Mission Statement:
FCSRMC delivers comprehensive and innovative enterprise-wide risk management services and solutions to support the educational mission of the Florida College System.

Overview:
Florida College System Risk Management Consortium

The Consortium exists as a risk-sharing pool formed by the Florida College System District Boards of Trustees under a mutual agreement. Florida Statutes allow the creation of a Consortium by the state colleges to develop a cooperative system of risk management under one comprehensive, statewide plan. In addition, the Florida Legislature has provided authority for the state colleges to participate in self-insurance, excess insurance and specific insurance programs through the Consortium. These programs include: workers’ compensation, liability, property, health and life insurance and others. The purpose of the Consortium is to manage the insurance programs in accordance with Florida Statutes and as approved by the member colleges’ Risk Management Council (part of the Council of Presidents).

Contact us:
Florida College System Risk Management Consortium
4500 N.W. 27th Avenue, Suite D-2
Gainesville, Florida 32606
P (352) 955-2190  F (352) 955-2069
www.FCSRMC.com

Chauncey Fagler, ARM-P
Executive Director
352.955.2190 x101
cfagler@fcsrmc.com

Robert Pralle
Associate Director
352.955.2190 x102
rpralle@fcsrmc.com

Tony Ganstine
Enterprise Risk Manager
352.955.2190 x115
tganstine@fcsrmc.com

Roger A. Hatfield, J.D.
Enterprise Risk Manager
352.955.2190 x112
rhatfield@fcsrmc.com

Joshua Davis
Enterprise Risk Manager
352.955.2190 x114
jdavis@fcsrmc.com

Justin Piazza
Enterprise Risk Manager
352.955.2190 x107
jpiazza@fcsrmc.com

Natalie Dyksterhouse
Risk Management Associate
352.955.2190 x104
ndyksterhouse@fcsrmc.com

Selina Ohlson, RCSR
Administrative Assistant
352.955.2190 x103
sohlson@fcsrmc.com

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sohlson@fcsrmc.com
ALLIED HEALTH (Malpractice):

**TYPE OF COVERAGE:**
Professional liability for acts of students involved in reported curriculums of allied health programs. Vicarious liability for faculty and college as result of student acts.

**COLLEGE:**
There is no college deductible.

**FCSRMC:**
The American Casualty Company of Reading, PA (CNA) will pay claims up to $2 million per incident/$5 million aggregate per college.

**OTHER:**
Policy is on a “per occurrence” basis.

**POLICY PERIOD:**
08/26/2014 - 08/26/2015

**Lead Contact:** Justin Piazza

ATHLETICS (Intercollegiate):

**TYPE OF COVERAGE:**
Medical accident policy for students participating in intercollegiate athletic program(s).

**COLLEGE:**
There is no college deductible.

**FCSRMC:**
Summit America Insurance Services will pay claims. Claims must be made within 30 days of incident. Mutual of Omaha is insurance carrier.

**OTHER:**
Hartford claim form must be submitted within 30 days of incident to Fringe Benefit Coordinators.

**POLICY PERIOD:**
08/26/2014 - 08/26/2015

**Lead Contact:** Justin Piazza

EDUCATION/TRAINING STUDENT ACCIDENT:

**TYPE OF COVERAGE:**
Medical accident coverage for students who are injured while participating in reported curriculums. Coverage is EXCESS over other insurance - if no other insurance policy, this coverage will act as primary.

**COLLEGE:**
There is no college deductible.

**FCSRMC:**
Fringe Benefit Coordinators, Inc. will pay claims. Hartford Life and Accident is the insurance carrier. This Policy will pay claims up to $15,000 for medical expenses and up to $25,000 for accidental death and dismemberment.

**OTHER:**
Hartford claim form must be submitted within 30 days of incident to Fringe Benefit Coordinators.

**POLICY PERIOD:**
08/26/2014 - 08/26/2015

**Lead Contact:** Justin Piazza

FACILITIES USE:

**TYPE OF COVERAGE:**
Liability coverage for college and others’ use of college facilities (i.e. renting conference room).

**COLLEGE:**
There is no college deductible.

**FCSRMC:**
Consortium deductible is $500 for Bodily Injury or Property Damage per claim.

**OTHERS:**
National Fire and Marine Insurance Company will pay up to $200,000 per person, $300,000 per occurrence.

This policy is on a reporting basis.

**POLICY PERIOD:**
08/01/2014 - 08/01/2015

**Lead Contact:** Roger Hatfield

HEALTH BENEFITS:

**MEDICAL:**
- PROVIDER: Florida Blue
  - PPO BlueOptions 3562
  - PPO BlueOptions 3566
  - HMO BlueCare 10
  - PPO BlueOptions 3359 & HRA
  - PPO BlueOptions 03559
  - HMO BlueCare 51
  - PPO BlueOptions 03769
  - HMO BlueCare 58
  - PPO BlueOptions 03900 (Part-Time)
  - DV Dental & Vision Plans Options (see below)
  - BlueMedicare PPO 1

**DENTAL:**
- PROVIDER: Delta Dental
  - Employer Paid PPO Dental Options
  - Voluntary PPO Dental Options
  - Employer Paid HMO Dental Options
  - Voluntary HMO Dental Options

**VISION:**
- PROVIDER: VSP
  - Employer Paid Vision Options
  - Voluntary Vision Options

**EAP:**
- PROVIDER: Aetna Resources for Living
  - Employee Assistance Program

**LIFE:**
- PROVIDER: Unum
  - Employee Group Term Life Insurance Program
  - Dependent Life

**ANCILLARY:**
- PROVIDER: Unum
  - Short Term Disability
  - Long Term Disability

**WELLNESS INCENTIVE PROGRAM:**
- PROVIDER: BlueRewards

**POLICY PERIOD:**
01/01/2015 - 12/31/2015

**Lead Contact:** Natalie Dyksterhouse

**DISCLAIMER – Summary Purposes Only. Refer to the Plan Document and policies for coverage provisions and exclusions.**