ERIE COUNTY
DEPARTMENT OF MENTAL HEALTH
2026 - 2027 ECDMH Insurance Requirements

Please reference the Agency's prior year's certificates and review the renewal certificates before submitting them to ensure these four (4) important County requirements have all been met (see the Agency's current year Initial Contract, Appendix C – these have been stamped with County approval)**:**

1. Naming the "**County of Erie**" as **additional insured** and indicating so inside the insurance table for the following policies: **General**, **Auto**, **Excess**, **Abuse, and Cyber** Liability policies.
   - **Red font below = County of Erie** must be named as **Additional Insured** (an "X" or "Y" must be placed in the Additional Insured column inside the Insurance Table).

2. **Waiver of Subrogation** must be indicated inside the insurance table for the following policies: **General**, **Auto**, **Excess**, and **Abuse & Molestation** Liability policies.
   Orange font below = Waiver of Subrogation must be indicated (an "X" or "Y" must be placed in the Additional Insured column inside the Insurance Table)**.**

3. Blue font below = **Property** requires **County of Erie** to be named as either **Additional Insured** OR **Loss Payee** (an "X" or "Y" must be placed in the Additional Insured column / box or Loss Payee box inside the Insurance Table). Acceptable forms are ACORD 25 or ACORD 27.

4. All Certificates shall name the "**County of Erie, 95 Franklin Street, Buffalo, NY 14202**," as **Certificate Holder** and satisfy the following requirements:
   The **Certificate Holder** on ALL Certificates **must be addressed to**:

COUNTY OF ERIE
95 FRANKLIN STREET
BUFFALO, NY 14202
**Do not list any further information in the Certificate Holder area.*

It is the responsibility of contract agencies to maintain the required County coverage listed below and submit insurance renewals timely. **It is suggested that if the Agency's insurance expires between November - January, consider changing the policy period(s) to mid-year through mid-year to avoid delay of Q1 advance payment**. No advances can or will be made if the insurance certificates on file expire. Payment(s) will be withheld until ECDMH receives proof that policies are current and have been stamped approved by our Assistant County Attorney; exceptions cannot be made to this policy.

Waiver Letter Templates and all Certificates of Insurance **must be sent via email only to Melissa Stark, Contracts Specialist** @ Melissa.Stark@erie.gov.

All ECDMH Reference Documents for contract agencies can be found on our website located using the following link:
https://www3.erie.gov/mentalhealth/information-contract-agencies

The following Liability policies must be submitted on ACORD 25 form; preferably all on the same Certificate, if space will allow (General, Abuse, Auto, Excess/Umbrella, Professional, Property and Cyber).

GENERAL:

- County of Erie MUST be listed as Additional Insured inside the Insurance Table
- Waiver of Subrogation MUST be indicated inside the Insurance Table

Required Limits:

- Minimum combined single limit of bodily injury and property damage of $1,000,000 per occurrence and a general aggregate of $2,000,000, including premises and operations, products and completed operations, independent contractors, contractual liability (sufficient to cover all liability assumed under contracts with the County) and personal injury liability.

ABUSE & MOLESTATION:

- County of Erie MUST be listed as Additional Insured inside the Insurance Table
- Waiver of Subrogation MUST be indicated inside the Insurance Table

Requirements:

- Coverage shall be included for actual or alleged incidents of Abuse and Molestation on an Occurrence Form;
- Coverage can be provided via endorsement to the General Liability policy or as a standalone policy;
- County of Erie shall be listed as an Additional Insured for all ongoing and completed operations on a Primary and Non-Contributory Basis;
- Can be met via a combination of both Primary and Excess/Umbrella Liability policies with submission of ECDMH Waiver Letter Template and Umbrella Declaration pages that reflect such coverage (*see Waiver Letter requirements on page 5*); **and**

*Required Limits are based on the agency's current year contract dollar amount as follows:

- **Tier 1** – Contracts from $0 to $999,999
  *Limits no less than **$1 Million per occurrence**
- **Tier 2** – Contracts between $1,000,000 to $2,999,999
  *Limits no less than **$3 Million per occurrence**
- **Tier 3** – Contracts $3,000,000 and higher
  *Limits no less than **$5 Million per occurrence**

**If your agency cannot meet these requirements, please communicate your situation via email so we can*

provide an ECDMH Abuse Waiver Template for an authorized representative at your agency to complete, sign and return for our Assistant County Attorney's review and consideration.

AUTO:

- County of Erie MUST be listed as Additional Insured inside the Insurance Table
- Waiver of Subrogation MUST be indicated inside the Insurance Table

Required Limits:

- Minimum combined single limit of bodily injury and property damage of $1,000,000 each occurrence, and MUST include: **Owned, Hired and Non- Owned** Autos; **and**
- Agencies that permit employees to utilize their personal vehicles to conduct agency business in relation to duties, activities and/or obligations set forth in this Agreement shall ensure that each employee has a personal automobile policy which includes verifiable and adequate automobile liability coverage.
- Proof of such coverage shall be available for review upon request of the County.

Commercial Auto Liability Coverage Definitions:

- Owned = Vehicles Owned by the business or leased for 6 months/more
- Hired = Vehicles the agency owns, rents, leases, hires or borrows (A hired auto is a vehicle that is rented or leased on a short-term basis, such as a car rented for a three-day business trip. Autos leased long-term (for six months or more) are insured in the same manner as autos that are owned).
- Non-Owned = Under a commercial auto policy, vehicles the agency uses but doesn't own, hire, borrow or lease are called non-owned autos. Non-owned autos include vehicles owned by employees but used in the course of business. An example is an employee's personal vehicle the worker uses to call on customers. Here are other examples of non-owned autos:
  - A vehicle owned by a partner (of a partnership) and used on company business
  - A vehicle an executive officer borrows from her neighbor to drive to a company business meeting
  - A vehicle owned by a member of a limited liability company and used in the business

EXCESS / UMBRELLA:

- County of Erie MUST be listed as Additional Insured inside the Insurance Table
- Waiver of Subrogation MUST be indicated inside the Insurance Table

Required Limits:

- Minimum liability of $1,000,000;
- Can meet Abuse/Professional requirements via a combination of both Primary and Excess/Umbrella Liability policies- MUST provide Waiver Letter Template and Umbrella Declaration pages that reflect such coverage (*see Waiver Letter requirements on page 5).*

PROFESSIONAL:

Required Limits:

- Minimum required limit of liability of $5,000,000 aggregate;
  - Can be met via a combination of both Primary and Excess/Umbrella Liability policies with submission of an ECDMH Waiver Letter Template and Umbrella Declaration pages that reflect such coverage.
  - If an agency cannot meet this requirement, an ECDMH Waiver Letter Template requesting a waiver MUST be submitted (*see Waiver Letter requirements on page*

**If your agency cannot meet these requirements, please communicate your situation via email so we can provide an ECDMH Professional Waiver Template for an authorized representative at your agency to complete, sign and return for our Assistant County Attorney's review and consideration.*

PROPERTY:

- **Property** requires **County of Erie** to be named as either **Additional Insured** OR **Loss Payee**

Required Limits:

- Providing sufficient coverage for property and/or contents within.
- Acceptable forms are: ACORD 25 or ACORD 27. Any other form will be determined if acceptable upon review.

CYBER LIABILITY:

Only required where agency has access to the County's computer network and/ or agency receives protected health information, as set forth by HIPAA, from the County.

- County of Erie MUST be listed as Additional Insured inside the Insurance Table

*Required Limits are based on the agency's current year contract dollar amount as follows:

- **Tier 1** – Contracts from $0 to $999,999
  *Limits no less than **$1 Million per occurrence**
- **Tier 2** – Contracts between $1,000,000 to $2,999,999
  *Limits no less than **$3 Million per occurrence**
- **Tier 3** – Contracts $3,000,000 and higher
  *Limits no less than **$5 Million per occurrence**
- Can be met via a combination of both Primary and Excess/Umbrella Liability policies with submission of an ECDMH Waiver Letter Template and Umbrella Declaration pages that reflect such coverage.

**If Cyber Liability is required for your agency and your agency cannot meet these requirements, please communicate the situation via email so we can provide an ECDMH Cyber Waiver Template for an authorized representative at your agency to complete, sign and return for our Assistant County Attorney's review and consideration.*

Maintaining **proof of Workers' Compensation and Disability** are required per your Erie County Department of Mental Health contract (see requirements for each below).

WORKERS' COMPENSATION:

"**COUNTY OF ERIE, 95 FRANKLIN STREET, BUFFALO, NY 14202**," must be named as **Certificate Holder** and satisfy the following requirements:

- If through NY State Insurance Fund use Form U26.3;
- If through any other carrier use Form C105.2
- On Form C-105.2 Section 3d needs to be completed;
- If Self-Insured, you MUST send a completed SI-12 Form from the Workers' Compensation Board.

NYS DISABILITY:

"**COUNTY OF ERIE, 95 FRANKLIN STREET, BUFFALO, NY 14202**," must be named as **Certificate Holder** and satisfy the following requirements:

- MUST use Form DB 120.1
  - **1C** (if NYS) OR **1D** (if Federal) MUST be completed.

WAIVER LETTER TEMPLATE REQUIREMENTS:

If the agency cannot meet County requirements, please communicate the situation to Melissa Stark via email @ Melissa.Stark@erie.gov. so we can prepare and provide an ECDMH Waiver Template for an authorized representative at the agency to complete. This must be signed with an inked signature then scanned in and returned to Melissa Stark via email for our assigned attorney's review and consideration. Waivers will be reviewed and considered yearly on a case-by-case basis by our assigned Assistant County Attorney and is up to their discretion whether to approve.

If some or all County requirements can be met through the agency's Commercial Excess/Umbrella policy, please submit the renewal Commercial Excess/Umbrella Declaration pages that will reflect such coverage being partially/fully met through the Commercial Excess/Umbrella policy.

- A Waiver will be prepared and distributed based on your ACORD 25 limits and upon verification that there's additional coverage through your Commercial Umbrella policy once Declaration Pages have been received.

1. The completed Waiver Letter must state the per occurrence and aggregate limits currently maintained for the primary policy in the first paragraph;
2. Excess/Umbrella policies in the second paragraph; and
3. The third paragraph must state the combined limits per occurrence and aggregate that will meet or exceed the County requirement(s) (add the standalone limits in paragraph 1 to the Excess/Umbrella amounts in paragraph 2 to determine the combined amounts in paragraph 3).

- The **description of services the agency provides must be completed and include details such as type of service(s) performed, if public facing / not and if so, the age group(s) of population served**. This area cannot be returned blank.
  - The written description will assist our assigned Assistant County Attorney to determine if your agency request(s) can be approved so provide enough information for them to make an informed decision.

Sublimits: If your agency has Sublimits applied to their coverage, this must be communicated via email and please provide the appropriate Sublimit pages.

If the agency cannot meet the County requirements without it causing financial hardship and does not have additional coverage under their Commercial Umbrella / Excess policy:

- An authorized representative will need to communicate this to Melissa Stark via email so she can properly prepare a Waiver request that obtaining such coverage would cause the agency undue financial hardship.
- Financial hardship waivers will be reviewed and determined approved by our assigned attorney on a case-by-case basis.
  - You must include details as to why meeting the requirements would cause financial hardship. The County will not accept the blanket statement of "financial hardship."
    - The agency must explain why it would be a financial hardship to obtain the County required coverage (include quotes received and a description of your budget restraints).