

## UNIVERSITY OF CALIFORNIA

BERKELEY • DAVIS • IRVINE • LOS ANGELES • MERCED • RIVERSIDE • SAN DIEGO • SAN FRANCISCO



SANTA BARBARA • SANTA CRUZ

VICE PRESIDENT—FINANCIAL MANAGEMENT

 OFFICE OF THE PRESIDENT  
 1111 Franklin Street, 10<sup>th</sup> Floor  
 Oakland, California 94607-5200

October 31, 2001

 CAMPUS RISK MANAGERS  
 HOSPITAL RISK MANAGERS

RE: Delegation for Certificates of Insurance

As part of your responsibilities as Campus/Hospital Risk Managers, we are providing you this delegation to issue certificates of insurance on behalf of the Office of the President, Office of Risk Management (OPRM).

You are authorized to issue certificates of insurance evidencing University self-insurance program coverage for the following Programs:

- ◆ The General and Automobile Liability Self-Insurance Program (BUS-75) up to the self-insured retention (SIR) of \$5 million per occurrence.
- ◆ The Property Self-Insurance Program (BUS-28) for University property up to the SIR of \$2.5 million per occurrence.
- ◆ The Professional Medical and Hospital Liability Self-Insurance Program up to the SIR of \$5 million per occurrence.
- ◆ For the Workers' Compensation Program copies of the University's "Certificate of Consent to Self-Insure" issued by the State of California may be provided.

**This authorization is effective immediately and supersedes all previous authority.**

Compliance with the following is required under this delegation:

Signature authority is delegated specifically to Campus and Hospital Risk Managers. Signature authority may be re-delegated to an Assistant Risk Manager provided the re-delegation is in writing and a copy is sent to OPRM: **this authority may not be re-delegated further.** In the event of an emergency, your supervisor or his/her supervisor may sign a certificate. Certificates may not be signed by other individuals or by an individual signing your name with their initials. Rubber stamp signatures are not acceptable.

You will be responsible for assuring that certificates are issued in compliance with applicable University policies (such as the Regents policy on indemnification), terms and conditions of contracts, and available University coverage. Certificates must comply with the following:

- ♦ Certificates should be issued in the legal name of the contracting party.
- ♦ The return address should be that of the campus/hospital risk management office issuing the certificate.
- ♦ The type of coverage and limits should not be different or greater than required by the contract.
- ♦ The other party should not be named as an additional insured or loss payee unless it is required by the contract.
- ♦ The expiration date should be the expiration date of the contract, license, permit, etc. An expiration date is necessary only if the University is naming the other party as an additional insured or loss payee. If a contract is for an extended period of time, e.g. over five years, you may use an expiration date that is sooner than the contract expiration date.
- ♦ When reviewing requests for renewal of certificates, all previous contracts and amendments should be reviewed to assure that the terms and conditions are still consistent with the applicable self-insurance program.

It is not required that copies of certificates be sent to OPRM; however, they must be maintained in your office and will be subject to periodic audit. Certificates will be audited for compliance with this delegation, University policy, and self-insurance program coverage. Your office will be the official Office of Record. Each certificate must be numbered and filed in sequential order. All certificates must have supporting documentation attached and be kept for three years past the expiration date.

You are authorized to issue the attached standard certificates of insurance, dated 10/16/01. (They are not currently available in pdf format):

- ♦ GL-no additional insured
- ♦ GL-additional insured
- ♦ GL and Property
- ♦ Property-no loss payee
- ♦ Property-loss payee
- ♦ PL-additional insured
- ♦ PL-no additional insured

The blank areas will need to be filled in at the time the certificate is issued. **The preprinted language shown on each of the examples may not be modified nor may additional information be included without approval of OPRM.**

Requests for evidence of insurance in excess of the self-insured retentions or for any of the insured programs must be sent to OPRM for issuance.

In regard to requests for waivers of subrogation, you are authorized to waive subrogation for first party property (BUS-28) only. The Office of the General Counsel determined that the waiver of subrogation for the liability programs and workers' compensation would be an assumption of third-party liability and would require approval of the Regents.

On occasion someone may ask for a certificate or statement of coverage when there is no contract, memorandum of understanding or other document describing the activity, services, etc. of the University's involvement with the other party or requirement to provide a certificate of insurance. For these situations you should not issue a certificate, but may provide the following statement:

"The Regents of the University of California maintains programs of self-insurance for liability of the Regents and claims of bodily injury, property damage, or personal injury resulting from the acts or omissions of its employees acting within the course and scope of their employment as defined by the California Tort Claims Act."

Optional additional sentence:

"University employees are covered except where they act or fail to act because of actual fraud, corruption or actual malice (California Tort Claims Act, Government Code Section 810)."

Because of the uncertainty in the insurance market we do not know if our SIRs will change; therefore, it would be best to not indicate the SIR. If, however, this creates a problem, you could add: "The current self-insured retention is \$5,000,000 per occurrence."

**NOTE: Costs resulting from changes to certificate language or extension of coverage beyond what has been approved by OPRM will be the responsibility of each campus or medical center.**

Please do not hesitate to call if you need assistance or have any questions.

Sherry M. Carletta  
Assistant Director  
Office of Risk Management

cc: Director Trippe  
OPRM Program Managers

Attachments