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I. Specialty Liability Insurance

A. Directors and Officers (D & O) of corporations need liability coverage insurance because they can be sued as individuals by the stockholders. The coverage is necessary because general liability coverage of the business will **not** cover their personal liability and personal liability will **not** cover their exposure related to business activity.

- D & O insurance is written on a **claims-made basis**. The insuring agreement covers the directors and officers of the insured corporation for their personal liability that results from a **“wrongful act” as directors or officers**.
- **D & O coverage is similar to personal injury liability coverage**. D & O policies **exclude bodily injury and damage to tangible property** (covered under General Liability contracts).

B. Professionals such as doctors lawyers, insurance agents, accountants, etc., are held to a higher standard of performance because of their education and skills. Professional *recommendations* expose the professional to lawsuits for errors and/or omissions to clients or to an insured.

- This is called **Malpractice Insurance** for medical professionals or called **Errors and Omissions Insurance** for other professionals.
- Most professional liability policies today are written on a **“claims made”** basis. **Claims made** coverage obligates the carrier of the policy in effect when a claim is made to cover the claim even if the negligent act or error occurred many years before.
- Most professional liability policies provide for the **consent of the insured before the settlement of a claim.**
- **Professional liability insurance** covers the liability of rendering or failing to render professional services. It does not cover fraudulent, dishonest, or criminal acts.

C. Employment Practices Liability Insurance (EPLI) is a recent form of **personal injury liability insurance**. It provides protection for an employer against claims made by employees, former employees, or potential employees.

It covers discrimination (age, sex, race, disability, etc.), wrongful termination of employment, sexual harassment, and other employment-related allegations. It covers the company, including its Directors and Officers. This is a type of **Personal Injury** coverage.

D. Employee Benefits Liability Insurance (EBLI) - The employer may be liable for an error or omission in the administration of an employee benefit program, such as failure to advise employees of benefit programs. This exposure, or **personal injury**, is NOT covered by the General Liability policy. Coverage of this employer exposure is usually provided by the Employee Benefits Liability Policy or by an Employee Benefits Liability endorsement to the General Liability policy.

E. Cyber Liability and Network Protection Insurance - Network Security Insurance (sometimes referred to as Cyber Liability or Internet Liability) has been available since nearly the turn of the 21st century. It was created to protect companies where technologies and the internet play a significant role in basic day-to-day operations. Such as having a network connected to the internet or a website, using e-mails for communications, storing private customer data on your computers, and/or holding files with personal information on your employees and customers.

Most companies carry a general liability policy, coverage protecting against suits from third parties alleging bodily injury or property damage. The growing dependence upon the internet has given rise to incredibly significant loss potentials related to privacy, intellectual property, network security, and digital content disputes. These claims involve economic losses, not bodily injury. Traditional insurance policies do not provide sufficient coverage concerning network liability, failure to protect, or wrongful disclosure of, personally identifiable information and therefore, specific Cyber Liability policies should be considered as part of a comprehensive risk management program.

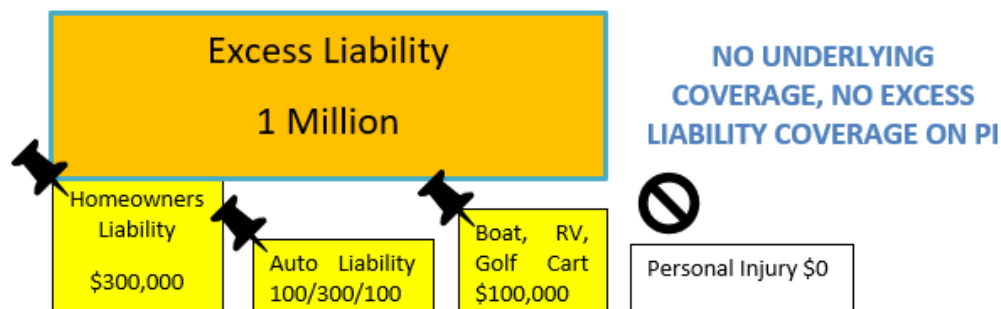
II. Personal, Commercial Umbrella, and Excess Policies

A. An Excess Liability Policy offers coverage over and above the limits of an underlying personal insurance policy. The common limit is \$1,000,000. The underlying limits can be requested to be 300/500/100 for car policies and \$300,000 for homeowners' policies by the carrier.

If the loss is covered under the underlying policy, then this **excess** policy is "triggered" when the underlying limits have been exhausted. If the loss is not covered under the underlying policy, then there is **no coverage**. **A straight excess policy tracks the primary insurance policy in all respects such as coverage, conditions, definitions, exclusions, etc.**

Excess Liability Example: John rents a large van to move his furniture to a new house. He runs into a car causing \$400,000 in injuries and damage. His auto policy does not cover vans of the size he was driving, and he did not purchase the optional insurance offered by the rental store. Therefore, he has no coverage under this excess policy.

Excel Liability Example: John is driving to work and swerves to avoid a squirrel, not realizing another car had just turned onto the street. This results in a head-on collision that John is liable for. His auto policy will pay until the limits are exhausted, then the excess liability kicks in and covers the balance until the judgment is paid out or the policy limit has been met.

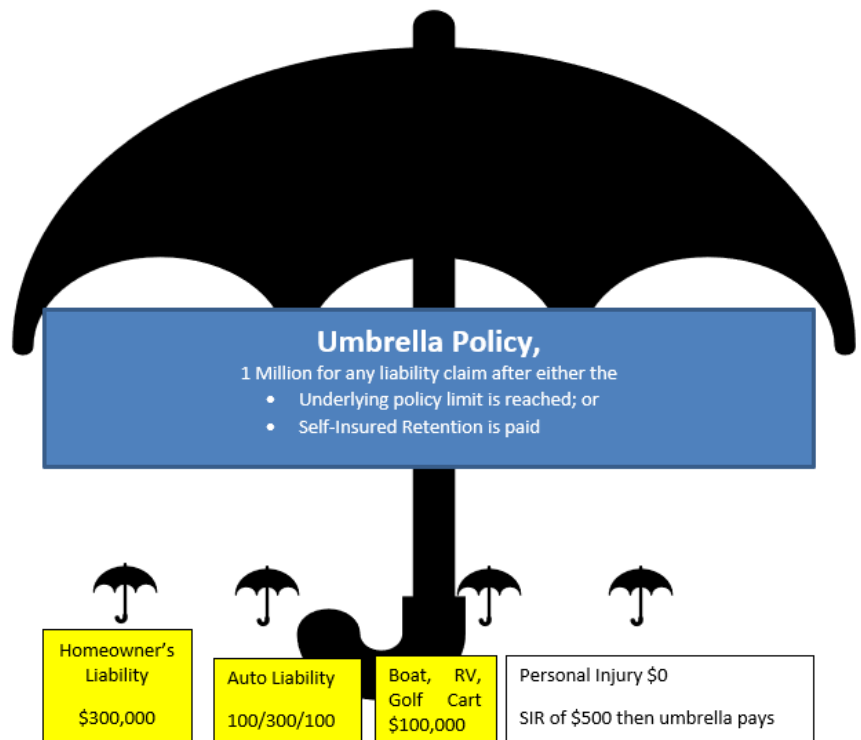


B. A Personal Umbrella Policy gives an individual greater protection against liability than that afforded by their homeowners or auto policy. Umbrella liability policies offer higher limits, usually \$1,000,000 or higher, as well as expanded coverage. At the time of purchase, the insured must identify any underlying liability coverage he has. The umbrella is coverage over and above those underlying limits.

Personal Umbrella Example: *Harriet is ordered to pay \$450,000 to a man permanently injured when her dog crashed through her screened-in porch as the man approached the house to make a delivery. Her homeowner's policy will pay the underlying limit of \$300,000. The balance of \$150,000 will be paid by the umbrella policy.*

Personal Umbrella Example: *John rents a large van to move his furniture to a new house. He runs into a car causing \$400,000 in injuries and damage. His auto policy does not cover vans of the size he was driving, and he did not purchase the optional insurance offered by the rental store. John pays his deductible (SIR) and the umbrella policy pays until the judgment is satisfied or the policy limits have been met.*

C. Self-Insured Retention... When an umbrella policy provides coverage for circumstances that are excluded by an underlying policy (such as Personal Injury under a Homeowners policy), the insured pays a selected **retention limit**, typically between \$250 and \$10,000, **which acts like a deductible, and the insurance company pays the loss over that amount.**



D. Commercial Umbrella Liability

coverage is the same as the personal umbrella and personal excess policy but used for business exposures. Umbrellas are written to provide insurance on an excess basis, above the underlying insurance or self-insured retention. Usually, commercial umbrella forms provide a minimum of one million dollars of insurance, but they are frequently written with limits of \$10 - \$50 million or more.

- There must be an underlying policy providing commercial liability coverage. The Umbrella Policy pays **after the underlying limit has been used**.
- **Self-Insured Retention** in an Umbrella Policy is the deductible that the insured will pay when the **underlying policy will not cover the loss** but the Umbrella will.
- **Straight Excess Liability** policies **only pay if the underlying policy covers the loss**.

E. Duty to Defend A supplemental coverage at no additional charge, the liability policy includes the duty to defend. It is the obligation of the insurance company to provide an insured with defense made to claims arising under a policy. It covers all legal costs relating to a lawsuit against covered items in the policy, this does not infer the obligation to pay. Duty to defend may **end** when the company has paid out the limit of the policy through judgments or settlements.

III. Surety Contracts

Surety and Fidelity Bonds (a.k.a. Suretyship)... Suretyship is the means by which one person or entity, the **surety** (a.k.a. guarantor), guarantees another entity, the **obligee**, that a third entity, the **principal (obligor)**, will do or will NOT do something.

E.g., I need a new roof (the obligee is me). The roofing company will have a bond to ensure the completion of the job. If the roofing company (the obligor) does not complete the job the company that issued the bond (the guarantor) will pay another company to complete the work. They will then subrogate to the original company to be reimbursed for what they paid.

1. Difference Between Suretyship and Insurance:

- Bonds are contracts between **three** parties; insurance is between **two** parties (the insured is the first party and the insurer is the second party).
- **Subrogation rights:**
 - Sureties can go after the principal to recover any losses. *For example, a parent may co-sign a loan for a child. The bank can go to the parent for payment if the child misses one.*
 - Insurance companies cannot go after the insured for recovery of paid losses. *For example, if Travelers pays a liability claim to the third party because of the insured's negligent act, Travelers cannot sue the insured for recovery of the amount paid to the claimant.*
- Insurance protects items against covered perils. It covers the present. Surety protects the promise of actions to be completed. It covers the future.
- *For example, Miss Janie owns a home. There is covered damage to the roof from fireworks. Insurance was paid out to fix the roof. The company that performed the work needed a bond promising Miss Janie that the work would be completed. This situation utilizes both insurance and suretyship.*

2. Three Parties to the Contract of Suretyship:

- **The Principal** (a.k.a. Obligor) - the person or business on whom the bond is written and whose performance is guaranteed.
- **The Surety (Guarantor)** - the party that guarantees the performance or faithfulness of another.
- **The Obligee** - the person or business who is protected by the bond. The obligee under a bond is the same as the insured under an insurance contract. In the case of a construction bond, the person for whom the building is being built is the obligee, and the builder is the principal.

A. A Surety Bond *guarantees* that the principal ***will do something***. For example, a **Contract Bond** guarantees the fulfillment of contractual obligations. The following are types of Contract Bonds: Performance Bonds, Bid Bonds, Supply Bonds, Payment Bonds, and Maintenance Bonds.

Surety, whether personal or corporate, is a guarantee that you will do something!

A Personal Bond (sometimes referred to as a signature bond) is where you merely put up a promise to appear, or guarantee the bail with personal assets. Fail to appear in court and you will owe the money for the bond. A Personal bond is just a signature for a specific amount. The court wants a guarantee that you, as an individual, will properly administer the estate. A personal bond will need to be procured.

Corporate Suretyship was first formed in the 1800s. Prior to that time, individual arrangements were risky and there were no guarantees that the assets of a backer would satisfy the obligation. Once organizations began to specialize in issuing surety bonds, formal contracts backed up by corporate assets became available to meet individual and business needs. Bonds are usually issued by insurance companies.

A corporate surety is a company that charges for the guarantee; and

A personal surety is a person(s) who the court would accept as a guarantor (almost like a co-signor).

B. A Fidelity Bond **protects an employer against the dishonest acts of employees**. It guarantees that the ***principal will NOT do something***. Fidelity bonds are similar to Surety Bonds with the Parties to the Contract, the Promise-to-Pay Agreement, and subrogation rights.

They also are similar to Employee Dishonesty Insurance under crime coverage.

- A **Fidelity Bond** guarantees to the Obligee (like a bank) that something **won't happen** (like a bank teller steals money). A teller steals money, the bank is paid by the bonding company the amount stolen. The bonding company then will go after (subrogate) the teller for reimbursement.

IV. Workers' Compensation (a.k.a. State Industrial) can be monopolistic and compulsory (required) in some states. In this case, monopolistic means coverage can only be purchased from one source, the state government. Some states allow coverage to be purchased from the insurance industry. In this case, compulsory means it is required that employers provide benefits for employees' work-related sicknesses or accidents.

A. Workers' Compensation Insurance... is compulsory and monopolistic in the State of Washington. Workers' Compensation laws impose a form of ***absolute liability*** because employers are held liable for employees' work-related injuries and sicknesses, ***regardless of fault***.

Workers' Compensation is not elective, it is compulsory in most states. Employers must provide this for their employees. As a result, both parties are protected. The employee will be able to get medical assistance if needed for any illness or injury at work. The employer will be protected against lawsuits from employees or former employees who were injured while working for the because they did provide coverage. It is the exclusive remedy for injured workers.

- B. Coverage and Benefits...** Workers' Compensation, generally, will pay benefits in four different categories for bodily injury resulting from accidents or illness that occurred during the policy period.
- a) **Medical Benefits...** pays for the cost of various types of medical services required as a result of an employment-related injury or illness. The benefits are paid with no dollar limit or time limit on covered expenses. There is no cost to the employee although there may be a network of associated physicians they need to stay in.
 - b) **Disability or Loss of Income Benefits...** pays the injured person a tax-free income, about 2/3 of the gross salary. This will continue until they are back at work or judged to be able to work.
 - c) **Vocational Rehabilitation** is covered to help train the employee to secure another type of employment in the event they can no longer do the job they had prior to the injury.
 - d) **Death and Survivor Benefits** are paid to the family in a lump sum for funeral costs and continuous pay if there are children under the age of 18.
- C. Other States Coverage...** provides automatic coverage in states which have non-monopolistic workers' compensation laws. It may be purchased at the employers' option. The state where the work will be done must be listed on the policy as soon as the business has workers there.

Employers' Liability (a.k.a. Stopgap Coverage)... One provision offered in some workers' compensation insurance packages is employee liability coverage. This provision covers expenses related to any lawsuits filed against the employer as a result of a work-related injury that is NOT covered under their general liability policy.

It protects the employer against liability arising from work-related injuries or diseases not covered by the workers' compensation law or the employer's general liability policy. *For example, children file a suit against the employer for a work injury that put their father, the employee, into a wheelchair. The children no longer have their healthy father due to employment. Workers' compensation is the exclusive remedy for the EMPLOYEE, not any other injured parties.*

- D. Rating and Job Classification** Job classifications are a way to classify risk. The riskier the job, the higher the premium. There are many classifications in many different industries. Experience rating also plays a factor in establishing premium by predicting how a business's future claims will compare to its risk classification.

E. Workers Compensation Definitions

***Read through the definitions once, do not memorize. The main text continues at the next letter. There is 1 exam question total for sections E-H.*

1. "Acting in the course of employment."

- "Acting in the course of employment" means the worker acting at his or her employer's direction or in the furtherance of his or her employer's business which shall include time spent going to and from work on the jobsite.
- It is not necessary that at the time an injury is sustained by a worker he or she is doing the work on which his or her compensation is based or that the event is within the time limits on which industrial insurance or medical aid premiums or assessments are paid.
- "Acting in the course of employment" does not include:
 - (a) Time spent going to or coming from the employer's place of business in an alternative commute mode *e.g., carpool or vanpool*.
 - (b) An employee's participation in social activities.

2. Agriculture means the business of growing or producing any agricultural or horticultural produce or crop, including the raising of any animal, bird, or insect, or the milk, eggs, wool, fur, meat, honey, or other substances obtained therefrom.

3. "Amount," "payment," "premium," "contribution," "assessment." Wherever and whenever in any of the provisions of this title relating to any payments by an employer or worker the words "amount" and/or "amounts," "payment" and/or "payments," "premium" and/or "premiums," "contribution" and/or "contributions," and "assessment" and/or "assessments" appear said words shall be construed to mean taxes, which are the money payments by an employer or worker which are required by this title to be made to the carrier for the insurance.

4. Average monthly wage. For purposes of this title, the average monthly wage in the state shall be the average annual wage as determined under RCW [50.04.355](#) as now or hereafter amended divided by twelve.

5. Beneficiary means a husband, wife, child, or dependent of a worker in whom shall vest a right to receive payment under this title: PROVIDED, That a spouse of an injured worker, living separate and apart in a state of abandonment, regardless of the party responsible therefor, for more than one year at the time of the injury or subsequently, shall not be a beneficiary. A spouse who has lived separate and apart from the other spouse for the period of two years and who has not, during that time, received, or attempted by process of law to collect, funds for maintenance, shall be deemed living in a state of abandonment.

- 6. Child** means every natural born child, posthumous child, stepchild, child legally adopted prior to the injury, child born after the injury where conception occurred prior to the injury, and dependent child in the legal custody and control of the worker, all while under the age of eighteen years, or under the age of twenty-three years while permanently enrolled at a full time course in an accredited school, and over the age of eighteen years if the child is a dependent as a result of a disability.
- 7. Dependent** means any of the following named relatives of a worker whose death results from any injury and who leaves surviving no widow, widower, or child, viz: Father, mother, grandfather, grandmother, stepfather, stepmother, grandson, granddaughter, brother, sister, half-sister, half-brother, niece, nephew, who at the time of the accident are actually and necessarily dependent in whole or in part for their support upon the earnings of the worker.
- 8. Employer—Exception** means any person, body of persons, corporate or otherwise, and the legal representatives of a deceased employer, all while engaged in this state in any work covered by the provisions of this title, by way of trade or business, or who contracts with one or more workers, the essence of which is the personal labor of such worker or workers.
- 9. Employer—Exception.** Or as an exception to the definition of employer, persons or entities are not employers when they contract or agree to remunerate the services performed by an individual who is an independent contractor.
- 10. Health services provider—Provider** means any person, firm, corporation, partnership, association, agency, institution, or other legal entity providing any kind of services related to the treatment of an industrially injured worker.
- 11. Injury** means a sudden and tangible happening, of a traumatic nature, producing an immediate or prompt result, and occurring from without, and such physical conditions as result therefrom.
- 12. Invalid** means one who is physically or mentally incapacitated from earning.
- 13. New medical issue** means a medical issue not covered by a previous medical examination requested by the department or the self-insurer such as an issue regarding medical causation, medical treatment, work restrictions, or evaluating permanent partial disability.
- 14. Occupational disease** means such disease or infection as arises naturally and proximately out of employment under the mandatory or elective adoption provisions of this title.
- 15. Occupational disease—Exclusion** of mental conditions caused by stress, except for certain firefighters. Claims based on mental conditions or mental disabilities caused by stress do not fall within the definition of occupational disease.

16. Permanent partial disability means the loss of either one foot, one leg, one hand, one arm, one eye, one or more fingers, one or more toes, any dislocation where ligaments were severed, where repair is not complete, or any other injury known in surgery to be permanent partial disability.

17. Permanent total disability means loss of both legs, or arms, or one leg and one arm, total loss of eyesight, paralysis or other condition permanently incapacitating the worker from performing any work at any gainful occupation.

18. Posttraumatic stress disorder means a disorder that meets the diagnostic criteria for posttraumatic stress specified by the American psychiatric association in the diagnostic and statistics manual of mental disorders.

19. Self-insurer means an employer or group of employers which has been authorized under this title to carry its own liability to its employees covered by this title.

20. Successor means any person to whom a taxpayer quitting, selling out, exchanging, or disposing of a business sells or otherwise conveys, directly or indirectly, in bulk and not in the ordinary course of the taxpayer's business, a major part of the property, whether real or personal, tangible or intangible, of the taxpayer.

21. Wages—Monthly wages as basis of compensation—Computation thereof. For the purposes of this, the monthly wages the worker was receiving from all employment at the time of injury shall be the basis upon which compensation is computed unless otherwise provided specifically in the statute concerned.

The term "wages" shall include the reasonable value of board, housing, fuel, or other consideration of like nature received from the employer as part of the contract of hire, but shall not include overtime pay. tips shall also be considered wages only to the extent such tips are reported to the employer for federal income tax purposes.

22. Worker Exceptions means every person in this state who is engaged in the employment of an employer under this title, whether by way of manual labor or otherwise in the course of his or her employment; also every person in this state who is engaged in the employment of or who is working under an independent contract, the essence of which is his or her personal labor for an employer under this title, whether by way of manual labor or otherwise, in the course of his or her employment, or as an exception to the definition of worker, a person is not a worker if he or she meets the tests set forth in subsections (1) through (6) of RCW [51.08.195](#) or the separate tests set forth in RCW [51.08.181](#) for work performed that requires registration under chapter [18.27](#) RCW or licensing under chapter [19.28](#) RCW: PROVIDED, That a person is not a worker for the purpose of this title, with respect to his or her activities attendant to operating a truck which he or she owns, and which is leased to a common or contract carrier.

23. "Worker"—Registered contractor and electrician exclusions.

For the purposes of this title, any individual performing services that require registration under chapter [18.27](#) RCW or licensing under chapter [19.28](#) RCW for remuneration under an independent contract is not a worker when:

(1) The individual has been, and will continue to be, free from control or direction over the performance of the service, both under the contract of service and in fact;

(2) The service is either outside the usual course of business for which the service is performed, or the service is performed outside all of the places of business of the enterprise for which the service is performed, or the individual is responsible, both under the contract and in fact, for the costs of the principal place of business from which the service is performed;

(3) The individual is customarily engaged in an independently established trade, occupation, profession, or business, of the same nature as that involved in the contract of service, or the individual has a principal place of business for the business the individual is conducting that is eligible for a business deduction for federal income tax purposes other than that furnished by the employer for which the business has contracted to furnish services;

(4) On the effective date of the contract of service, the individual is responsible for filing at the next applicable filing period, both under the contract of service and in fact, a schedule of expenses with the internal revenue service for the type of business the individual is conducting;

(5) On the effective date of the contract of service, or within a reasonable period after the effective date of the contract, the individual has an active and valid certificate of registration with the department of revenue, and an active and valid account with any other state agencies as required by the particular case, for the business the individual is conducting for the payment of all state taxes normally paid by employers and businesses and has registered for and received a unified business identifier number from the state of Washington;

(6) On the effective date of the contract of service, the individual is maintaining a separate set of books or records that reflect all items of income and expenses of the business which the individual is conducting; and

(7) On the effective date of the contract of service, the individual has a valid contractor registration pursuant to chapter [18.27](#) RCW or an electrical contractor license pursuant to chapter [19.28](#) RCW.

24. "Employee." "Employee" shall have the same meaning as "worker" when the context would so indicate, and shall include all officers of the state, state agencies, counties, municipal corporations, or other public corporations, or political subdivisions.

25. "Employer" and "worker"—Additional exception. As an exception to the definition of "employer" under RCW [51.08.070](#) and the definition of "worker" under RCW [51.08.180](#), services performed by an individual for remuneration shall not constitute employment subject to this title if it is shown that:

- (1) The individual has been and will continue to be free from control or direction over the performance of the service, both under the contract of service and in fact; and
- (2) The service is either outside the usual course of business for which the service is performed, or the service is performed outside all of the places of business of the enterprise for which the service is performed, or the individual is responsible, both under the contract and in fact, for the costs of the principal place of business from which the service is performed; and
- (3) The individual is customarily engaged in an independently established trade, occupation, profession, or business, of the same nature as that involved in the contract of service, or the individual has a principal place of business for the business the individual is conducting that is eligible for a business deduction for federal income tax purposes; and
- (4) On the effective date of the contract of service, the individual is responsible for filing at the next applicable filing period, both under the contract of service and in fact, a schedule of expenses with the internal revenue service for the type of business the individual is conducting; and
- (5) On the effective date of the contract of service, or within a reasonable period after the effective date of the contract, the individual has established an account with the department of revenue, and other state agencies as required by the particular case, for the business the individual is conducting for the payment of all state taxes normally paid by employers and businesses and has registered for and received a unified business identifier number from the state of Washington; and
- (6) On the effective date of the contract of service, the individual is maintaining a separate set of books or records that reflect all items of income and expenses of the business which the individual is conducting.

F. Occupational Accident versus Occupational Disease and Illness

An occupational accident is one that causes damage and occurs during the course of work. You have a time, date, and location, nothing further may be needed.

Occupational illnesses can be tricky. A cashier with carpal tunnel is easy to diagnose and it came from repetitive action at work. While, for a worker with a lung disease, the connection is not always clear. If a connection can be made that exposure was at the place of business, even though the symptoms may not appear immediately, a claim can be filed as long as it is filed within a period of time once the person is disabled from the disease. Even if they are no longer working at that place of employment.

G. Levels of Disability

Permanent partial disability means the loss of either one foot, one leg, one hand, one arm, one eye, one or more fingers, one or more toes, any dislocation where ligaments were severed, where repair is not complete, or any other injury known in surgery to be a permanent partial disability.

Permanent total disability means loss of both legs, or arms, or one leg and one arm, total loss of eyesight, paralysis, or other condition permanently incapacitating the worker from performing any work at any gainful occupation.

Temporary partial disability means the worker is either unable to work or is unable to earn the pre-injury income but will recover completely and be able to return to the same position and hours held prior to the injury.

Temporary total disability means the employee is currently unable to work at all while recovering but will be able to return once recovered.

H. Federal Laws

Most states have Workers' Compensation laws. The United States Constitution grants exclusive jurisdiction in all maritime matters to the Federal government.

The United States Longshore and Harbor Workers Compensation Act was enacted in 1927 to protect the workers - other than seafarers - in maritime employment on the navigable waters of the United States who are considered outside the scope of state Workers' Compensation laws. It is very similar to state workers' compensation laws. The employer is liable for all employees including those working under a subcontractor. If coverage is not provided, the employee can file suit. If a third party is involved the injured person may bring suit against them as well.

The Jones act or the Merchant Marine Act, section 688, was introduced to provide coverage for workers on barges and vessels or railways who are injured or killed through their employers' negligence. *This is not absolute liability coverage as Workers' Compensation is.* The injured party must file suit against the employer for negligence that lead to the injury. Comparative negligence may play a part in that if the injured party is found to be guilty of contributory negligence the damages will be reduced proportionately.

There are several endorsements available to provide coverage for these circumstances.

Common Property and Casualty Abbreviations

ACV	Actual Cash Value	GL	General Liability
AIP	Auto Insurance Policy	HO	Homeowners
BI	Bodily Injury	ISO	Insurance Services Office
BOP	Business Owners' Policy	NAIC	National Association of Insurance Commissioners
BAP	Business Auto Policy	OIC	Office of Insurance Commissioner
CAP	Commercial Auto Policy	OTC	Other Than Collision (Comprehensive – Auto)
CPP	Commercial Package Policy	PAF	Personal Article Floater
CGL	Commercial General Liability	PAP	Personal Auto Policy
CPL	Comprehensive Personal Liability	PI	Personal Injury (3 rd Party - Liability)
D & O	Directors and Officers	PIP	Personal Injury Protection (1 st Party Auto)
DOC	Drive Other Car	PD	Property Damage (Liability)
DP	Dwelling Property	SIR	Self-Insured Retention (Umbrella)
EC	Extended Coverage	UM	Uninsured Motorist
ERP	Extended Reporting Period	UIM	Underinsured Motorist
E & O	Errors and Omissions	V & MM	Vandalism and Malicious Mischief
MV	(Fair) Market Value	WA	State of Washington
FAIR Plan	Fair Access to Insurance Requirement (WA)	WAIP	Washington Auto Insurance Plan
FCRA	Fair Credit Reporting Act		