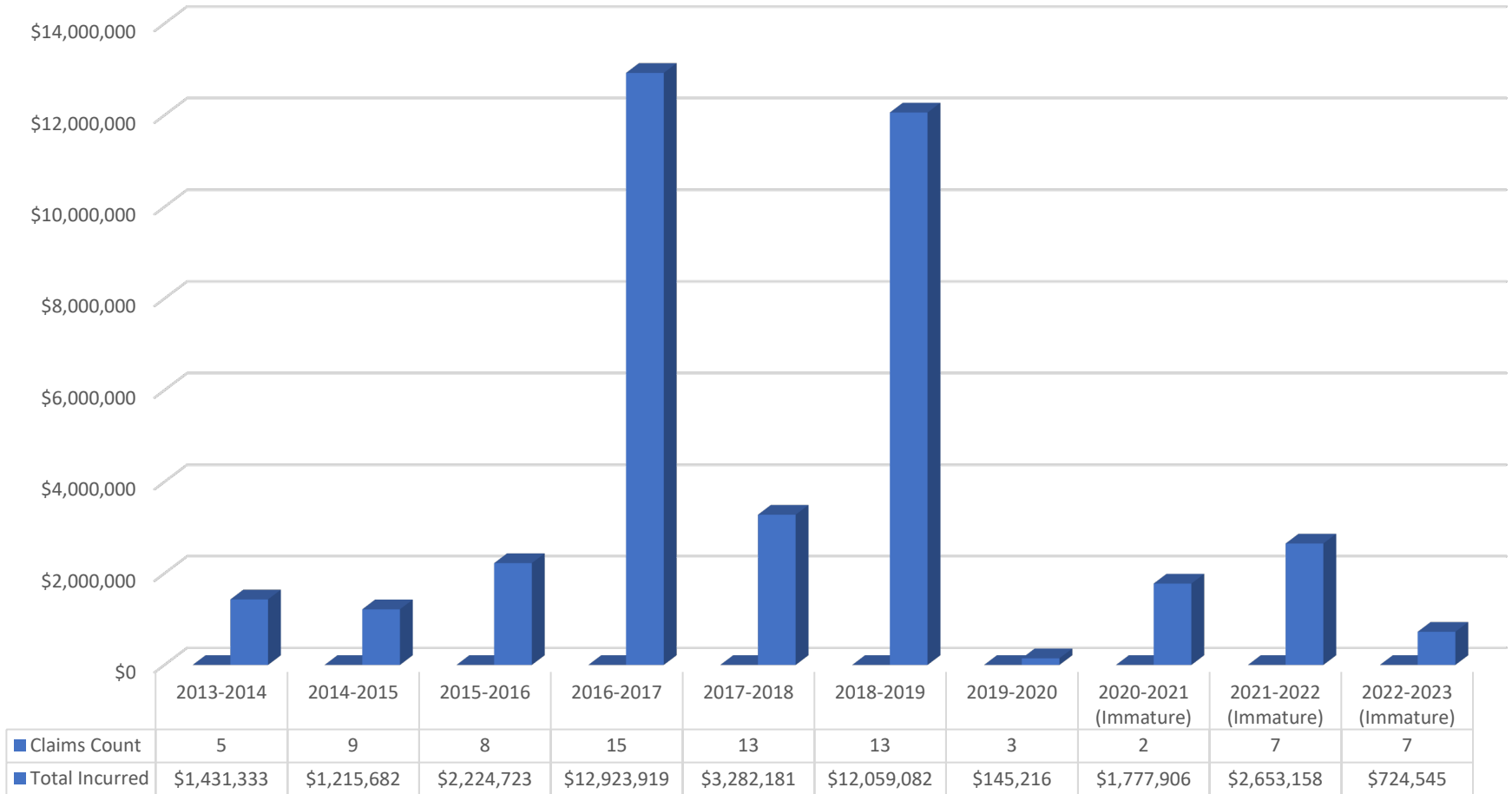
Risk Claims Cost



- FY23 claims costs came in \$4,626,214 over budget
- FY24 actuarial projected claims cost increased by \$13,364,339
- FY25 actuarial projected claims cost increased by \$10,380,098
- The Excess Insurance deductible for hail and wind claims increased from \$2.5 million to \$10 million with an aggregate of \$25 million

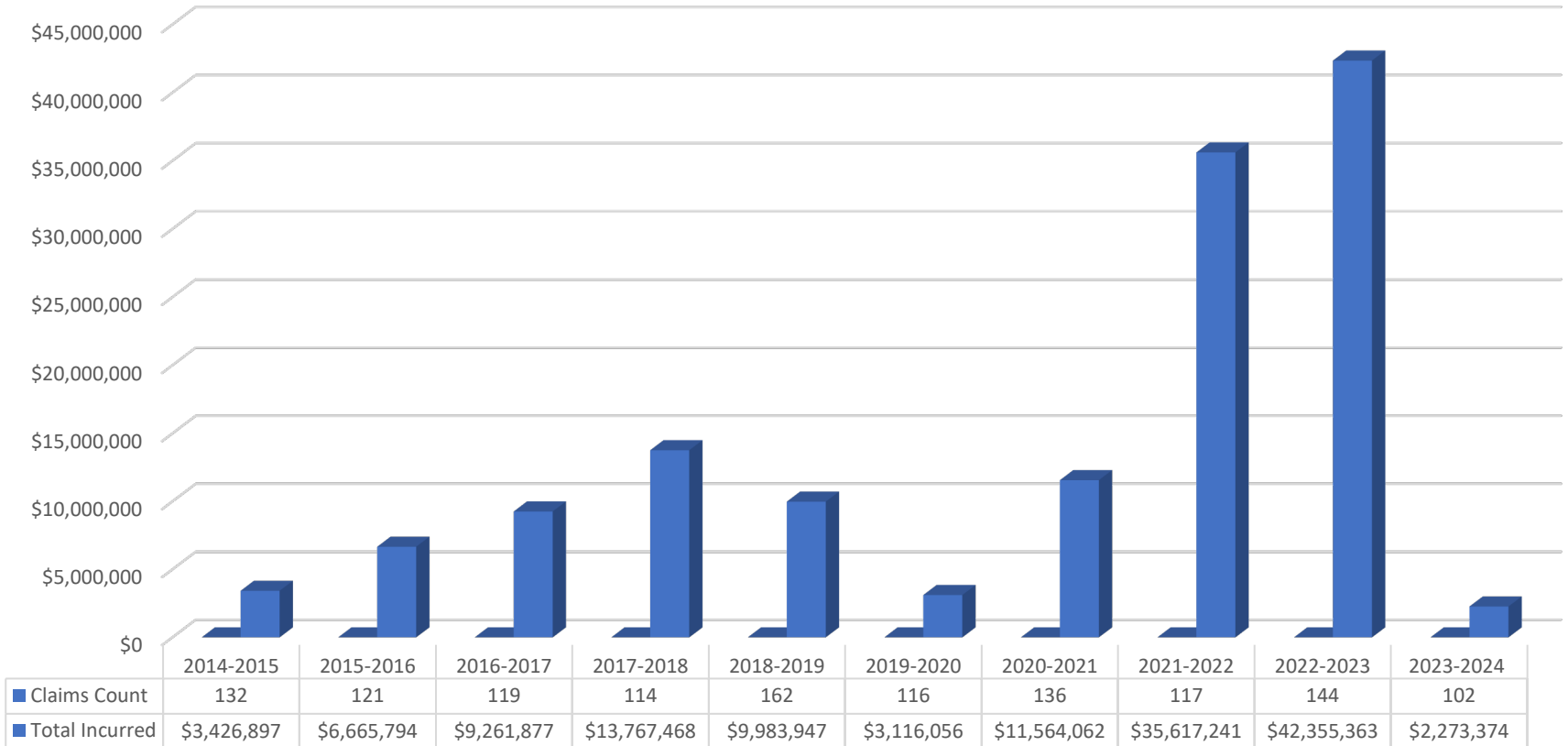
Risk Fund Cost Drivers

Sexual Molestation/Inappropriate Touching Claims



Risk Fund Cost Drivers

Property Losses



- From May 2022 to May 2023, NMPSIA has incurred projected expenses of \$61.5 million due to Wind and Hail Claims.

Premium Rate Increases Risk Fund

Plan Year	Rate Increase
2014-2015	7.31%
2015-2016	11.28%
2016-2017	5.14%
2017-2018	0.02%
2018-2019	2.53%
2019-2020	2.53%
2020-2021	No Increase
2021-2022	4.57%
2022-2023	6.73%
2023-2024	7.73%
2024-2025	31.86%

Risk Program

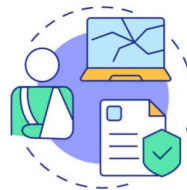
Property:

- Property deductible is \$1.0 million for all perils except a \$10,000,000 deductible for the perils of wind and hail; \$750 million in insured limits per occurrence subject to sub-limits such as Flood and Earthquake: \$100 million Annual Aggregate; \$1.4 billion Annual Aggregate Terrorism Limit
- Crime limit is \$2.2 million per occurrence
- Assets insured are approximately \$31 billion
- \$20 billion are Frame/Stucco construction (the most flammable type of construction)
- 60% of properties are located in Protection Class 9 or 10 (10 being the worst protection class)
- 60% of properties are located in 100 Year Flood zones
- The property rate has increased .021 per \$100 dollars of value since 1991



Liability and Workers' Compensation:

- Liability deductible is \$1.0 million for each occurrence. \$4.0 million for sexual molestation and abuse claims
- Workers' Compensation deductible is \$2.5 million
- There are no Tort Claims Act Limit protections for Independent School Bus Contractors, lawsuits filed in federal court and/or out-of-state accidents
- 44,000 employees
- \$1.8 billion in payroll
- 325,000 students
- 44,000 school athletic participants
- 9,000+ volunteers
- 10,548 vehicles including buses



**General Liability
Insurance**

Driving Monitoring Safety

Patrick Sandoval

Driver Monitoring Services

Minimize Your Driver Risk
With Driver License Monitoring
Notifications

Driver Monitoring Services

Embark Safety's innovative technology monitors employees' Motor Vehicle Records (MVRs) continuously and notifies managers when new changes appear in a driver's record.

Our system links directly with state licensing agencies (DMVs) to monitor changes in driver licenses and find adverse actions that may expose an organization to liability and accident risk.

Effective July 2019, Embark Safety will be the new vendor for driving record information, retrieval and monitoring services for all NMPSIA members. Members will have access to a free account.



Notifications may include:

- Newly issued driver citations
- Speeding tickets
- Suspensions / Revocations
- DUIs / DWIs
- Driver license expiration
- CDL medical certificate expiration

Driver Monitoring Services



Why Monitor Driver Records?

✓ Liability

Suspended drivers have a crash rate that is **14 times higher** than other drivers. Companies are ultimately liable for employees' actions.

✓ Compliance

Loss of driving privileges due to accumulated convictions results in **unqualified drivers** operating on the roadways for longer without the company's knowledge.

✓ Safety

Driving is the **most dangerous activity** performed by employees. It only takes one employee with a suspended license to jeopardize the reputation of any company.

Driver Monitoring Services

How it works



Initial driving record is processed for all drivers. System automatically scores all drivers using our MVR scoring criteria.



Drivers are enrolled into driver record monitoring with each state licensing agency (DMV).



System automatically sends email alert notifications to supervisors when new information shows up in a driver's record.

Ready to get started?

Mona Eskariyat
mona.eskariyat@embarksafety.com
(407) 536-7233

Poms & Associates

Insurance Services

Justin Perkins

- For over 35 years, Poms & Associates has been NMPSIA's trusted risk management partner since the formation of NMPSIA in 1986.
- Poms works with the NMPSIA Board, the Risk Advisory Committee, and all the NMPSIA Members to preserve physical, financial, and human assets.
- Poms is primarily comprised of two operating and collaborative divisions:
 - Safety, Loss Control and Risk Management Division
 - Brokerage & Consulting - Insurance Division
- Safety, Risk Management, and Loss Control
 - This division was created to specifically address pre-loss activities, including trends in school risk management issues by assisting members with the development of policies and procedures, training staff on comprehensive topics, creating a safe environment for staff and students, conducting onsite safety audits, safety drills, risk assessments, employment practices liability requirements and best practices.
- Brokerage & Consulting – Insurance Division
 - This division is responsible for procuring and managing the risk insurance policies and consulting members in all matters related to liability and property exposures concerning their operations, business objectives, and activities.
 - Contract Review – Lease agreements, vendor/supplier and contractors.

Cost Allocation Plan

- The process for determining the Risk Premium for each Member begins with collecting data or what is properly called, “exposures.” This process is completed through an online system (Origami) administered by Poms & Associates.
- Once received, the data is compiled, verified, checked against the prior year’s data, and the estimated annual premiums are released each year at the Spring Budget Workshop, and presented on the “Budget Notice” located within the Spring Budget Booklets provided by Poms and Associates.
- **Accuracy is important** as your reported information is one of the factors used to properly allocate premiums among the Members in order to avoid premium discrepancies on final risk - related coverage invoices. If the data changes for any one Member, then the entire group’s premiums are affected.
- After each Member receives their respective premium calculations, they have an opportunity to review the data and premium to discuss any discrepancies with the Poms Insurance team.

Booklet Overview

- A. Budget Notice** - Premium and rates for respective lines of coverage.
- B. Commercial Property (4 types)**
 - 1. Buildings and Contents
 - 2. Equipment Breakdown (Optional)
 - 3. Crime
 - 4. Cyber Liability – core infrastructure/network systems
 - a) Cyber Liability Claims Reporting Form
- Deductible Information

Booklet Overview (Cont'd)

- C. Student Accident** - Accident Medical benefits and special programs available to participating schools/districts.
- D. Cannon Cochran Management Services, Inc. (CCMSI)**
 - C. Third Party Administrator (TPA) proving claims handling services for Liability, Property and Workers' Compensation.
- E. Poms & Associates**
 - a) Risk Management, safety inspections, loss control, trainings and resources provided to Members.
 - b) Contact information for services teams.

Insurance Division Contacts

For Risk Premium related questions, please contact:

Sandy Lee, Risk Analyst

Direct: (818) 449-9316

Toll Free: (800) 578-8802, ext. **316**

Email: rservices@pomsassoc.com

For reporting exposures, changes, or operation concerns, please contact:

Jo Anne Roque, Vice President - Account Management

Direct: (818) 449-9369

Toll Free: (800) 578-8802, ext. **369**

Email: rservices@pomsassoc.com

Vitamins For The Mind



Vitamins For The Mind

“There are two parts to influence. First, influence is **powerful**. And second, it is **subtle**. You wouldn’t let someone push you off course, but you might let someone nudge you off course and not even realize it.”

Meyers Stevens Toohey

Student Accident Insurance

Justin Perkins

Student Insurance for 2024-2025

Due to a ruling by the New Mexico Office of Superintendent of Insurance(OSI) (13.10.34.1-4), voluntary or parent purchase insurance for sport and other school activities will not be available for at least the upcoming school year.

Myers-Stevens & Toohey's carriers worked with the OSI to change the ruling and allow Group or Blanket Insurance products that would still be available for NMPSIA districts and charters.

Almost 50% of NMPSIA Members already participate in this blanket coverage.

This blanket coverage provides accident medical coverage for all school-time activities;

- Practice, games, and travel associated with interscholastic sports, including interscholastic tackle football
- All Field trips, overnight or otherwise
- School-to-Work/Job Vocational Training
- JROTC and Special Education
- Students while attending regularly scheduled classes, on or off campus
- Travel in school vehicles at any time, and in private vehicles when at the direction of the school and without interruption

Blanket School-Time

Benefits	Maximums
Accident Medical Expense:	\$25,000
Accident Medical Expense Percentage:	100% of UCR
Deductible per Occurrence:	\$0
Incurral Period:	120 Days
Benefit Period:	104 Weeks
Accidental Death:	\$10,000
Single/Double Dismemberment:	\$25,000/\$50,000
Emergency Sickness:	\$3,000

- For those students who do not have primary insurance coverage, the blanket program will be their primary coverage.
- For those students who do have primary coverage, this blanket program will be secondary, but will work to fill in any co-pays or deductibles the families may experience.
- All students will now have insurance coverage and access to sport and activities.

Catastrophic Coverage

Benefits	Maximums
Catastrophic Accident Medical Expense (AME) 10-Year benefit period	\$5,000,000
Deductible per Occurrence:	\$25,000
Accidental Death and Dismemberment:	\$50,000
Double Dismemberment:	\$100,000
Catastrophic Cash Benefit, Payable in addition to AME:	Up to \$1,000,000
Seat Belt and Airbag	\$5,000
Special Adaptation Expense Benefit, housing and vehicle	Up to \$75,000
Benefit Period:	10 Years

- The \$25,000 deductible which used to be satisfied by voluntary purchase plans, will now be satisfied by the blanket insurance, primary insurance, or both.
- This is catastrophic coverage you have all carried for NMAA sanctioned sports and activities, but is now expanded to include all school-time activities.

Student Insurance for 2024-2025

- All Registered Volunteers of NMPSIA Member Districts and Charters will be covered under this blanket program
- Coverage is extended to include all school-sanctioned and supervised summer conditioning and off-season conditioning for sports
- Coverage will include all school-sanctioned and supervised activities for course credit
- In the event of a covered injury, the school will be required to complete a school report on a claim form, but all claims will be handled by Myers-Stevens & Toohey.
- Every District and Charter will receive this form, along with instructions on what to do in the event of a covered injury from Myers-Stevens & Toohey
- Any questions can always be referred to Eric Swartz at Myers-Stevens & Toohey, and he will be available for any assistance your staff may need.
- More information, including contact, claims, and budgetary information can be found in your binder.

CCMSI

Workers Compensation

Jerry Mayo

Workers Compensation

Employers are required to post the workers' compensation poster with the Notice of Accident (NOA) forms at their workplace. The NOA forms are to be attached or adjacent to the poster.

Printable forms located at:

<https://workerscomp.nm.gov/NMWCA-Publications>

Or you can call 1-866-967-5667 to request copies.

State of New Mexico Workers' Compensation Administration

WORKERS' COMPENSATION ACT

If You Are Injured At Work

Si Se Lastima En El Trabajo

1) **Notice** – In most cases you must tell your employer about the accident within 15 days, using the Notice of Accident Form.

2) **You have the right** to information and assistance from an information specialist known as an Ombudsman at the Workers' Compensation Administration.

3) **Claims information** – Contact your employer's Claims Representative (see box below).

1) **Aviso** – En la mayoría de los casos usted debe de avisarle a su empleador del accidente dentro de los primeros 15 días usando las formas de Aviso de Accidente.

2) **Usted tiene el derecho** a información y ayuda contactándose con un especialista en información conocido como "Ombudsman" en la Administración para la Compensación a los Trabajadores.

3) **Información acerca de Reclamaciones** – Contáctese con el representante de reclamaciones de su compañía.

Employer's Insurer / Claims Representative:

Name: _____

Phone #: _____

Address: _____

Note: Employer must fill in insurer / claims representative information.

YOUR RIGHTS

If you are injured in a work-related accident:

Your employer / insurer must pay all reasonable and necessary medical costs.

You may or may not have the right to choose your health care provider. If your employer / insurer has not given you written instructions about who chooses first, call an ombudsman. In an emergency, get emergency medical care first.

If you are off work for more than seven days, your employer / insurer must pay wage benefits to partially offset your lost wages.

If you suffer "permanent impairment," you may have the right to receive partial wage benefits for a longer period of time.

SUS DERECHOS

Si se lastima en el trabajo:

Su empleador / asegurador debe de pagar por los gastos médicos necesarios y razonables.

Es posible que usted tenga, o no tenga, el derecho de escoger al proveedor de servicios para la salud. Si su empleador / asegurador no le ha dado instrucciones por escrito de quien es el que selecciona primero, pregúntele a un ombudsman. En una emergencia, obtenga asistencia médica de emergencia primero.

Si usted está fuera del trabajo por más de siete días, su empleador / asegurador debe de hacerle un pago compensatorio de prestaciones para compensar parcialmente la pérdida de su salario.

Si usted sufre "daño permanente," usted puede tener el derecho a recibir prestaciones parciales de salario por un periodo de tiempo más largo.

Ombudsmen are located at the following offices:

Albuquerque: 1-866-967-5667	Farmington: 1-800-626-7310	Hobbs: 1-800-934-2458	Las Cruces: 1-800-878-6826	Las Vegas: 1-800-311-7888	Roswell: 1-866-311-8887	Santa Fe: 1-505-476-7381
1-505-841-6800	1-505-599-9746	1-575-397-3425	1-575-534-6246	1-505-454-9251	1-575-623-3997	

If You Need HELP Call:

Ask for an Ombudsman

Si Usted Necesita Ayuda Llame Al:

Pregunte por un Ombudsman

1 - 8 6 6 - W O R K O M P (1-866-967-5667)

Visit our website at: <https://workerscomp.nm.gov>

For FREE copies of this poster and Notice of Accident Forms call: 1-866-967-5667

USE A NOTICE OF ACCIDENT FORM TO REPORT YOUR ACCIDENT TO YOUR SUPERVISOR

EMPLOYER: You are required by law to display this poster where your employees can read it. Post the Notice of Accident forms with it. The poster without the Notice of Accident forms does not comply with law. You have other rights and duties under the law.

POST FORMS HERE

New Mexico Workers' Compensation Administration
2401 Centro Avenue, Albuquerque, New Mexico 87106
PO Box 27346, Albuquerque, New Mexico 87125-7346

Workers Compensation

**Email these forms to CCMSI
dedicated WC email:
nmpsiawc@ccmsi.com**

**NOTICE OF ACCIDENT OR OCCUPATIONAL DISEASE DISABLEMENT
NOTIFICACION DE ACCIDENTE O ENFERMEDAD DE OFICIO**

In accordance with New Mexico law, Section 51-2-10, Section 51-2-19 and Section 51-4-4, NMSA 1978, NMAC 11.4.4.11
Conforme a la ley de la Compensación de los Trabajadores, Sección 51-2-10, Sección 51-2-19 y Sección 51-4-4, NMSA 1978, NMAC 11.4.4.11

I, _____ was involved in an on-the-job accident or was disabled by an occupational disease
Yo, _____ me lesione en un accidente en el trabajo o fui incapacitado por enfermedad de oficio

on approximately _____ at _____ Date of file _____ Employee's Date of Birth _____
aproximadamente _____ en _____ (fecha de empleo) _____ (fecha de nacimiento)

Employee's social security number _____ Employee's Home Address _____
Número de seguro social del empleado _____ Dirección de empleados _____

Employee's Telephone Number: Home _____ Mobile _____ Other _____
Número de teléfono: Casa _____ Celular _____ Otro _____

Where did the accident occur? / ¿Dónde ocurrió el accidente? _____
What happened? / ¿Qué ocurrió? _____

Worker will choose health care provider. Employer has right to change health care provider after 60 days.
Trabajador elegirá proveedor de atención médica. El empleador tiene el derecho de cambiar al proveedor de atención médica después de 60 días.

Signed _____ Signed/Notice Received _____
Firm: _____ Firma: _____

PREVIOUS NOA FORMS ARE STILL VALID FOR USE

Workers and Employers with questions about workers' compensation may contact an Ombudsman at any New Mexico Workers' Compensation Administration office for information and assistance. The office is open Monday through Friday, 8 a.m. to 5 p.m., except holidays.
Trabajadores y empleadores con preguntas acerca de la compensación de los Trabajadores pueden comunicarse con un asesor ("Ombudsman") a cualquier oficina de la Administración de la Compensación de los Trabajadores para información y asistencia. Las oficinas están abiertas desde las ocho de la mañana hasta las cinco de la tarde de lunes a viernes, con la excepción de días festivos.

**Statewide Helpline - Línea de Asistencia
1-866-WORKOMP / 1-866-967-5667
toll free - llamada sin costo de larga distancia
New Mexico Workers' Compensation Administration
P.O. Box 27198, Albuquerque, NM 87125**

Albuquerque (505) 841-6002 • (1-800) 252-7955 Las Vegas (505) 454-8031 • (800) 251-7889 Santa Fe (505) 476-7381
Farmington (505) 258-8744 • (1-800) 288-3712 Longview (575) 388-2447 • (800) 268-9462 TUC for deaf (505) 841-8542
Los Cruces (575) 524-6245 • (1-800) 878-8628 Roswell (575) 823-3967 • (800) 371-8357

**Employer/employee: Each keep one copy.
Employador/empleado: Retener una copia.**

Form NOA-2-NMPSIA 2018

**NEW MEXICO WORKERS' COMPENSATION ADMINISTRATION
EMPLOYERS' FIRST REPORT OF INJURY OR ILLNESS**

2410 CENTRE AVE. SE • P.O. BOX 27198
ALBUQUERQUE, NM 87125-1198

PLEASE PRINT IN BLOCK OR TYPE

EMPLOYER NAME & ADDRESS (SEE P.2) _____ EMPLOYER SOCIAL SECURITY NUMBER _____ COUNTY CODE _____
EMPLOYER TAX ID NUMBER _____ EMPLOYER'S LOCATION ADDRESS (IF DIFFERENT) _____ RECEIPT CODE _____
PHONE NUMBER _____ EMPLOYER IDEN _____

EMPLOYEE NAME, ADDRESS & PHONE NO. _____ COUNTY PERIOD _____ CLAIM ADMINISTRATION NAME, ADDRESS & PHONE NO. _____
SSN & DOB (SEE P.1) _____ OCCASION FOR INQUIRY _____ CCMSI _____
86644647 _____ OCCASION FOR INQUIRY (SEE INSTRUCTIONS) _____ 27198 _____
EMPLOYEE SOCIAL SECURITY NUMBER _____ POLICY/ACCIDENT NUMBER _____ 81101482 _____

DATE (SEE INSTRUCTIONS) _____ DATE OF INJURY/ILLNESS OCCURRENCE _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____
ADDRESS (SEE P.1) _____ OCCASION FOR INQUIRY (SEE INSTRUCTIONS) _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____
EMPLOYER'S BUSINESS CLASSIFICATION _____ EMPLOYEE'S OCCUPATION TITLE (SEE INSTRUCTIONS) _____
EMPLOYEE'S POSITION TITLE (SEE INSTRUCTIONS) _____ EMPLOYEE'S JOB CLASSIFICATION _____

DATE OF INQUIRY _____ DATE OF REPORTING OCCURRENCE _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____
EMPLOYEE'S SOCIAL SECURITY NUMBER _____ OCCASION FOR INQUIRY (SEE INSTRUCTIONS) _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____
DATE OF REPORTING OCCURRENCE _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____
EMPLOYEE'S SOCIAL SECURITY NUMBER _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____

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EMPLOYEE'S SOCIAL SECURITY NUMBER _____ DATE WHEN EMPLOYEE RETURNED TO WORK _____

Individual Supervisor's Accident Investigation Report Form

PREPARED BY	DATE	EMPLOYEE NAME	JOB TITLE
EMPLOYEE NUMBER	TYPE OF ACCIDENT/ILLNESS	TYPE OF INJURY	TREATMENT
DATE OF ACCIDENT	WHERE DID THE ACCIDENT OCCUR? USE ADDITIONAL SHEETS IF NECESSARY	DID EMPLOYEE RETURN TO WORK THIS SAME DAY?	YES NO
DESCRIPTION OF ACCIDENT	EMPLOYEE MECHANICALLY/PHYSICALLY/ENVIRONMENTAL CONDITION AT TIME OF ACCIDENT (Be Specific)	PERSONAL FACTORS (Attitude, Lack of Knowledge or Skill, New Workload, Fatigue)	PERSONAL PROTECTIVE EQUIPMENT REQUIRED
CAUSES	WAS INJURED EMPLOYEE USING REQUIRED EQUIPMENT?	ALTERS PLAN TO PREVENT RECURRENCE? (Modification of Machine, Mechanical Guarding, Administration, Training)	RECOMMENDATIONS
RECOMMENDATIONS	SUPERVISOR'S SIGNATURE _____ DATE _____	ALTERS TAKEN ON RECOMMENDATIONS (Include Date Completed)	

Workers Compensation

What Happens When Employees Use Medicare, Medicaid, or Their Private Insurance for Their Work-Related Injury?

- The fact of the matter is that if your employee requires treatment for a work-related injury, only workers' compensation insurance can be used. If your employee uses Medicare, Medicaid, or their personal health insurance when they have a workplace injury, they will have to lie to the doctor and tell them the injury is not from work.
- But regardless of how long it may take, the employee should count on the health insurance company to investigate whether it is actually responsible for treatment for work-related injuries.
- If they find out, they will want their money back!

Letter to Provider



NEW MEXICO PUBLIC SCHOOLS INSURANCE AUTHORITY

Dear Treating Health Care Provider of our valued employee:

New Mexico Public School Insurance Authority (NMPSIA) values our employees and is concerned for the individual welfare of all employees. In the event of a workplace injury, we want to put injured workers back to work in a safe, productive capacity as soon as possible while they are recovering. By doing so, we seek to contribute to the medical recovery of injured workers by providing meaningful work activities as approved by you, their treating health care provider.

We have a return-to-work program and if one of our employees is unable to return to his/her original job, we will make every attempt to return this employee to modified or light duties. We will also ensure that these duties meet with ALL medical restrictions that you prescribe and will monitor/support our worker during this process. If necessary, we are willing to rearrange work schedules around diagnostic or treatment appointments.

To assist in this process, we have enclosed for your review:

- The Notice of Accident form describing the incident
- A job description of our worker's regular duties at their job-of-injury position
- Provider's Report of Physical Ability

We ask that you fill out the "Provider's Report of Physical Ability" form after each appointment. **Please give the completed "Provider's Report of Physical Ability" back to our worker so they may inform us of any work restrictions that we can accommodate.**

Thank you in advance for your assistance in our early return-to-work efforts.

If you have any questions, please contact _____, (company workers' comp designee) at phone# _____ or by email at _____.

Sincerely,

X _____
Company workers' comp designee

Please route bills to our workers' comp insurance company or TPA:

CCMSI
PO Box 30870
Albuquerque NM, 87190-0870
Phone: (505) 837-8700

General Liability and Property

Claim Reporting

Steven Vanetsky

General Liability and Property


Why Timely Reporting is Critical

- * Establishment of facts
 - * Applying the correct policy and coverages
- * Permits a thorough and detailed claim investigation
 - * Could lead to a minimization of exposure
 - * Current market prices and material availability
- * Ensures the Statute of Limitations does not expire


General Liability and Property

- Where and how to report claims.
- NMPSIA website:
<https://nmpsia.com>

Risk Division drop down
Property & Liability



**NEW MEXICO
PUBLIC SCHOOLS INSURANCE AUTHORITY**
Cannon Cochran Management Services, Inc.
Claims Administrator
P.O. Box 30870
Albuquerque, New Mexico 87190-0870
800-655-4679 505-837-8700
505-888-6794 Fax



ACCIDENT REPORT – GENERAL/PRODUCTS LIABILITY
(DO NOT USE FOR AUTO)

NAME		DISTRICT		PHONE NUMBER	
ADDRESS		CITY		STATE	ZIP
ACCIDENT 1					
DATE OF LOSS	TIME OF LOSS	LOCATION OF LOSS	CITY	STATE	ZIP
OPTICALS CALLED TO SCENE IF SO, IDENTIFY					
<input type="checkbox"/> POLICE <input type="checkbox"/> FIRE DEPT. <input type="checkbox"/> AMBULANCE					
CLAIMANT (PROPERTY DAMAGE)					
NAME		ADDRESS	CITY	STATE	ZIP
DESCRIBE DAMAGED PROPERTY		LOCATION OF PROPERTY	CITY	STATE	EXTENT OF DAMAGE
CLAIMANT (BODILY INJURY)					
NAME		AGE	ADDRESS	CITY	STATE
OCCUPATION		DESCRIBE EXTENT OF INJURY			
DESCRIPTION OF LOSS					
WITNESS					
NAME		ADDRESS	CITY	STATE	ZIP
NAME		ADDRESS	CITY	STATE	ZIP
IMPORTANT: HAS THIS ACCIDENT BEEN REPORTED TO OUR LOCAL EMERGENCY ADJUSTER? <input type="checkbox"/> YES <input type="checkbox"/> NO					
IF REPORTED, NAME OF FIRM _____					
ADDRESS _____					
DATE ASSIGNED _____					

DATE OF REPORT _____ SIGNATURE AND TITLE _____

REVISED 04/01/2008

General Liability and Property

FORMS

- [Vehicle Accident Report](#)
- [Student Accident Report](#)
- [Property Loss Report](#)
- [General/Products Liability Report](#)
- [Windshield Report](#)

(Used for glass-only claims to vehicles)

General Liability and Property

Contact Information:

- Steven Vanetsky
- svanetsky@ccmsi.com
- Phone: (505) 837-8722
- CCMSI Main Office:
(505) 837-8700
- Toll Free (800) 635-0679, ext. 8722

When to Report:

- As soon as possible
- Upon first knowledge of an issue
- Even if you aren't 100% sure, err on the side of caution and make a call or send an e-mail.

Cooperative Educational Services

Technical Assistance Program

Loretta Garcia

Technical Assistance Program (TAP) 2023-24

Providing Quality Training & Technical Assistance on Special Education Topics

TAP was developed in 2015, funded by NMPSIA in collaboration with CES with the goal of decreasing Special Education litigation across the state. TAP Professional Development presentations are a valuable tool for special & general education educators, ancillary staff, and administrators.

TAP consists of 17 Consultants specializing in a variety of highly technical, litigious, and requested topics to include:

Accommodations, Attention Deficit Disorder, Autism, Behavior, Compliance, Co-teaching, Data Collection, Discipline, Instructional Strategies, Gifted Education, IEP Development & Writing, Inclusion, Multi-Layered System of Support,(MLSS), Re-evaluation & SAT process, Section 504, Self-Regulation Strategies, Specific Learning Disabilities, Social Emotional Learning (SEL), Structured Literacy, Transition Planning & Services.

TAP Consultants keep up with current legal changes and trends in Special Education as well as guidance from NMPED and “Individuals with Disabilities Education Act” (IDEA).

Overview of TAP Services

July – December 2023

94 Presentations – Over 3,000 Attendees

- Virtual & live monthly interactive presentations
- “TAP Hot Topic on Demand Webinar Library”, over 80 webinars posted, direct link-
cestap.org
- Regional workshops
- Phone & email consultations
- 4 Monthly Guidance Articles , “Compliance Corner” & “Reading Room”, “Teacher
Toolbox - Autism Spectrum Disorders”, “The Resource Room”
- Monthly Special Education Compliance PD presentations for CES Leadership Programs
- Specialized presentations needed for staff professional development
- File & program reviews
- Classroom observations / formal feedback
- Direct consultation regarding programming, staff or student related concerns
- Assistance with Corrective Action Plans, Due Process & OCR Complaints

Empowering Educators through Quality Professional Development & Consultation Services

TAP Consultants

“Certificate of Completion”
certificates provided for
attendance to live PD

ALL TAP live complimentary
presentations are recorded &
posted in the “TAP Hot Topic
On Demand Library”

TAP Hot Topic Library
averaged
860+ viewers monthly

Leigh Adams-Emanual
David D’ Antonio
Lisa Chacon-Kedge
Deborah Duncan
Chris Fox
Erin Gockel
Chelsea Maher
Kate Morris
Lisa Oliphant
Barbara Piper
Juan Portley
Jessica Powell
Rene Rohrer
Lydia Sandoval
Cindy Soo Hoo
Melodye Thomas
Margaret Wood

Selina Vigil - TAP Webinar Facilitator

TAP Hotline
(505) 985 - 8454



Loretta Garcia
TAP Coordinator
lgarcia@ces.org

Poms & Associates

Insurance Services

Julie Garcia

Vector Solutions

SAMS training for Staff, Volunteers and Contractors

①

Top Courses

667k

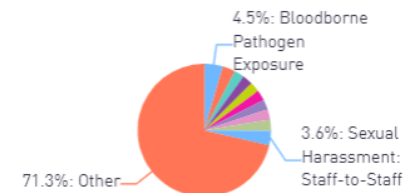
Completions

48k

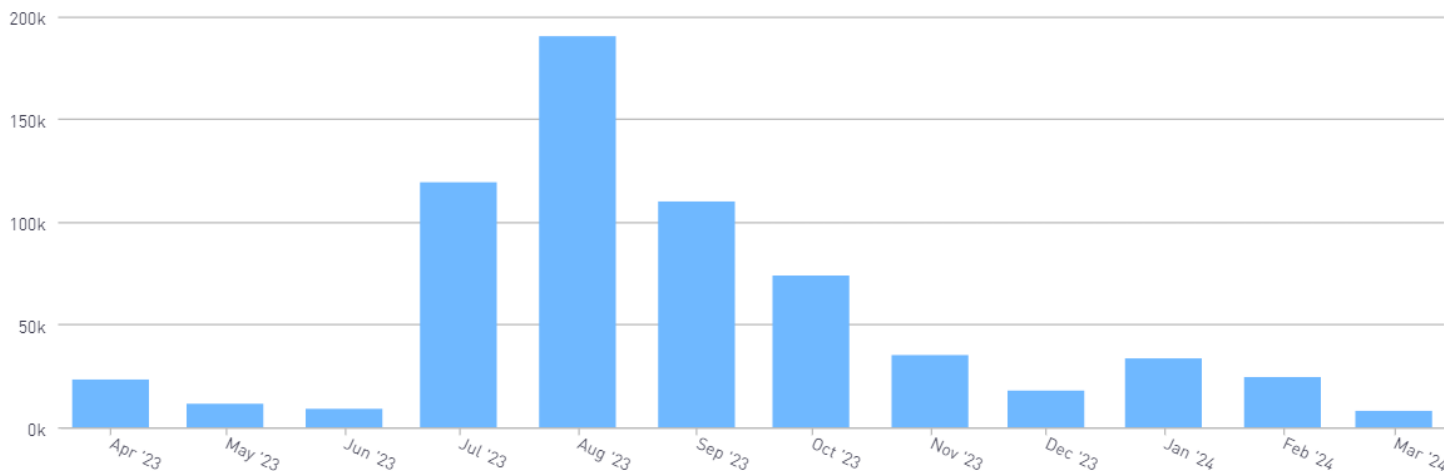
Active Users at
End of Range

37.8k

Users with
Completions



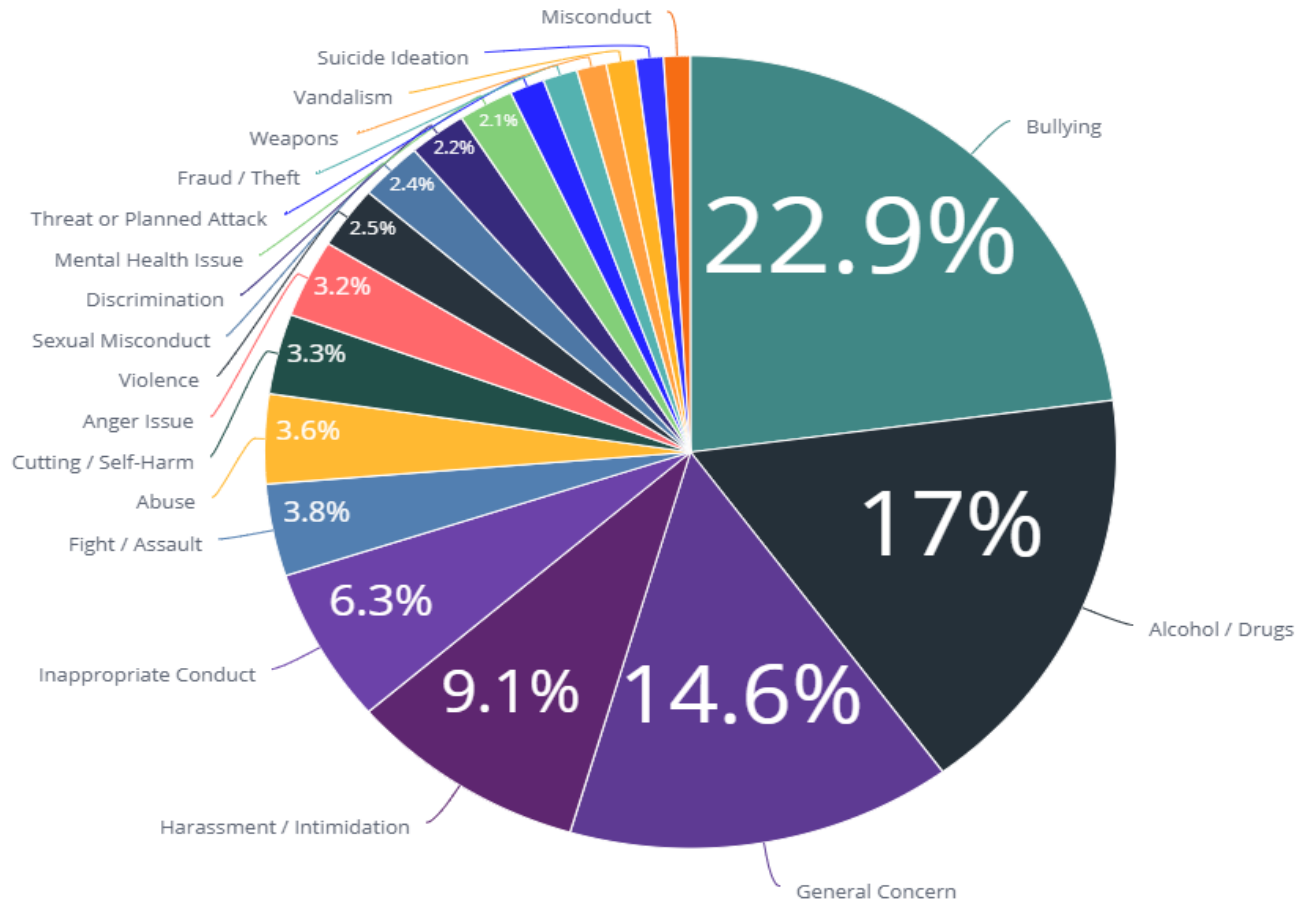
Completions Over Time



Stop It

Anonymous Reporting System for Students

Incident Families





NMPSIA

410 Old Taos Highway
 Santa Fe, New Mexico 87501
 Phone: 505.988.2736 or 1.800.548.3724
 Fax: 505.983.8670
 Website: <https://nmpsia.com/>

Questions

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NMPSIA	Claudette Roybal	Risk Coordinator	Claudette.Roybal@psia.nm.gov
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Poms & Associates	Julie Garcia	Regional Director	jgarcia@pomsassoc.com
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CCMSI	Steve Vanetsky	Claims Manager	svanetsky@ccmsi.com
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