

Insurance Guide

Coverage Requirements for Home Care Agencies

Complete Guide

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Professional Liability Insurance (Errors & Omissions)

What It Covers: Also known as E&O insurance or malpractice insurance, professional liability protects against claims of negligence, errors, or omissions in the professional services you provide.

Key Coverage Areas:

- **Negligence Claims:** Allegations of failure to provide proper care
- **Errors in Care:** Mistakes made in administering medications or treatments
- **Omissions:** Failure to perform required duties or tasks
- **Misrepresentation:** Allegations of misleading clients about services
- **Breach of Duty:** Failure to meet professional standards of care

Typical Coverage Limits: \$1,000,000 per occurrence / \$3,000,000 aggregate

Important Distinction

Professional liability is separate from general liability. General liability covers physical incidents, while professional liability covers the quality and delivery of your professional services.

Workers' Compensation Insurance

What It Covers: Workers' compensation provides benefits to employees who suffer work-related injuries or illnesses. It covers medical expenses, rehabilitation costs, and lost wages.

Key Coverage Areas:

- **Medical Expenses:** All necessary medical treatment for work injuries
- **Disability Benefits:** Temporary or permanent disability payments
- **Rehabilitation:** Physical therapy and vocational rehabilitation
- **Death Benefits:** Payments to dependents if an employee dies from a work injury
- **Employer's Liability:** Protection against lawsuits from injured employees

Coverage Requirements: Varies by state - most require coverage once you have 1-5 employees

Home Care Classification

Home care workers are typically classified under NCCI code 8835 (Home Health Care Services). Your premium is calculated based on your total payroll and the risk classification of your employees' duties.

Surety Bond

What It Covers: A surety bond is a three-party agreement that guarantees your agency will comply with state regulations and fulfill contractual obligations. It protects clients from theft, fraud, or dishonest acts.

Types of Surety Bonds for Home Care:

- **License Bond:** Required by many states for agency licensure
- **Fidelity Bond:** Protects against employee theft or dishonesty
- **Janitorial Bond:** May be required if providing cleaning services
- **ERISA Bond:** Required if you offer employee benefit plans

Typical Bond Amounts: \$10,000 - \$50,000 depending on state requirements

Cost Tip

Surety bonds are relatively inexpensive compared to insurance. A \$50,000 bond typically costs between \$500-\$1,500 annually, depending on your credit score and business history.

Commercial Auto Insurance

What It Covers: Commercial auto insurance covers vehicles owned by your business and used for business purposes. If caregivers transport clients or use company vehicles, this coverage is essential.

Key Coverage Areas:

- **Liability Coverage:** Bodily injury and property damage to others
- **Collision Coverage:** Damage to your vehicle from an accident
- **Comprehensive Coverage:** Non-collision damage (theft, vandalism, weather)
- **Medical Payments:** Medical expenses for vehicle occupants
- **Uninsured Motorist:** Protection if hit by an uninsured driver

Additional Considerations:

- **Hired Auto:** Coverage for vehicles you rent or lease
- **Non-Owned Auto:** Coverage when employees use personal vehicles for business

Personal Auto Exclusion

Personal auto insurance policies typically exclude business use. If caregivers use personal vehicles for client transportation, you need either non-owned auto coverage or a policy that specifically covers this exposure.

2 Coverage Amounts by State

Insurance requirements vary significantly by state. The following table provides a reference guide for minimum coverage requirements. Always verify current requirements with your state licensing authority, as regulations change frequently.

Important Disclaimer

This table represents typical requirements and may not reflect the most current regulations. Requirements can vary based on agency type (licensed vs. non-licensed), service type, and number of employees. Always confirm requirements with your state licensing board.

State Insurance Requirements Reference

State	General Liability	Professional Liability	Workers' Comp	Surety Bond
Alabama	\$1M/\$2M	\$1M/\$3M	5+ employees	\$50,000
Alaska	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Arizona	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Arkansas	\$1M/\$2M	\$1M/\$3M	3+ employees	\$10,000
California	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Colorado	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Connecticut	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Delaware	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Florida	\$1M/\$2M	\$1M/\$3M	4+ employees	\$50,000
Georgia	\$1M/\$2M	\$1M/\$3M	3+ employees	\$25,000
Hawaii	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Idaho	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Illinois	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Indiana	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Iowa	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Kansas	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Kentucky	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Louisiana	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Maine	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Maryland	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Massachusetts	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Michigan	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Minnesota	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Mississippi	\$1M/\$2M	\$1M/\$3M	5+ employees	\$10,000
Missouri	\$1M/\$2M	\$1M/\$3M	5+ employees	\$25,000
State	General Liability	Professional Liability	Workers' Comp	Surety Bond
Montana	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Nebraska	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Nevada	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
New Hampshire	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
New Jersey	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000

State	General Liability	Professional Liability	Workers' Comp	Surety Bond
New Mexico	\$1M/\$2M	\$1M/\$3M	3+ employees	\$25,000
New York	\$1M/\$2M	\$1M/\$3M	1+ employees	\$75,000
North Carolina	\$1M/\$2M	\$1M/\$3M	3+ employees	\$50,000
North Dakota	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Ohio	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Oklahoma	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Oregon	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Pennsylvania	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
Rhode Island	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
South Carolina	\$1M/\$2M	\$1M/\$3M	4+ employees	\$25,000
South Dakota	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Tennessee	\$1M/\$2M	\$1M/\$3M	5+ employees	\$25,000
Texas	\$1M/\$2M	\$1M/\$3M	Optional*	\$50,000
Utah	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Vermont	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000
Virginia	\$1M/\$2M	\$1M/\$3M	3+ employees	\$50,000
Washington	\$1M/\$2M	\$1M/\$3M	1+ employees	\$50,000
West Virginia	\$1M/\$2M	\$1M/\$3M	1+ employees	\$25,000
Wisconsin	\$1M/\$2M	\$1M/\$3M	3+ employees	\$25,000
Wyoming	\$1M/\$2M	\$1M/\$3M	1+ employees	\$10,000

*Texas does not require workers' compensation for most private employers, but it is strongly recommended for liability protection.

Pro Tip: Exceed Minimum Requirements

While this table shows minimum requirements, many agencies choose higher coverage limits for better protection. Consider your specific risks, client contracts, and potential exposure when determining appropriate coverage levels.

3 Cost Estimates and Factors

Understanding insurance costs helps you budget accurately and make informed decisions. Insurance premiums vary based on multiple factors, including your location, business size, claims history, and the specific coverage limits you choose.

Typical Annual Premium Ranges

Insurance Type	Startup Agency	Growing Agency	Established Agency
General Liability	\$1,500 - \$3,000	\$3,000 - \$6,000	\$6,000 - \$15,000
Professional Liability	\$2,000 - \$4,000	\$4,000 - \$8,000	\$8,000 - \$20,000
Workers' Compensation	\$3,000 - \$8,000	\$8,000 - \$25,000	\$25,000 - \$100,000+
Surety Bond	\$300 - \$750	\$500 - \$1,000	\$750 - \$1,500
Commercial Auto	\$1,200 - \$3,000	\$3,000 - \$8,000	\$8,000 - \$25,000
TOTAL ESTIMATED	\$8,000 - \$18,750	\$18,500 - \$48,000	\$47,750 - \$161,500

Note: These are estimates only. Actual premiums depend on many factors specific to your agency.

Factors That Affect Your Premiums

Business Factors

- **Years in Business:** New agencies typically pay higher rates
- **Annual Revenue:** Higher revenue = higher premiums
- **Number of Employees:** More staff = more exposure
- **Services Offered:** Medical services cost more to insure
- **Client Types:** High-acuity clients increase risk
- **Geographic Location:** Urban areas often cost more

Risk Factors

- **Claims History:** Past claims increase premiums
- **Training Programs:** Robust training can reduce rates
- **Safety Protocols:** Strong policies may earn discounts
- **Background Checks:** Comprehensive screening helps
- **Supervision Ratios:** Better oversight = lower risk
- **Credential Verification:** Documented processes matter

Workers' Compensation Rate Calculation

Workers' compensation premiums are calculated using a specific formula based on your payroll and industry classification:

Premium Formula

Premium = (Payroll / 100) x Classification Rate x Experience Modifier

Example: \$500,000 payroll x 3.5% rate x 1.0 modifier = \$17,500 annual premium

Understanding Experience Modification Rating (EMR)

- **EMR of 1.0:** Average claims experience (no adjustment)
- **EMR below 1.0:** Better than average - premium discount
- **EMR above 1.0:** Worse than average - premium surcharge

New agencies typically start with an EMR of 1.0 and build their rating over 3 years of claims history.

Ways to Reduce Insurance Costs

Immediate Savings

- Bundle multiple policies with one carrier
- Increase deductibles (if cash flow allows)
- Pay annually instead of monthly
- Shop multiple carriers and compare quotes
- Ask about professional association discounts

Long-term Savings

- Implement comprehensive safety programs
- Conduct thorough background checks
- Document all training and certifications
- Create robust incident reporting systems
- Maintain a clean claims history

Budget Planning Tip

As a rule of thumb, budget 3-5% of gross revenue for insurance costs. This ensures you have adequate coverage as your agency grows while maintaining profitability.

4 How to Get Quotes

Getting accurate insurance quotes requires preparation and knowing where to look. This section walks you through the process of obtaining competitive quotes from carriers that understand the home care industry.

Step 1: Gather Required Information

Before contacting insurance providers, prepare the following information:

Business Information

- Legal business name and DBA
- Business address and service area
- Years in business (or planned start date)
- Business entity type (LLC, Corp, etc.)
- Federal Tax ID / EIN
- State license number (if applicable)
- Professional certifications held

Operational Information

- Projected or actual annual revenue
- Number of employees (current/projected)
- Annual payroll (current/projected)
- Services offered (detailed list)
- Client types served
- Number of vehicles used
- Claims history (past 5 years)

Step 2: Identify Appropriate Insurance Providers

Types of Insurance Providers

Provider Type	Pros	Cons
Industry-Specific Brokers	Expert knowledge, tailored policies, claims support	May have limited carrier options
Independent Agents	Multiple carrier options, competitive pricing	May lack home care expertise
Direct Carriers	No middleman, potentially lower cost	Limited comparison shopping
Online Marketplaces	Quick quotes, easy comparison	Generic policies, limited customization

Recommendation

For home care agencies, we recommend working with a broker or agent who specializes in healthcare or home care insurance. They understand the unique risks of the industry and can help you avoid coverage gaps.

Step 3: Request and Compare Quotes

Best Practices for Getting Quotes

1. **Get at least 3 quotes** - More options mean better comparison
2. **Ensure apples-to-apples** - Request identical coverage limits from each carrier
3. **Review all exclusions** - The cheapest policy may have gaps
4. **Ask about deductibles** - Lower premiums often mean higher deductibles
5. **Check carrier ratings** - Use A.M. Best ratings (aim for A- or better)
6. **Understand claims process** - How easy is it to file and resolve claims?

Step 4: Questions to Ask Providers

- What is your experience with home care agencies specifically?
- What coverage limits do you recommend for my situation?
- Are there any exclusions I should be aware of?
- How are claims handled? What is the typical timeline?
- What discounts are available (bundling, associations, safety programs)?
- How will my premium change as my business grows?
- What happens if I need to add employees mid-policy?
- Is there a dedicated claims representative for my account?
- What risk management resources do you provide?
- Can you provide references from other home care clients?

Step 5: Review and Purchase

Before finalizing your insurance purchase:

- Read the entire policy document (not just the summary)
- Verify all coverage limits match what you requested
- Understand your duties after a loss
- Know the cancellation terms and procedures
- Set calendar reminders for renewal dates
- Store policy documents securely with easy access

Don't Rush the Process

While you need insurance before operating, don't rush into the first policy offered. Taking time to compare options can save thousands of dollars annually and ensure you have the right coverage.

5 Insurance Checklist

Use this comprehensive checklist to ensure you have all necessary insurance in place before launching your home care agency. Check off each item as you complete it.

Pre-Launch Insurance Requirements

- Researched state-specific insurance requirements
- Obtained copies of state licensing regulations
- Identified minimum coverage amounts required
- Determined additional coverage needed beyond minimums
- Created a list of services that need to be covered
- Estimated annual payroll for workers' comp calculations
- Gathered all required business documentation

General Liability Insurance

- Obtained at least 3 quotes from different carriers
- Verified coverage meets or exceeds state requirements
- Confirmed coverage includes premises liability
- Confirmed coverage includes products-completed operations
- Reviewed policy exclusions carefully
- Purchased policy with appropriate limits
- Received Certificate of Insurance (COI)

Professional Liability Insurance

- Verified policy covers all services you provide
- Confirmed coverage is "occurrence" based (preferred) or "claims-made"
- Reviewed definition of "professional services" in policy
- Confirmed coverage for all employee classifications
- Understood reporting requirements for incidents
- Purchased policy with appropriate limits
- Received Certificate of Insurance (COI)

Workers' Compensation Insurance

- Verified state requirements for number of employees

- Obtained quotes based on projected annual payroll
- Confirmed correct classification code (8835 for home health)
- Understood audit procedures and potential adjustments
- Set up payroll reporting system for accurate premiums
- Purchased policy before hiring first employee
- Posted required workplace notices
- Received Certificate of Insurance (COI)

Surety Bond

- Determined bond amount required by state
- Checked credit score (affects bond pricing)
- Obtained quotes from surety bond companies
- Purchased required bond
- Filed bond with appropriate state agency
- Stored original bond document securely

Commercial Auto Insurance

- Inventoried all vehicles used for business purposes
- Determined if hired/non-owned auto coverage is needed
- Obtained quotes including all necessary vehicles
- Verified coverage limits meet state requirements
- Confirmed coverage for employee drivers
- Purchased policy with appropriate limits
- Added insurance cards to all vehicles

Additional Coverage Considerations

- Cyber liability insurance (if storing electronic PHI)
- Employment practices liability (EPLI)
- Directors and officers liability (D&O)
- Business owner's policy (BOP) for office coverage
- Umbrella policy for additional liability protection

Ongoing Maintenance

- Set calendar reminders 60 days before each renewal
- Created system for tracking policy documents

- Established process for reporting incidents promptly
- Planned for annual insurance review
- Documented all insurance information in one location

6 Certificate of Insurance Explained

A Certificate of Insurance (COI) is one of the most requested documents in the home care industry. Understanding what it is, how to read it, and when you need it is essential for operating your agency.

What is a Certificate of Insurance?

A Certificate of Insurance is a document issued by your insurance company or agent that provides a summary of your insurance coverage. It serves as proof that you have valid insurance policies in place.

Key Point

A COI is a snapshot of your coverage at a point in time. It does not grant any additional coverage or rights to the certificate holder - it simply provides evidence that coverage exists.

When You'll Need a COI

- **State Licensing:** Required for initial license application and renewals
- **Client Contracts:** Families and facilities often require proof of insurance
- **Referral Partnerships:** Hospitals and healthcare networks require COIs
- **Vendor Relationships:** Software and equipment vendors may request one
- **Lease Agreements:** Landlords typically require COIs naming them as additional insured
- **Contract Work:** When providing services to facilities or organizations

Reading a Certificate of Insurance

The standard COI form (ACORD 25) contains several key sections:

Section by Section Breakdown

Section	What It Contains
Producer	Insurance agent/broker contact information
Insured	Your business name and address
Insurers	Insurance company names and NAIC numbers
Coverages	Types of insurance, policy numbers, effective dates, limits
Certificate Holder	Entity requesting the certificate
Cancellation	Notice requirements if policy is cancelled

Additional Insured vs. Certificate Holder

These terms are often confused but have very different meanings:

Certificate Holder

- Receives proof of your insurance
- Has no coverage under your policy
- May receive cancellation notice
- No additional cost to add
- Common for informational purposes

Additional Insured

- Receives actual coverage under your policy
- Protected by your liability coverage
- May increase your premium
- Common for lease agreements
- Requires endorsement to policy

Important Distinction

Adding someone as an additional insured extends your coverage to protect them. Only agree to add additional insureds when contractually required and after understanding the implications. Your agent can advise on specific situations.

How to Request a COI

1. Contact your insurance agent or broker
2. Provide the certificate holder's name and address
3. Specify if additional insured status is needed (and provide the endorsement language if required)
4. Request any specific coverage information needed
5. Allow 1-3 business days for processing

Pro Tip

Keep a master list of all entities that regularly request COIs from you. Before renewal, proactively send updated certificates to ensure there's no lapse in your business relationships.

COI Best Practices

- Keep copies of all COIs issued on your behalf
- Verify certificate accuracy before distribution
- Track expiration dates and renewal requirements
- Maintain relationships with certificate holders
- Respond promptly to COI requests
- Never alter a COI - request a new one if changes are needed

7 When to Update Coverage

Insurance needs change as your business grows and evolves. Failing to update coverage can leave you exposed to significant financial risk. This section outlines key triggers that should prompt a review of your insurance portfolio.

Business Growth Triggers

Revenue Milestones

Review coverage when your revenue increases by 25% or more. Higher revenue typically means more client interactions, which increases exposure.

Revenue Level	Recommended GL Limits	Recommended PL Limits
Under \$250K	\$1M / \$2M	\$1M / \$3M
\$250K - \$500K	\$1M / \$2M	\$1M / \$3M
\$500K - \$1M	\$2M / \$4M	\$2M / \$4M

Revenue Level	Recommended GL Limits	Recommended PL Limits
\$1M - \$2.5M	\$2M / \$4M	\$2M / \$6M
Over \$2.5M	Consider umbrella	Consider umbrella

Staffing Changes

- **Hiring first employee:** Triggers workers' compensation requirement in most states
- **Adding 5+ employees:** Consider increasing liability limits
- **Hiring licensed professionals:** May need additional professional liability coverage
- **Using independent contractors:** Verify their insurance and consider requiring minimums

Service Expansion Triggers

Critical Update Trigger

Adding new services is one of the most important triggers for updating coverage. Your existing policy may specifically exclude services you weren't offering when the policy was written.

Services That May Require Coverage Updates

- Adding skilled nursing services
- Providing medication management
- Offering physical or occupational therapy
- Starting transportation services
- Providing hospice or palliative care
- Adding pediatric services
- Expanding to memory care

Geographic Expansion

When expanding to new areas:

- **New counties:** Verify your policy covers the expanded territory
- **New states:** Research state-specific requirements and update policies
- **Urban to rural (or vice versa):** Risk profiles may change

Operational Changes

Update Coverage When You:

- Purchase or lease a new office location
- Add vehicles to your fleet
- Start using electronic health records
- Begin accepting Medicare or Medicaid
- Enter contracts with large healthcare systems
- Acquire another agency
- Change your business structure (LLC to Corp, etc.)

Annual Review Checklist

At minimum, conduct a comprehensive insurance review annually. Use this checklist:

- Compare current revenue to policy projections
- Verify employee count matches policy

- Review all services offered vs. covered
- Check geographic coverage areas
- Evaluate claims history and trends
- Review certificates of insurance issued
- Assess new contracts and their requirements
- Consider adding umbrella coverage if not in place
- Shop competing quotes (every 2-3 years)
- Update beneficiaries and authorized contacts

Calendar Reminder

Set a recurring calendar reminder 90 days before your policy renewal dates. This gives you adequate time to review coverage, get competing quotes, and make any necessary changes before renewal.

8

Common Claims and How to Avoid Them

Understanding the most common insurance claims in home care helps you implement preventive measures. This section covers the top claims categories and specific strategies to reduce your risk exposure.

Top 5 Claim Categories

1. Slip, Trip, and Fall Claims

What happens: Caregiver slips on wet floor, trips over cords, or falls on stairs while providing care.

Prevention Strategies

- Train caregivers on environmental hazard assessment
- Require slip-resistant footwear
- Document home safety assessments before starting service
- Create checklists for identifying hazards during each visit
- Communicate hazards to clients and recommend corrections

2. Client Injury During Transfers

What happens: Client is injured while being transferred from bed to wheelchair, bathroom, etc.

Prevention Strategies

- Conduct thorough transfer training for all caregivers
- Assess client mobility and develop individualized transfer plans
- Use appropriate assistive devices (gait belts, transfer boards)
- Require two-person assists for high-risk transfers
- Document transfer methods in care plans

3. Medication Errors

What happens: Wrong medication, wrong dose, wrong time, or missed medication administration.

Prevention Strategies

- Implement the "Five Rights" of medication administration
- Use medication administration records (MARs)
- Train on proper documentation procedures
- Establish clear protocols for medication reminders vs. administration
- Create incident reporting procedures for near-misses

4. Theft and Dishonesty Claims

What happens: Allegations of caregivers stealing money, jewelry, medications, or other valuables.

Prevention Strategies

- Conduct comprehensive background checks (criminal, credit, references)
- Implement strict policies against handling client finances
- Document all valuables during initial assessment
- Train caregivers on professional boundaries

- Carry fidelity bond coverage

5. Caregiver Injury (Workers' Comp)

What happens: Caregiver injures back lifting client, develops repetitive strain injury, or is injured by aggressive client.

Prevention Strategies

- Provide ergonomic and body mechanics training
- Assess client homes for safety hazards
- Screen clients for behavioral issues
- Establish protocols for aggressive behavior
- Provide proper equipment (lifts, transfer aids)

Documentation Best Practices

Proper documentation is your best defense against claims. Follow these guidelines:

Do Document

- All services provided
- Client condition changes
- Incidents and near-misses
- Communications with family
- Physician orders and changes
- Refusals of care
- Environmental hazards

Don't Document

- Opinions or speculation
- Blame or fault
- Incomplete information
- Late entries without notation
- Altered or deleted records
- Personal comments about clients
- Abbreviations that could be misread

Incident Reporting Protocol

Establish a clear incident reporting process:

1. **Immediate Response:** Ensure safety and provide necessary care
2. **Document:** Record what happened, when, who was involved, what actions were taken
3. **Notify:** Alert supervisor within specified timeframe (recommend 2 hours)
4. **Investigate:** Conduct thorough investigation while facts are fresh
5. **Report:** Notify insurance carrier of potential claims promptly
6. **Correct:** Implement corrective actions to prevent recurrence

Late Reporting Warning

Most insurance policies require "prompt" notification of incidents that may result in claims. Failure to report incidents promptly can result in denial of coverage. When in doubt, report it.

Risk Management Program

Implement a formal risk management program that includes:

- Written policies and procedures for all high-risk activities
- Regular staff training on safety and compliance
- Ongoing competency assessments for caregivers
- Quality assurance audits of documentation
- Client satisfaction surveys
- Incident trending and analysis
- Annual risk assessment review

9 Vendor Comparison Worksheet

Use these worksheets to compare insurance quotes and make informed decisions. Fill in the information from each vendor to see a clear comparison.

General Information Comparison

Criteria	Vendor 1	Vendor 2	Vendor 3
Company Name			
Agent/Broker Name			
Phone Number			
Email			
A.M. Best Rating			
Home Care Experience			

Coverage Comparison - General Liability

Coverage Element	Vendor 1	Vendor 2	Vendor 3
Per Occurrence Limit			
Aggregate Limit			
Deductible			
Annual Premium			
Key Exclusions			

Coverage Comparison - Professional Liability

Coverage Element	Vendor 1	Vendor 2	Vendor 3
Per Occurrence Limit			
Aggregate Limit			
Coverage Type (Occurrence/ Claims-Made)			
Deductible			
Annual Premium			
Covered Services			

Coverage Comparison - Workers' Compensation

Coverage Element	Vendor 1	Vendor 2	Vendor 3
Classification Code			
Rate per \$100 of Payroll			

Estimated Annual Premium			
Audit Frequency			
Payment Options			

Coverage Comparison - Commercial Auto

Coverage Element	Vendor 1	Vendor 2	Vendor 3
Liability Limit			
Collision Deductible			
Comprehensive Deductible			
Hired/Non-Owned Auto			
Annual Premium			

Total Cost Summary

Policy Type	Vendor 1	Vendor 2	Vendor 3
General Liability	\$	\$	\$
Professional Liability	\$	\$	\$
Workers' Compensation	\$	\$	\$
Surety Bond	\$	\$	\$
Commercial Auto	\$	\$	\$
TOTAL ANNUAL COST	\$	\$	\$
Bundle Discount Available?			

Decision and Notes

Selected Vendor	
Reason for Selection	
Effective Date	
Renewal Date	

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