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sa@businessinsurance.com

PLIBITSHER Keith Kenner (Chicago)

kkenner@businessinsurance.com

EDITOR Gavin Souter (Chicago) gsouter@businessinsurance.com

DEPUTY EDITOR Claire Wilkinson (New York)

cwilkinson@businessinsurance.com

ASSISTANT EDITOR Louise Esola (New Orleans) lesola@businessinsurance.com

SENIOR REPORTER Judy Greenwald (San Jose) jgreenwald@businessinsurance.com

REPORTER Angela Childers (Chicago) achilders@businessinsurance.com

REPORTER Matthew Lerner (New York) mlerner@businessinsurance.com

COPY CHIEF John Obrecht (Chicago) jobrecht@businessinsurance.com

COPY EDITOR Brian Gaynor (Portland)

bgaynor@businessinsurance.com ART DIRECTOR

Jeremy Werling (Cincinnati) jwerling@businessinsurance.com

DIRECTOR OF RESEARCH, PLANNING AND INSIGHTS Andy Toh (Chicago) atoh@businessinsurance.com

MAJOR ACCOUNTS DIRECTOR -NORTHEASTERN U.S. & INTERNATIONAL Ron Kolgraf

rkolgraf@businessinsurance.com SENTOR VICE PRESIDENT

BUSINESS DEVELOPMENT Stephen Acunto (Princeton) stephen@businessinsurance.com

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Brian McGann (Buffalo) bmcgann@businessinsurance.com

DIGITAL AD OPERATIONS MANAGER Jordan Kilty

jkilty@businessinsurance.com

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DIRECTOR OF MARKETING & EVENTS Katie Kett (Portland)

kkett@businessinsurance.com

MARKETING & EVENTS MANAGER **Brittany Collins** bcollins@businessinsurance.com

MARKETING & EVENTS SPECIALIST Beth Wojdyla (Chicago) bwojdyla@businessinsurance.com

SUBSCRIPTIONS & SINGLE COPY SALES membership@businessinsurance.com 954-449-0736



DATA & RANKINGS

The annual data issue of Business Insurance provides highlights from our proprietary research released over the past year and other rankings. Included are broker, captive, surplus lines and third-party administrator rankings, as well as rankings of specialty segments such as cyber risk and medical malpractice insurers. PAGE 12

INSIDE



NEWS ANALYSIS

FOR BREAKING NEWS COVERAGE, VISIT businessinsurance.com

VIRTUAL LEARNING LITIGATION

Lawsuits related to virtual learning and students with disabilities are a growing concern. PAGE 4

COVID-19 AND WORKERS COMP

COVID-19's impact on workers compensation has been less severe than predicted. PAGE 6

HIGH-TECH RISK ENGINEERING

Several insurers and brokers have recently launched tech-driven risk engineering products. PAGE 7

CLAIM PROGRESSION SETBACKS

A second wave of pandemic shutdowns could again delay medical procedures. PAGE 8

INTERNATIONAL

Ireland has transformed in recent decades from a largely agricultural society to a country with a modern, open and technologically advanced market. PAGE 10







LEGAL **BRIEFS**

Recent court opinions PAGE 11

MARKET PULSE Products, deals and more PAGE 25

PEOPLE Insurance industry moves PAGE 26

PERSPECTIVES

Increasing sexual assault claims against businesses and employees are testing the exclusions in liability policies, writes Laura M. Gregory of Sloane Walsh LLP.

PAGE 23





OFF BEAT Insurance plays a role in Tom Cruise's on-set, COVID-19-related diatribe to London-based crew



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NEWS ANALYSIS

School lockdowns trigger lawsuits

BY CLAIRE WILKINSON

cwilkinson@businessinsurance.com

awsuits related to virtual learning and students with disabilities are a growing concern heading into 2021 as K-12 school districts grapple with disruptions to in-person learning while managing the risks of COVID-19, experts say.

Litigation involving the federal Individuals with Disabilities Education Act has long been an area of activity for K-12 schools, and several recent class actions specifically allege that online schooling policies implemented during the pandemic violate the law.

IDEA guides how states and public agencies provide early intervention, special education and related services to more than 7.5 million children with disabilities.

IDEA and Section 504 of the Rehabilitation Act of 1973 both provide a right to an education for students with disabilities.

Back in the spring, as COVID-19 spread, Liberty Mutual Insurance Co. identified three primary areas of exposure where K-12 schools could be affected, said Doug Manwaring, the insurer's Cincinnati-based chief underwriting officer, public entity.

Workers compensation exposures to teachers and staff/administrators, and general liability exposures to students and others who might be impacted on campuses, were two areas of focus, he said.

Schools quickly developed mitigation techniques to reduce and manage those exposures. "Many went virtual or implemented hybrid learning platforms, established cleaning and disinfecting protocols, required masks, social distancing and a change of approach to transportation," Mr. Manwaring said.

"All those changes have helped mitigate COVID-19 exposures for workers comp and GL. We've seen limited impact from the claims standpoint in those areas," he said.

The third area of concern was around possible allegations of failure to educate as schools pivoted to all-virtual or hybrid learning, Mr. Manwaring said.

Failure to educate claims typically involve students with functional needs receiving therapies through schools and those who are on individualized education programs, he said.

When it comes to failure to educate claims, a distinction must be drawn between special needs students and general education students, said Igor Raykin, an attorney at Kishinevsky & Raykin LLC in Aurora, Col-

"With general education kids, it's surprising for parents to learn there's no blanket right to an education," Mr. Raykin said. Recent cases in this area involve arguments that are "counter to a long history of education law in the U.S.," he said.

Tort failure to educate is "not really viable"



SPECIAL EDUCATION SURVEY

A May 2020 survey of more than 1,500 families by ParentsTogether, an advocacy group, found:

- Just 20% of parents whose children have an Individualized Educational Program or are entitled to other special education services said they are receiving those services during the COVID-19 pandemic.
- 39% are not receiving any support at all.
- Children who qualify for individual learning plans are also twice as likely as their peers to be doing little or no remote learning (35% vs. 17%) during the pandemic.

in most states, said Jennifer Smith, partner at Franczek P.C. in Chicago. "There is a constitutional right to education, but it's not to a certain quality of education," she said.

"Students that do have a right to a certain quality of education are special education students. That tends to be the bellwether, and that's where the liability risk comes," Ms.

Claims activity initially was low but increased after the summer, as the new school year started, Mr. Manwaring said.

Since then, claims have "leveled off," but with COVID-19 cases rising and some big metropolitan public school districts switching to all-remote learning, insurers are concerned about the effect that could have on policyholders over the winter, he said.

In special education, the litigation being filed centers on the services that weren't provided in the spring, said Lisa Scruggs, partner at Duane Morris LLP in Chicago.

As the pandemic looks likely to continue through the 2021 school year, there are concerns about students not receiving their expected special education minutes or not being educated at all, she said.

Recent claims ask that special education students who either cannot be served from

home virtually, or whose parents feel virtual learning is inadequate, have access to in-person learning, Ms. Scruggs said.

'There's a federal and legal obligation that school districts have that is clear and provides lots of procedures and mechanisms ... for parents to pursue their rights for their children," Ms. Scruggs said.

Several federal class-action lawsuits have been filed. For example, in late July more than 100 parents of students with disabilities filed a class-action lawsuit in the U.S. District Court for the Southern District of New York against every school district and state education department in the United States.

The multiple claims included alleged violations of IDEA, Sec. 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act, the Racketeer Influenced and Corrupt Organizations Act, the Fourteenth Amendment and state laws.

On Nov. 13 the court dismissed the plaintiffs' claims against all out-of-state defendants and the remaining claims against all New York state school districts outside New York City. The court also denied the plaintiffs' request for a preliminary injunction and dismissed all claims against New York City defendants, thus ending the lawsuit's progression. On Dec. 11, plaintiffs in this case gave notice of appeal.

While the plaintiffs have the right to appeal to the Second Circuit, "the odds of a ruling conclusively in favor of such a nationwide class-action lawsuit are very low," wrote Perry A. Zirkel, university professor emeritus of education and law at Lehigh University in a December legal update.

"The major reason is the individualized nature of the IDEA, which is the primary basis of the suit," Mr. Zirkel noted.

The case "serves as an acute reminder of the various unsettling and unsettled legal issues for P-12 students with disabilities as a result of the pandemic," he wrote.

PAPER TRAILS CAN MITIGATE EXPOSURES

chools need to actively manage exposures arising from disrupted in-person learning and stay up-to-date with state and federal guidance during the pandemic.

Failure to implement a student's individualized education program or to meet the substantive Free Appropriate Public Education requirements generate risks for school districts, said Jennifer Smith, partner at Franczek P.C. in Chicago.

School districts can best mitigate the risk by documenting their outreach to parents, she said.

As COVID-19 spread in the spring and schools shifted to a hybrid or allvirtual learning platform, Liberty Mutual Insurance Co. foresaw "challenges and exposures" and developed a series of risk mitigation tactics for its policyholders, said Doug Manwaring, the insurer's Cincinnatibased chief underwriting officer, public entity.

"If you can get out in front of these (claims), you can control them better and then the parents see an effort of goodwill from the schools," he said.



Schools should first establish a process to evaluate student learning concerns and consider assigning that responsibility to a dedicated individual, he said.

If a student is not engaged or not participating in remote instruction it's "critical" that school districts keep trying to reach the family and the student, and that they document those attempts, Ms. Smith said.

"There should be a log, emails, a paper record showing everything they tried to do to engage that student and get that student back in instruction," she said.

Claire Wilkinson



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Wait and watch on COVID-19 comp claims

BY ANGELA CHILDERS

achilders@businessinsurance.com

he impact of the COVID-19 pandemic on workers compensation continues to be less severe than predicted, with the number of claims accepted accounting for a small percentage of total claims,

By mid-December, 29 states had either a presumption law or executive order that allows workers to claim they contracted the virus at work, or are in the process of creating such a presumption. So far, the claims have not been particularly high or costly, experts say.

As of the second quarter 2020, approximately 1,200 COVID-19 medical claims had been reported in workers compensation, accounting for less than 0.5% of total active workers compensation claims during that period, depending on jurisdiction, according to data released in early December by Boca Raton, Florida-based National Council on Compensation Insurance.

About 20% of the claims required an inpatient hospital stay — with medical costs on those claims averaging \$38,000, NCCI said.

"I still think the industry is well-positioned to handle claims ... but the industry is concerned about how long (the pandemic) could last and whether or not states expand compensability," said Jeff Eddinger, senior division executive at NCCI.

Despite having a presumption law with one of the widest nets, Illinois hasn't seen the big influx of claims that was anticipated, said Rich Lenkov, capital member and head of the workers compensation practice at Bryce Downey & Lenkov LLC in Chicago.

He estimates that COVID-19-related workers comp claims comprised less than 5% of the overall claims he saw in his practice last year.

"I represent a lot of companies that employ first responders, hospitals, and we're seeing more (claims) than the average, but not to the degree a lot of us



thought initially," he said.

Health care employers are erring more on the side of accepting claims if it's clear that an exposure occurred at work, he said. But most of his clients have tended to be "fairly skeptical" about whether the claims did arise out of and in the course of employment because of "the pervasiveness of the pandemic. There's difficulty in pinpointing exactly where an employee might have been exposed. For the most part, we are disputing a relationship to work.'

In California, coronavirus claims are coming in three different categories: those covered by the presumption that Gov. Gavin Newsom put in place by executive order between March 19 and July 5, claims covered by the less expansive presumption law that took effect July 6, or people not covered by either because they acquired it before the executive order, said Robert McLaughlin, owner and partner of McLaughlin & Sanchez APC in Chula Vista, California, who represents workers.

But "most people are not filing claims," he said. "Most of the clients that I've been talking to openly say they don't think they got it from work.'

According to the California Workers Compensation Institute, the state saw

nearly 56,000 COVID-19 claims from March through November; more than half of the claims were filed by health care workers or first responders. However, except for the months of June and July, the number of coronavirus claims made up less than 5.5% of total claims; COVID-19 claims comprised 10.5% of total claims in June and 12.2% in July. About 30% of COVID-19 claims were denied — the rest have either been accepted or are pending.

Although COVID-19 claims frequency has been higher in states that have codified a presumption of compensability for certain workers, such as health care providers and first responders, there is the ability to rebut based on actions that employers have taken, such as implementing clearly documented safety protocols, said Matt Zender, Las Vegas-based senior vice president of workers compensation strategy for AmTrust Financial Services Inc.

Having such workplace policies in place is "generally a good defense to even a rebuttable presumption," Mr. Lenkov said.

Several states without presumption laws are showing that coronavirus claims tend to be a low percentage of overall claims costs. Between January and October, the Florida Division of Workers Compensation reported a little more than 23,000 COVID-19 indemnity claims, which represented 31% of all indemnity claims but comprised just 8% of total benefits as a percentage of total claims paid. The majority of accepted COVID-19 claims

were filed by health care workers, first responders and protective services workers, and service industry workers, according to the division. In Texas, the Workers Compensa-

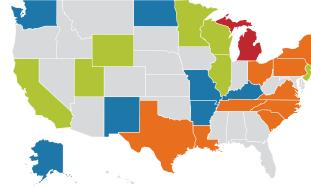
tion Research & Evaluation Group found that insurers reported more than 25,000 COVID-19 claims and accepted slightly less than half of all positive test claims, with most claims involving first responders and correctional officers. The state did not have figures available to compare coronavirus claims with overall claims filed.



in nearly 30 jurisdictions as of Dec. 15, 2020

- Enacted legislation Proposed legislation Regulatory activity
- Proposed legislation and regulatory activity

Source: National Council on Compensation Insurance



PANDEMIC DURATION, EVOLVING PRESUMPTIONS TOP CONCERNS AMONG EXECS

he effect of COVID-19 on the workers compensation industry is the top concern going into 2021 among comp insurance executives, according to a survey by the National Council on Compensation Insurance.

Boca Raton, Florida-based NCCI reported in December that nearly twothirds of the more than 100 insurance leaders surveyed cited pandemicrelated issues as their top concern,

indicating they are most worried about the uncertainty related to the duration of the pandemic, the number and size of COVID-19 comp claims and how long it will take workers and the economy to recover.

The second most pressing concern was whether COVID-19 compensability presumptions that have been enacted in multiple states will become permanent or evolve to include other diseases.

This is a significant concern with new legislative sessions beginning January in most states, particularly if they have had changes in leadership at the legislative or gubernatorial level, said Jeff Eddinger, senior division executive at NCCI.

"This is the time when we'll see if there is an appetite" for expansion of COVID-19 compensability, he said.

The other three top concerns, ranked in order of importance, are:

- The overall impact of the pandemic on the health of the U.S. economy.
- Rate adequacy in workers comp - how best to evaluate risk in the current environment and how the pandemic overlays several years of declining loss costs.
- The impact of working from home on compensable injuries, ergonomics and overall worker safety.

Angela Childers

Insurers boosting offerings with more tech products focused on risk engineering

BY MATTHEW LERNER

mlerner@businessinsurance.com

echnology is increasingly finding a role in risk engineering and loss control programs, with insurers introducing new features and services for policyholders and prospects to increase reach and capabilities.

While not created in direct response to the COVID-19 crisis, some of the applications help meet a need or fill a void resulting from the restrictions brought on by the pandemic, sources say.

Several large commercial insurers and brokers, including Axa XL, a unit of Axa SA; Chubb Ltd.; FM Global; and Marsh LLC, have launched various technologydriven products focused on risk engineering over the past few months.

In late November, the North American construction group at Axa XL launched its Tech Library, a curated collection of technology partners for policyholders of the insurer, according to Rose Hall, vice president, head of construction innovation at Axa XL in New York.

"Our contractors are looking to us all the time for advice," Ms. Hall said. "Lately, they've been asking us about tech," including everything from imagery software to drones. "We decided to get into that space to help clients navigate" the landscape of technology vendors and providers, she said.

Just over two dozen technology companies have referral agreements with Axa XL, which has negotiated fees for its policyholders with the providers, and has researched and vetted the companies, Ms. Hall said.

Also in November, Axa XL launched its risk scanning platform to assist companies with site data and evaluations.

Other insurers are also incorporating technology into their risk engineering.

The Remote Visit application offered by FM Global "makes it almost like an in-person visit," said Brion Callori, senior vice president, engineering and research at the insurer's headquarters in Johnston, Rhode Island.

The application uses high-resolution, fixed-wing imagery from the Boulder, Colorado-based Geospatial Intelligence Center, an insurance industry-backed data and imaging organization, according to Mr. Callori. With an FM Global engineer on a laptop and using latitude and longitude for location purposes, the insurer can "walk the client around the facility to see what we have to see," he said.

While it has proved useful due to COVID-19-related restrictions, the application was built as "part of a longterm solution when you have travel secu-



DIFFERENT REALITIES



AUGMENTED REALITY

adds digital elements to a live view often by using the camera on a smartphone.



VIRTUAL REALITY

implies a complete immersion experience that shuts out the physical world.



MIXED REALITY

combines elements of both AR and VR, real-world and digital objects interact.

Source: The Franklin Institute

rity issues," he said.

"Our customers are global," and some countries may have security concerns that restrict access, Mr. Callori said.

During the pandemic, the technology has enabled FM Global to conduct baseline assessments for potential new business.

The remote application has also helped with ongoing risk mitigation efforts, helping FM Global policyholders complete risk improvement projects they had started previously.

Meanwhile, Chubb Ltd. is using software developed in-house to schedule remote ergonomic evaluations, said Tina Minter, senior workers compensation specialist for the insurer and part of Chubb's risk engineering team.

Ms. Minter said workers are experiencing a "higher level of discomfort" in some cases as a result of working at home. Chubb typically performs thousands of ergonomic evaluations each year as part of its client visits, but as a result of the pandemic, "we transitioned into performing remote ergonomic assessments," she said.

The insurer has performed some 150 remote evaluations since May. "It's something our clients are really asking for," Ms. Minter said.

The program has also been expanded into training sessions for policyholders with large workforces that want to conduct their own remote workforce evaluations.

Christopher Hernandez, digital programs officer for Chubb and part of the insurer's risk engineering team, said that internet-connected devices such as monitors can also be useful to help manage exposures resulting from the pandemic, such as vacant buildings or other facilities.

Munich Re Ltd. has seen expanded use of its remote sensing tool since pandemic-related restrictions took hold, said Munich-based Thilo Horner, senior project manager, remote industries at Munich Re.

"Our initial vision for our remote sensing tool has grown since the early days of development," with some of the changes resulting from the effects of COVID-19 on insurance business practices, he said.

The remote inspection tool was initially a means to expedite catastrophe claims services, Mr. Horner said.

"As COVID-19 spread and restricted travel and access to some locations, this tool became a necessity in handling many types of onsite inspections," he said.

For example, "we have moved from primarily providing catastrophe analytics for the claims handler to providing other building characteristics that have value to the underwriter or risk manager as well," Mr. Horner said.

At Marsh, risk assessments prior to the

pandemic might involve a risk engineer traveling to a site and spending three to five days surveying and identifying risks and outlining a risk profile, said Zaid Laftah, Dubai, United Arab Emirates-based vice president, risk engineering for Marsh JLT's energy and power practice.

To overcome pandemic-related limitations on travel and site access "we needed to identify ways in which we could keep operations functioning," Mr. Laftah said.

Marsh used augmented reality headsets to livestream video and audio from on-site engineers, allowing remote underwriters to see a site from their own home office via a laptop or mobile device.

"As COVID-19 spread and restricted travel and access to some locations, (the remote inspection tool) became a necessity."

Thilo Horner, Munich Re

The broker "recognized that the AR solution required would need to be hands-free from a health and safety point of view," Mr. Laftah said, so it selected a voice-enabled hardware set, which is also compatible with most commonly used video conferencing software.

Results have been positive and could lead to permanent improvements, said Mr. Laftah. "Whilst we are very much still in an early phase ... we can already see that AR wearables will result in enhanced client engagement, increased efficiency and may ultimately limit the amount of travel required for some site assessments in the future."

NEWS ANALYSIS

Comp sector adapts to disruptive year

BY ANGELA CHILDERS

achilders@businessinsurance.com

andemic-related shutdowns in early 2020 had widespread effects on the workers compensation system, with delayed medical procedures halting claim progression and layoffs and furloughs eliminating return-to-work opportunities in some industries, experts say.

While the re-opening of medical clinics and the quick adoption of telemedicine have helped get most comp claims back on track, a second wave of shutdowns hitting much of the country is likely to create more issues in coming months, they say.

Experts predicted earlier in 2020 that delays of non-emergency and elective surgeries in the U.S. health system could lead to as much as 45 weeks of surgical backlogs, according to a report released in November by King of Prussia, Pennsylvania-based MedRisk LLC.

"When the pandemic first hit, there were many delays (in workers compensation). It did present a huge challenge to the industry - probably one we've never seen before."

Dennis Tierney, Marsh LLC

The trend could continue and adversely affect workers compensation as COVID-19 cases spike again, forcing state closures, the managed care organization said. Delays in physical therapy in soft-tissue injury claims, for instance, may result in



higher medical and indemnity costs than similar claims without delays in treatment, it said in its report.

"Obviously, when the pandemic first hit, there were many delays (in workers compensation)," said Dennis Tierney, Norwalk, Connecticut-based national director of workers compensation claims for Marsh LLC. "It did present a huge challenge to the industry — probably one we've never seen before. All of the things needed to help move claims along just weren't functioning.'

"In the second quarter, when things really were shut down at their tightest as far as medical treatment goes, we definitely had workers experiencing delays and cancellations in their ability to move through treatment," said Kathy Gehring, vice president of claims for nonprofit State Accident Insurance Fund of Oregon, known as SAIF, in Salem, Oregon.

New workers compensation claims

and those with non-critical surgeries were the most significantly affected by the COVID-19 restrictions, said Max Koonce, Fayetteville, Arkansas-based chief claims officer at Sedgwick Claim Management Services Inc.

"It wasn't just the fact that (surgeries) were postponed for six weeks," he said. "Then we had to try to reschedule them again. ... It was very disruptive for those individuals, and during the time off you're continuing to pay disability benefits."

Embracing telemedicine early on helped Sedgwick ensure workers who had to delay surgeries were ready when they were rescheduled, said Mr. Koonce, who noted that the use of telemedicine by TPA claimants increased by 1,000% since the start of the pandemic.

'With older claims, it really helped them keep on that pace," he said.

CorVel Corp., which had already been managing claims via telemedicine, took

the same approach, and claimants have since embraced the option of virtual care, said Michele Tucker, Sacramento, California-based vice president of enterprise operations at the third-party administrator.

We had to restructure and move (to telemedicine) those patients where their brick-and-mortar providers were no longer available or elective surgeries were delayed, so we could ensure continuity of care," she said.

The quick shift to telemedicine and virtual hearings helped Ohio avoid many common comp delays, said Meghan Delaney, of counsel in Fisher Phillips LLP's Cleveland and Columbus, Ohio, offices.

"In terms of settling claims, we've been very successful in wrapping up new and older claims," she said. "We've been able to aggressively pursue some of these settlements ... and employers were looking at opportunities to close out some problem claims."

Mr. Tierney at Marsh also focused on early claim closure, using data analytics to identify claims that in ordinary circumstances may seem too early to close but that under current circumstances may be ripe for settlement.

"Obviously, if you have injured workers on the tail-end of their careers or close to hitting the point of (maximum medical improvement), there's more of a tendency to want to settle a lot sooner," he said. And closure rates did spike early on in the pandemic, though they've since leveled

"In terms of settling claims, we've been very successful in wrapping up new and older claims. We've been able to aggressively pursue some of these settlements.'

Meghan Delaney, Fisher Phillips LLP

Return-to-work challenges in the COVID-19 economy have also made claim resolution more crucial "for the benefit of the injured worker, as well as our clients' benefit," Mr. Koonce said.

'We did an analysis early on to see what each state said with regard to continuation of disability benefits. ... By and large, you continue those benefits if there's no job for them to go back to," he said. "At that point, you're looking at how can you resolve those claims, how can you get them to maximum medical improvement."

MENTAL HEALTH CLAIMS MAY OUTLAST PANDEMIC

he COVID-19 pandemic's effect on the psychological health of workers may lead to an increase in mental health workers compensation claims for the foreseeable future, experts say.

CorVel Corp. has seen an uptick in mental health attachments to claims from health care workers and first responders and predicts that more mental health claims from workers on the front lines will appear this year, said Michele Tucker, Sacramento, California-based vice president of enterprise operations at the third-party administrator.

"What I would predict from personal claim experience is some of (the mental health claims) we will not see until we get



past the post-vaccine era," she said. "I think we're going to see some emergence of mental health issues at that point."

The mental health of health care workers is a top concern for Dennis Tierney, Norwalk, Connecticut-based national director of workers compensation claims for Marsh LLC, who also predicts an increase in front line workers seeking to add a mental component to their claim.

"As we continue to move on with this pandemic in 2021, It's something we're watching," he said.

He also is wary of the psycho-social effect of the coronavirus on workers compensation claimants, noting that the pandemic is compounding the stressors of being out of work and injured.

"I think psychosocially we're all affected — it could keep claims open for very, very long periods of time," he said. Angela Childers



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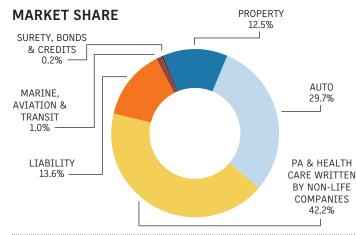
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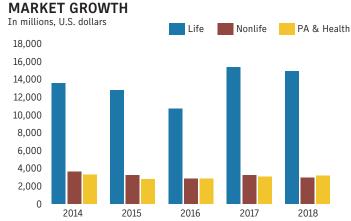
INTERNATIONAL

PROFILE: IRELAND



Since joining the European Community in 1973, Ireland has transformed from a largely agricultural society to a country with a modern, technologically advanced and open market. Its economy is heavily reliant on trade given the limited scope of domestic demand arising from a small population. There are two distinct markets for Irish risk business commercial and personal lines. Results in 2019 for all classes of business improved markedly for most underwriters, but the euphoria was short-lived, as the COVID-19 crisis intervened, and companies were warned against dividend payouts ahead of potentially worsening claims experience. Despite the expectations of a large influx of companies relocating to Dublin or opening an Irish subsidiary for passporting into the EU following the Brexit referendum in June 2016, this largely has not come to pass.





Source: Axco Global Statistics/Industry Associations and Regulatory Bodies



AREA

POPULATION

MARKET CONCENTRATION

market share of top five insurers

2020 GDP CHANGE (PROJECTED)

MARKET DEVELOPMENTS

Updated November 2020

- Recent market developments have largely been influenced by COVID-19 and, as such, will not remain permanent features. The main concern for insurers is the public perception of the sector in the wake of a generally publicized profitable 2019, with large proposed shareholder dividends, immediately followed by the industry's stance on potential business interruption claims, following the government lockdown of the economy. The Central Bank of Ireland, which regulates the insurance industry, issued a statement requesting sympathetic attitudes toward claimants within the terms of policy wordings, while Insurance Ireland, the industry body, attempted to explain the reasoning behind policy wordings and possible denials of liability.
- Insurance Ireland recommended that local underwriters take steps to alleviate the financial pressures on policyholders, including premium holidays, small rebates on motor policies due to reduced usage, reduced employers liability and professional liability premiums, and extended credit for renewals.
- Certain market players are facing two separate class actions to test their business interruption wordings following the government lockdown, specifically in the entertainment and leisure space.
- Insurtech in Ireland is reportedly not up to speed with the rest of the world, although there are attempts to encourage investment in IT platforms to commoditize the business in a wider range of products, not just in personal lines.
- As a direct consequence of the impending departure of the United Kingdom from the European Union, Aon PLC and Travelers Insurance Cos. have recently made arrangements to move their EU business from the U.K. to Ireland.

COMPULSORY INSURANCE

- Passenger liability for rail, bus and tram transport
- Airport operators, air carriers and aircraft operators liability
- Auto third-party liability
- Professional indemnity for insurance brokers and agents
- Workers compensation (state scheme)
- Clinical trials liability
- Railway operators liability (a financial guarantee or insurance)
- Shipowners liability against marine oil pollution (financial guarantee or insurance)

NONADMITTED

Nonadmitted insurance is not permitted in Ireland because the law provides that insurance must be purchased from locally authorized insurers, with some exceptions, namely marine and aviation hull and cargo risks. Insurers from European Economic Area states — all European Union member states, Iceland, Liechtenstein and Norway - may offer insurance under freedom to provide services, and branches and managing general agencies are prevalent.

INTERMEDIARIES

Brokers and agents must be authorized to do insurance business. They are not permitted to place business with nonadmitted insurers, with the exception of marine and aviation hull and cargo risks. Brokers involved in nonadmitted placements are not required to inform buyers that their insurer is not subject to local supervision.

MARKET PRACTICE

It is general practice that international insurers - at least their local subsidiaries or branches - issue local policies to their multinational clients for all relevant classes of their primary insurance programs and to match their specific local needs.

Information provided by Axco. For free trial access to global insurance intelligence, visit axcoinfo.com.

LEGAL BRIEFS

J&J wins captive premium tax refund

■ The New Jersey Supreme Court upheld an appeals court ruling that Johnson & Johnson is due a \$56 million premium tax refund related to its captive insurance company.

The ruling in Johnson & Johnson v. Director, Division of Taxation hinged on changes New Jersey made to its insurance law after the passage of the federal Nonadmitted and Reinsurance Reform Act of 2011.

New Brunswick, New Jersey-based Johnson & Johnson covers risks located nationwide through its Vermont-domiciled captive Middlesex Assurance, court papers say.

Prior to the passage of the NRRA, states could assess premium taxes paid to nonadmitted insurers only for premiums that covered risks within the state. The NRRA, however, allowed states to tax all of an insured entity's nonadmitted premium, even if some of the risks were based in other states.

To make use of NRRA, in 2011 New Jersey amended its insurance law imposing its 5% premium tax on all nonadmitted

Johnson & Johnson increased its tax payment to New Jersey as "a precautionary measure" but filed a claim for overpayment, saying that the amendment only covered surplus lines insurance purchases and did not include self-procured coverage obtained through a captive, court papers say.

The New Jersey tax authorities denied the refund, and in 2018 a tax court ruled in favor of the state, but an appeals court overturned the ruling last year.

New Jersey law "clearly limited J&J's tax liability to the risks it insured in New Jersey [and] was not changed in any way, shape, or form in the 2011 amendment," the 2019 appeals court ruling stated.

The state's high court agreed that the plain language of the New Jersey law meant that Johnson & Johnson was due a refund and noted that the New Jersey legislature could amend the statute further.

Virginia comp act bars assault lawsuit

■ Injuries a transit worker suffered in an assault by a co-worker are compensable, but his tort lawsuit is barred by the Virginia Workers Compensation Act, an appellate court ruled in Workagegnehu v. Washington Metropolitan Area Transit Authority.

The U.S. Circuit Court of Appeals for the District of Columbia affirmed a district court's ruling that the Metro worker's injuries arose out of and in the course of his employment, and dismissed his liability lawsuit against his employer.

Teshome Workagegnehu and Martin

Van Buren were working at a Metro station kiosk when a customer approached them for help. Mr. Van Buren swore at the customer and sent him away, according to court documents. Mr. Workagegnehu volunteered to help the customer use the SparTrip vending machine, which he was tasked with maintaining that day.

Mr. Van Buren told him it was not Mr. Workagegnehu's responsibility to help customers. After a brief verbal exchange, Mr. Van Buren punched his co-worker and continued to do so until Mr. Workagegnehu was unconscious, according to court documents. Police arrived, and Mr. Van Buren was arrested and later convicted of assault.

Mr. Workagegnehu required hospitalization for his injuries and filed for workers compensation benefits, which were denied. He then filed a complaint against the Metro and his general manager for assault and battery as well as intentional infliction of emotional distress.

The two parties stipulated to a workers compensation order, but Mr. Workagegnehu's complaint against Metro and his general manager was dismissed by a district court, which found that the Virginia Workers Compensation Act barred the claim because his injury arose out of his employment.



Del Taco agrees to settle EEOC suit

■ The U.S. Equal Employment Opportunity Commission said Del Taco LLC will pay \$1.25 million to settle the agency's lawsuit charging the fast-food chain with sexual harassment and retaliation against young female workers.

The EEOC said Lake Forest, California-based Del Taco's general manager and shift leader at its Rancho Cucamonga area stores sexually harassed the workers almost daily by subjecting them to unwelcome physical contact, vulgar comments and propositions for sex.

The agency said the behavior was so prevalent that other male employees allegedly felt free to engage in sexual harassment as well. It said when the female workers complained to Del Taco's human resources department, the company failed to adequately respond, and some workers felt they had no choice but to guit because of the hostile work environment.

In addition to the \$1.25 million settlement, the three-year consent decree settling the case includes companywide injunctive relief aimed at preventing workplace harassment and retaliation.

Rosa Viramontes, district director of the EEOC's Los Angeles district office, said in a statement, "Young employees may be especially vulnerable to workplace harassment. It is important for employers to recognize this and create policies and practices that ensure a safe and harassment-free work environment."

The company said in a statement, "The safety and wellbeing of our employees are always top priorities, and we take any harassment allegations very seriously. We fully cooperated with the EEOC throughout its investigation, and the matter has been resolved.'

Former worker loses case against Exxon

A former chemical industry worker failed to show that Exxon Mobil and the subcontractors he worked for were intentionally negligent or that their behavior caused his cancer.

The 5th U.S. Circuit Court of Appeals in New Orleans unanimously affirmed a district court's ruling granting summary judgment to the companies after agreeing that the worker's claims were barred by the exclusivity provision of the Louisiana Workers Compensation Act. The case is Million v. Exxon Mobil Corp.

James Million worked in the chemical industry for 40 years, spending at least a portion of his career working for two Exxon Mobil subcontractors. In 2016, he was diagnosed with cancer and a pulmonary embolism that he claimed were a result of his exposure to hazardous chemicals, including benzene and vinyl chloride, during his employment.

He and his wife filed a lawsuit against Exxon Mobil and the subcontractors in district court in Louisiana, alleging negligence and strict liability.

The subcontractors filed motions for summary judgment, contending that Mr. Million's claims were barred by the exclusivity provision of the state workers compensation act. Although Mr. Million alleged that the subcontractors intentionally caused his exposure to toxic chemicals, the district court held that he failed to show that any act by the subcontractors fell under the workers comp act's intentional tort exemption and granted summary judgment.

Exxon also moved for summary judgment on the basis that Mr. Million failed to provide medical evidence to prove causation for his cancer, which was also granted.

Mr. Million appealed, but the appellate court affirmed the district court's ruling in favor of Exxon and the subcontractors.



INSURERS NOT LIABLE IN PONZI SCHEME

A federal appeals court affirmed a ruling in favor of several insurers, including Lloyd's of London insurers, and an asset management company in connection with a large Ponzi scheme once run by Allen Stanford, a Texas financier now serving a 110-year prison term. The 5th U.S. Circuit Court of Appeals in New Orleans upheld a lower court ruling that neither SEI Investments Co. nor the insurers were liable in connection with the Ponzi scheme. The defendants also included Allied World Assurance Co. and units of CNA Financial Corp., Axa XL, Hartford Financial Services Corp. and Arch Capital Group Ltd.

UNDOCUMENTED WORKER ENTITLED TO DISABILITY

The Nevada Supreme Court unanimously upheld a district court ruling that an undocumented worker who continues to suffer from pain and mental trauma due to a workplace accident is entitled to permanent total disability, despite an insurance administrator's insistence that he cannot work due to his immigration status, not his disability. Manuel Ibanez was working as a carpenter for High Point Construction Inc. in 2014 when a falling two-by-four struck him in the head, shoulder and back.

RULING FAVORS INSURED IN COVID-19 CLAIM

A federal court in Virginia refused to dismiss a COVID-19-related business interruption lawsuit filed by a spa against a State Farm Mutual Insurance Co. unit. The court held the policy's virus exclusion does not apply because COVID-19 was not present at the plaintiff's property. The court also refused to dismiss the case on the basis the spa had not suffered a direct physical loss. It is plausible the spa "experienced a direct physical loss when the property was deemed uninhabitable, inaccessible, and dangerous to use by the Executive Orders," the ruling states.



BY THE NUMBERS

03

IN THIS SPECIAL data and rankings issue of Business Insurance, we bring you our proprietary rankings from the past year plus other industry data to present a numerical overview of the commercial insurance market, from retail brokers to reinsurers and cyber insurers to captive managers.

For more information on rankings and research, visit www.BusinessInsurance.com and click on the "Research & Reports" tab.

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100 LARGEST BROKERS OF U.S. BUSINESS*

Ranked by 2019 brokerage revenue generated by U.S.-based clients

020 ank	2019 rank	Company	2019 U.S. brokerage revenue	% increase (decrease)	2020 rank	2019 rank
1	1	Marsh & McLennan Cos. Inc. ¹	\$7,934,390,000²	10.6%**	51	52
2	2	Aon PLC	\$4,982,714,500	7.1%	52	54
3	3	Willis Towers Watson PLC ¹	\$4,291,680,000	8.5%	53	NR
4	4	Arthur J. Gallagher & Co. ¹	\$3,944,316,000	10.3%	54	53
5	6	Brown & Brown Inc. ¹	\$2,384,737,230	18.7%	55	56
6	5	Truist Insurance Holdings Inc. ¹	\$2,270,817,000	12.6%**	56	55
7	7	Hub International Ltd. ¹	\$1,841,676,863	10.0%	57	57
8	8	USI Insurance Services LLC ¹	\$1,812,973,241	8.9%	58	59
9	10	Acrisure LLC ¹	\$1,716,240,800	29.7%	59	62
10	9	Alliant Insurance Services Inc. ¹	\$1,576,387,172	17.1%	60	63
11	12	AssuredPartners Inc. ¹	\$1,429,414,301	16.9%	61	60
12	11	Lockton Cos. LLC ³	\$1,424,962,777	10.6%**	62	96
13	13	NFP Corp.	\$1,344,088,720	12.4%	63	61
14	14	BroadStreet Partners Inc.	\$743,048,000	22.9%	64	64
15	15	Edgewood Partners Insurance Center, dba EPIC Insurance Brokers & Consultants ¹	\$736,070,837	27.1%	65	70
16	16	Risk Strategies Co. Inc. ¹	\$516,880,000	41.0%	66	71
17	17	Alera Group ¹	\$456,000,000	33.9%	67	65
18	18	Digital Insurance Inc., dba OneDigital Health and Benefits ¹	\$402,816,215	28.6%	68	67
19	19	Leavitt Group ¹	\$272,726,000	10.0%**	69	68
20	20	CBIZ Benefits & Insurance Services Inc. ¹	\$245,100,000	3.4%	70	69
21	24	Higginbotham ¹	\$244,029,000	22.0%	71	74
22	21	Paychex Insurance Agency Inc. ⁴	\$232,400,000	0.4%	72	77
23	25	Cottingham & Butler Inc.	\$224,338,000	15.9%**	73	75
24	22	Holmes Murphy & Associates Inc.	\$223,445,000	6.6%	74	79
25	23	Insurance Office of America Inc. ¹	\$221,371,892	7.3%	75	78
26	28	The Hilb Group LLC ¹	\$197,983,681	39.7%	76	76
27	26	Cross Financial Corp., dba Cross Insurance ¹	\$186,200,000	11.5%	77	81
28		1 /	\$175,864,622	8.3%	78	80
	27	The IMA Financial Group Inc. ¹			79	NF
29	36	Heffernan Group ¹	\$170,261,862	66.1%	80	91
30	30	Woodruff Sawyer & Co.	\$159,400,000	15.1%	81	90
31	29	Hylant Group Inc.	\$141,849,320	2.2%	82	82
32	44	Baldwin Risk Partners LLC ¹	\$137,840,695	72.8%	83	84
33	31	PayneWest Insurance Inc.	\$134,019,624	2.8%	84	89
34	33	AmeriTrust Group Inc.	\$126,116,173	8.9%	85	83
35	32	BXS Insurance Inc.	\$123,126,133	3.5%	86	73
36	37	Insurica Inc. ¹	\$114,945,455	12.1%	87	99
37	38	Relation Insurance Inc. ¹	\$104,769,000	6.0%	88	87
38	41	Insurors Group LLC	\$97,188,000	7.0%	89	92
39	42	Oswald Cos. ¹	\$93,564,900	9.5%		
40	45	ABD Insurance & Financial Services Inc.	\$93,279,300	17.9%	90	85
41	43	Propel Insurance	\$92,213,550	9.4%	91	93
42	39	Associated Benefits and Risk Consulting	\$92,079,132	(0.6%)	92	94
43	40	Eastern Insurance Group LLC	\$90,832,722	(1.4%)	93	95
44	49	TrueNorth Cos. LLC ¹	\$85,385,000	14.9%	94	97
45	46	Lawley Service Inc.	\$82,741,930	7.8%	95	NI
46	47	Horton Group Inc. ¹	\$77,471,877	2.5%	96	10
47	66	Acentria Insurance ¹	\$76,510,971	64.7%	97	98
48	51	Towne Insurance Agency LLC ¹	\$76,169,587	15.9%	98	10
40 49	48	Marshall & Sterling Enterprises Inc. ¹	\$73,142,653	(2.4%)	99	10
		· .				
50	50	M3 Insurance Solutions Inc. ¹	\$72,389,128	7.7%	100	NI

2022	2010		2010 11 0	nv :
2020 rank	2019 rank	Company	2019 U.S. brokerage revenue	% increase (decrease)
51	52	Houchens Insurance Group Inc. ⁵	\$68,104,130	9.5%
52	54	Parker, Smith & Feek Inc. ¹	\$68,042,000	12.6%
53	NR	Patriot Growth Insurance Services LLC ¹	\$66,400,000	NA
54	53	James A. Scott & Son Inc., dba Scott Insurance	\$66,247,000	7.6%
55	56	Huntington Insurance Inc.	\$62,100,720	7.2%
56	55	The Graham Co.	\$61,959,264	6.3%**
57	57	Starkweather & Shepley Insurance Brokerage Inc. ¹	\$60,095,993	5.4%
58	59	Sterling & Sterling LLC, dba SterlingRisk ¹	\$55,708,663	3.1%
59	62	Bolton & Co. ¹	\$54,863,625	13.0%
60	63	Shepherd Insurance LLC ¹	\$54,827,415	13.9%
61	60	Bowen, Miclette & Britt Inc.	\$53,665,270	3.6%
62	96	World Insurance Associates LLC ¹	\$53,349,421	80.6%
63	61	Frost Insurance Agency Inc.	\$53,080,878	6.9%
64	64	Moreton & Co.	\$51,412,000	9.8%
65	70	Armfield, Harrison & Thomas Inc., dba AHT Insurance	\$49,421,762	10.1%
66	71	Sunstar Insurance Group LLC ¹	\$49,358,000	14.8%
67	65	Rose & Kiernan Inc. ³	\$49,056,000	4.9%
68	67	Corporate Synergies Group LLC	\$48,976,474	5.7%
69	68	Riggs, Counselman, Michaels & Downes Inc.	\$47,174,213	2.9%
70	69	M&O Agencies Inc., dba The Mahoney Group	\$46,161,860	2.4%
71	74	Robertson Ryan & Associates Inc.	\$45,817,576	11.6%
72	77	Sterling Seacrest Partners Inc.	\$45,485,341	15.4%
73	75	HMS Insurance Associates Inc.	\$43,535,198	6.1%
74	79	Fisher Brown Bottrell Insurance Inc.	\$42,242,677	8.1%
75	78	First Insurance Group LLC	\$42,138,916	6.9%
76	76	Charles L. Crane Agency Co.	\$41,352,000	1.0%
77	81	The Loomis Co.	\$40,095,000	8.0%
78	80	James G. Parker Insurance Associates⁴	\$38,969,064	3.7%
79	NR	Burnham Benefits Insurance Services ¹	\$38,694,000	7.6%
80	91	Cobbs Allen ¹	\$37,886,504	15.1%
81	90	MJ Insurance Inc.	\$37,547,254	13.6%
82	82	M&T Insurance Agency Inc.	\$37,187,000	2.6%
83	84	Christensen Group Inc.	\$36,924,747	8.2%
84	89	The Partners Group Ltd.	\$36,725,373	11.0%
85	83	SullivanCurtisMonroe Insurance Services LLC	\$35,989,000	0.6%
86	73	Ansay & Associates LLC ¹	\$35,541,860	(16.1%)
87	99	Insgroup Inc. ¹	\$35,434,927	26.5%
88	87	Kapnick Insurance Group ¹	\$34,054,883	2.3%
89	92	Haylor, Freyer & Coon Inc. ⁶	\$33,759,000	2.9%
90	85	Rich & Cartmill Inc.	\$33,368,590	(0.5%)
91	93	PSA Insurance & Financial Services Inc. ¹	\$32,400,000	2.5%
92	94	People's United Insurance Agency Inc.	\$32,166,000	4.7%
93	95	Tompkins Insurance Agencies Inc.	\$31,500,000	5.9%
94	97	Tricor Inc. ¹	\$30,436,000	4.7%
95	NR	High Street Insurance Partners Inc. ¹	\$29,730,000	201.4%
96	100	The Buckner Co. Inc. ¹	\$29,511,679	6.5%
97	98	Murray Insurance Associates Inc. ⁵	\$29,292,000	2.2%
98	101	The Daniel & Henry Co.	\$28,077,000	1.5%
99	102	Underwriters Safety & Claims Inc., dba The Underwriters Group	\$27,462,600	0.1%
100	NR	Moody Insurance Agency Inc. ³	\$27,363,221	7.2%
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'Companies that derive more than 49% of their gross revenue from personal lines are not ranked. "2018 brokerage revenue restated. NR = Not ranked. NA = Not available.

'Reported U.S. acquisitions. 'Acquired Assurance Agency Ltd. on April 1, 2020. Bl estimate of proforma revenue to reflect acquisition. 'Fiscal year ending April 30. 'Fiscal year ending May 31. 'Fiscal year ending Sept. 30. 'Fiscal year ending Aug. 31. Source: Bl survey

DATA & RANKINGS **FASTEST GROWING BROKERS** Company High Street Insurance Partners Inc. World Insurance Associates LLC Baldwin Risk Partners LLC Heffernan Group 64.7% 41.0% Risk Strategies Co. Inc. The Hilb Group LLC 39.7% 33.9% Alera Group The Liberty Co. Insurance Brokers Inc. 31.8%



MOST PRODUCTIVE BROKERS

Rank	Company	Brokerage revenue per employee
1	Heffernan Group	\$412,426
2	Alliant Insurance Services Inc.	\$396,476
3	York International Agency LLC	\$384,057
4	Burnham Benefits Insurance Services	\$368,514
5	The Graham Co.	\$334,915
6	Woodruff Sawyer & Co.	\$313,780
7	HMS Insurance Associates Inc.	\$310,966
8	Truist Insurance Holdings Inc.	\$306,370
9	Foa & Son Corp.	\$305,556
10	Edgewood Partners Insurance Center, dba EPIC Insurance Brokers & Consultants	\$286,311

Source: BI survey

LARGEST PRIVATELY OWNED BROKERS

Rank	Company	2019 brokerage revenue
1	Hub International Ltd.	\$2,391,788,134
2	Lockton Cos. LLC ¹	\$1,867,579,000
3	USI Insurance Services LLC	\$1,831,286,102
4	Acrisure LLC	\$1,806,569,263
5	Alliant Insurance Services Inc.	\$1,576,387,172
6	NFP Corp.	\$1,460,966,000
7	AssuredPartners Inc.	\$1,443,707,000
8	Edgewood Partners Insurance Center, dba EPIC Insurance Brokers & Consultants	\$744,408,209
9	BroadStreet Partners Inc.	\$743,048,000
10	Risk Strategies Co. Inc.	\$516,880,000

Source: BI survey





WORLD'S LARGEST INSURANCE BROKERS

Rank	Company	2019 brokerage revenue
1	Marsh & McLennan Cos. Inc. ¹	\$16,752,000,000²
2	Aon PLC	\$10,939,000,000
3	Willis Towers Watson PLC	\$8,941,000,000
4	Arthur J. Gallagher & Co.	\$5,716,400,000
5	Hub International Ltd.	\$2,391,788,134
6	Brown & Brown Inc.	\$2,384,737,230
7	Truist Insurance Holdings Inc. ⁴	\$2,270,817,000
8	Lockton Cos. LLC ⁵	\$1,867,579,000
9	USI Insurance Services LLC	\$1,831,286,102
10	Acrisure LLC	\$1,806,569,263

¹Acquired Assurance Agency Ltd. on April 1, 2019. ²Bl estimate of pro forma revenue to reflect acquisition of Assurance Agency Ltd. ³Restated. ⁴Formerly BB&T Insurance Holdings Inc. Name changed with acquisition of SunTrust Banks Inc. in June 2019. ³Fiscal year ending April 30. Source: BI survey

LARGEST U.S. INSURERS

Rank	Company	2019 direct premium written	Market share
1	State Farm	\$65,627,586,000	9.3%
2	Berkshire Hathaway Inc.	\$45,650,562,000	6.5%
3	Progressive Casualty Insurance Co.	\$39,222,879,000	5.6%
4	Allstate Corp.	\$35,025,903,000	5.0%
5	Liberty Mutual Holding Co. Inc.	\$34,884,727,000	4.9%
6	Travelers Cos. Inc.	\$27,927,216,000	4.0%
7	United Services Automobile Association Insurance Co.	\$23,474,366,000	3.3%
8	Chubb Ltd.	\$22,704,479,000	3.2%
9	Farmers Insurance Group of Cos.	\$20,643,559,000	2.9%
10	Nationwide Mutual Insurance Co.	\$18,436,393,000	2.6%

Source: National Association of Insurance Commissioners





BUSINESS INSURANCE

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LARGEST WORKERS COMPENSATION INSURERS

Rank	Company	2019 direct premium written	Market share
1	Travelers Cos. Inc.	\$4,211,527,000	7.1%
2	Hartford Fire & Casualty Group	\$3,365,161,000	5.7%
3	Zurich Insurance Co.	\$2,634,156,000	4.4%
4	Liberty Mutual Holding Co. Inc.	\$2,447,241,000	4.1%
5	Chubb Ltd.	\$2,361,233,000	4.0%
6	Berkshire Hathaway Inc.	\$2,251,359,000	3.8%
7	AmTrust Financial Services Inc.	\$2,172,219,000	3.7%
8	State Insurance Fund	\$1,996,372,000	3.4%
9	Washington State Fund	\$1,927,083,000	3.3%
10	Blue Cross Blue Shield of Michigan	\$1,744,640,000	2.9%

Source: National Association of Insurance Commissioners





LARGEST BENEFITS BROKERS

Rank	Company	2019 employee benefits revenue
1	Marsh & McLennan Cos. Inc.	\$5,021,000,000
2	Willis Towers Watson PLC	\$4,561,000,000
3	Aon PLC	\$3,484,000,000
4	Arthur J. Gallagher & Co.	\$1,227,022,000
5	NFP Corp.	\$742,636,000
6	USI Insurance Services LLC	\$726,330,849
7	Hub International Ltd.	\$663,038,077
8	Lockton Cos. LLC	\$620,493,000
9	Brown & Brown Inc.	\$453,694,347
10	Alliant Insurance Services Inc.	\$409,937,817

LARGEST MEDICAL PROFESSIONAL LIABILITY INSURERS Company 2019 direct written premiums Market share Berkshire Hathaway Inc. \$1,650,304,000 16.9% \$920,009,000 9.4% The Doctors Co. CNA Financial Corp. \$559,455,000 5.7% \$490,242,000 5.0% 4 ProAssurance Corp. Medical Professional \$488,001,000 5.0% Mutual Insurance Co. MCIC Vermont Inc., a Reciprocal Risk Retention Group \$398,529,000 4.1% NORCAL Mutual Insurance Co. \$370,785,000 3.8% MagMutual Insurance Co. \$313,187,000 3.2% Liberty Mutual Holding Cos. Inc. \$217,629,000 2.2% 10 AJB Ventures Inc. \$169,871,000 Source: National Association of Insurance Commissioners

Source: BI survey

DATA & RANKINGS **WORLD'S LARGEST REINSURANCE BROKERS** Company 2019 gross revenue Rank Aon's Reinsurance Solutions \$1,665,000,000 Guy Carpenter & Co. LLC1 \$1,482,096,000 \$1,021,803,000 Willis Re TigerRisk Partners LLC \$125,000,000 Gallagher Re² \$100,000,000 ¹ Acquired JLT Reinsurance in April 2019 ² Formerly Capsicum Reinsurance Brokers LLP



WORLD'S LARGEST REINSURERS

Rank	Company	2019 gross reinsurance premium written
1	Swiss Re Ltd.	\$42,228,000,000
2	Munich Reinsurance Co.	\$37,864,000,000
3	Hannover Rück SE ¹	\$25,309,000,000
4	SCOR SE	\$18,302,000,000
5	Berkshire Hathaway Inc.	\$16,089,000,000
6	Lloyd's of London ²	\$14,978,000,000
7	China Reinsurance (Group) Corp.	\$13,161,000,000
8	Reinsurance Group of America Inc.	\$12,150,000,000
9	Great West Lifeco	\$10,149,000,000
10	PartnerRe Ltd.	\$7,285,000,000

¹Net premium written data not reported; net premium earned substituted.

²Lloyd's premiums are reinsurance only. Premiums for certain groups in the rankings may include Lloyd's Syndicate premiums when applicable. Source: A.M. Best Co. Inc.



LARGEST SPECIALTY INTERMEDIARIES

Rank	Company	2019 premium volume
Nam	Company	2013 premium votume
1	AmWINS Group Inc.	\$21,996,591,121
2	CRC Insurance Services Inc.	\$19,471,767,057
3	Ryan Specialty Group LLC	\$8,900,000,000
4	Risk Placement Services Inc.	\$4,200,000,000
5	All Risks Ltd.	\$2,260,000,000
6	Burns & Wilcox Ltd.	\$1,915,000,000
7	Worldwide Facilities LLC	\$1,814,089,505
8	Victor Insurance Holdings	\$1,600,000,000
9	AmRisc LLC	\$1,312,585,113
10	JenCap LLC	\$1,123,000,000

Source: BI survey

LARGEST PROPERTY/CASUALTY WHOLESALERS

Rank	Company	2019 premium volume
1	AmWINS Group Inc.	\$14,665,160,991
2	CRC Insurance Services Inc.	\$9,732,654,480
3	Ryan Specialty Group LLC	\$8,900,000,000
4	All Risks Ltd.	\$2,260,000,000
5	Worldwide Facilities LLC	\$1,814,089,505
6	JenCap Holdings LLC	\$1,123,000,000
7	Brown & Riding Insurance Services Inc.	\$1,037,449,801
8	U.S. Risk Insurance Group LLC	\$983,000,000
9	ARC Excess & Surplus LLC	\$720,000,000
10	Program Brokerage Corp.	\$460,750,000

Source: BI survey





DATA & RANKINGS



LARGEST U.S.-BASED SURPLUS LINES INSURERS

Rank	Company	2019 nonadmitted direct premiums
1	Lexington Insurance Co.	\$2,195,861,019
2	Nationwide Excess and Surplus	\$1,986,006,3551
3	AEGIS (Associated Electric & Gas Insurance Services Inc.)	\$1,815,733,000 ²
4	National Fire & Marine Insurance Co.	\$1,798,192,110
5	Chubb Ltd.	\$1,652,503,282
6	Indian Harbor Insurance Co.	\$1,594,116,693
7	Liberty Mutual Holding Co. Inc.	\$1,501,021,000
8	Markel Corp.	\$1,480,458,536
9	James River Insurance Co.	\$911,793,338
10	Axis Surplus Insurance Co.	\$770,762,529

¹BI estimate based on annual statements for Scottsdale Insurance Co., Scottsdale Surplus Lines Insurance Co., $National\ Casualty\ Co.\ and\ Freedom\ Specialty\ Insurance\ Co.\ ^2From\ annual\ review\ and\ financial\ statements.$

LARGEST D&O INSURERS

Rank	Company	2019 direct premiums written	Market share
1	Axa SA	\$1,001,810,000	13.1%
2	American International Group Inc.	\$889,000,000	11.6%
3	Chubb Ltd.	\$852,600,000	11.1%
4	Tokio Marine Holdings Inc.	\$656,300,000	8.6%
5	Travelers Cos. Inc.	\$359,100,000	4.7%
6	CNA Financial Corp.	\$317,600,000	4.1%
7	Berkshire Hathaway Inc.	\$287,900,000	3.8%
8	Fairfax Financial Holdings Ltd.	\$272,400,000	3.6%
9	Sompo Holdings Inc.	\$243,100,000	3.2%
10	Zurich Insurance Group Ltd.	\$237,100,000	3.1%

Source: S&P Global Market Intelligence







LARGEST CYBER SECURITY INSURERS* (PACKAGE POLICIES)

Rank	Company	2019 direct written premium	Market share
1	Chubb Ltd.	\$355,278,240	36.0%
2	CNA Financial Corp.	\$78,694,306	8.0%
3	Hartford Fire & Casualty Group	\$49,739,790	5.0%
4	Axis Capital Holdings Ltd.	\$47,695,101	4.8%
5	Liberty Mutual Holding Co. Inc.	\$38,715,469	3.9%
6	Travelers Cos. Inc.	\$34,501,807	3.5%
7	BCS Insurance Co.	\$31,410,721	3.2%
8	Sompo Holdings Inc.	\$26,313,493	2.7%
9	Cincinnati Financial Corp.	\$21,660,954	2.2%
10	Berkshire Hathaway Inc.	\$19,069,971	1.9%

*Not including surplus lines Source: National Association of Insurance Commissioners





LARGEST CAPTIVE MANAGERS

Rank	Company	2019 total captives
1	Marsh Captive Solutions	1,380
2	Aon Captive & Insurance Management	926
3	Artex Risk Solutions Inc.	729
4	Willis Towers Watson PLC, Global Captive Practice	337
4	Strategic Risk Solutions Inc.	337
6	Davies Captive Management ¹	141
7	USA Risk Group	100
8	Innovative Captive Strategies ²	89
9	Beecher Carlson Insurance Services LLC	83
9	Atlas Insurance Management	83

¹Formerly Quest Management Services Ltd. ²Acquired Global Captive Management Ltd. in September 2019. Source: *BI* survey





COUNTING CAPTIVES

Rank	Domicile	Total number of captives at end of 2019
1	Bermuda	715
2	Cayman Islands	618
3	Vermont	585
4	Utah	435
5	Delaware	366
6	Barbados	294
7	North Carolina	235
8	Hawaii	231
9	Guernsey	199
10	Luxembourg	195

Source: BI survey

Rising sexual assault claims test insurance policy exclusions



Laura M. Gregory is a partner in the insurance group of Sloane Walsh LLP in Boston. She can be reached at lgregory@sloanewalsh.com.

client or customer files a civil suit against your business and an employee alleging that the employee sexually assaulted them or their child. Is there coverage?

As more and more civil claims of sexual abuse and molestation have been filed in recent years, most insurance policies now include exclusions designed to eliminate coverage for the employee and often the business as well. These exclusions are in addition to traditional limitations on coverage for intentional acts.

The related claims against the employer/business are generally negligence-based (e.g. negligent supervision, negligent hiring, breach of fiduciary duty). Negligence claims are an "occurrence" and are not within the intentional injury exclusion, pursuant to most states' insurance law. Thus, without an additional exclusion, the claims against the business are likely covered under a commercial general liability policy or a businessowners policy.

Additionally, CGL and businessowners policies also provide coverage for "personal injury" or "personal and advertising injury" which commonly includes false imprisonment. False imprisonment allegations are often included in civil complaints alleging sexual assault or molestation. Personal injury claims are intentional torts and don't require an occurrence and are not subject to intentional injury exclusions. Thus, false imprisonment allegations often trigger a duty to defend and potentially a duty to indemnify in policies without an abuse, molestation or similar exclusion.

In recent years, molestation, abuse or similar exclusions have been added to most business liability policies. These exclusions generally apply to both bodily injury and personal injury claims and prevent the insurer from having to defend or indemnify the alleged assailant employee, as well as the related negligence claims against the employer. Two 2020 Massachusetts cases are instructive on the application of these exclusions.

In October 2020, the Massachusetts Appeals Court determined that there was no coverage under a CGL policy issued to a dance studio as well as the employee/ dance instructor's homeowners policy. Cosmin Marculetiu v. Safety Ins. Co. involved allegations by a 23-year-old dancer at the dance studio that employed a 44-yearold ballet instructor who allegedly raped the dancer during a trip to Romania for an international dance competition. The dancer brought a civil action against the instructor and the studio with 10 counts alleging "various forms of sexual assault: rape, assault and battery, indecent assault and battery, assault with intent to rape, and drugging for sexual intercourse ... intentional infliction of emotional distress, false imprisonment, negligence, breach of fiduciary duty, and loss of consortium." The instructor filed suit seeking coverage under the dance studio's CGL policy and his own homeowners policy.

The Massachusetts Appeals Court determined it was a question of fact whether the instructor intended harm to the plaintiff. The court refused to apply the inferred intent rule, distinguishing the cases that infer intent to harm from acts such as sexual molestation of a child and punching someone in the face. The court ultimately held that the instructor was not covered under the CGL policy because he was not an insured.

As an instructor at the studio, he was only an insured for his actions "within the scope of [his] employment by [the studio] or [taken] while performing duties related to the conduct of [IBAN's] business," the court ruled. Based on this, the court determined that the duty to defend depended on whether the instructor's alleged conduct during the trip to Romania was within the scope of his employment or duties related to the studio. The court found that it was not and as a result he was not an insured under the studio's CGL policy.

With most liability policies including exclusions for abuse and molestation, oftentimes not limited to the sexual context, businesses should consider their exposure in these areas.

The court further held that the instructor's homeowners policy did not provide coverage because the alleged acts occurred on a work-related trip, causing the business pursuits exclusion to apply.

Two months before the *Marculetiu* decision, the Massachusetts Supreme Judicial Court analyzed the application of an abuse and molestation exclusion in *Dorchester Mutual Insurance Co. v. Krusell.* The exclusion eliminated coverage for "[b]odily injury ... arising out of ... physical or mental abuse." The court concluded that the language of the exclusion, in the facts presented, was ambiguous and looked to the policyholder's reasonable expectations.

Krusell involved a late-night argument between two men who were telling fish stories; one pushed the other causing serious injuries. The insurer denied coverage based on the exclusion for bodily injury arising out of "physical or mental abuse," stating: "While no single quality transforms physically harmful conduct into physically abusive conduct, a reasonable insured could, and likely would, understand the 'abusive' quality of physical abuse to apply to a limited subset of physically harmful treatment, often characterized by an imbalance of power."

The court further discussed multiple cases from other jurisdictions where insurers successfully relied upon an abuse and molestation exclusion involving conduct that implies that the abuser is cruel or inhumane, that is, disposed to inflict pain or suffering. Then the court discussed numerous other decisions applying a lower standard – "physically abusive conduct is a subset of physically harmful treatment."

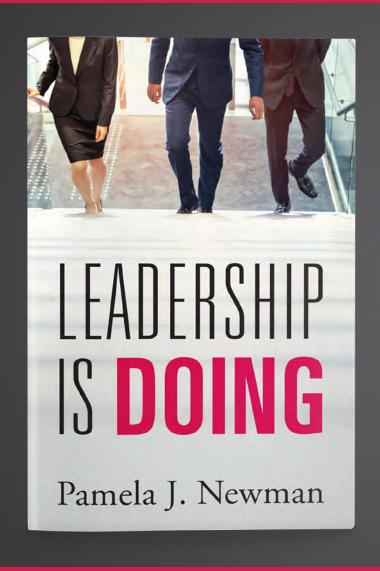
In determining reasonable expectations regarding the exclusion at issue, the *Krusell* court discussed the history of sexual abuse and molestation exclusions and their application to parties against entities that weren't the assailant, stating: "Because [claims] often are not based directly on acts of the abuser, these claims also resulted in the now-common language for injuries 'arising out of' an act of abuse or molestation."

The court noted that abuse and molestation exclusions shield insurers from liability in such situations by precluding coverage for any claim "arising out of" abuse or molestation, as opposed to claims based on intentional conduct.

The court went on to state that "an ordinary understanding of the term 'physical abuse' remains limited to deliberately harmful treatment."

Insurers have adopted abuse and/or molestation exclusions to shield themselves from liability for relevant claims where they "unexpectedly could not rely upon the intentional acts exclusion to preclude coverage," according to Massachusetts' highest court.

With most liability policies including exclusions for abuse and molestation, oftentimes not limited to the sexual context, businesses should consider their exposure in these areas. Abuse and molestation coverage is being sold in the market today. Additionally, even if an insurer agrees to defend a business under a general liability policy or a professional liability policy, the defense costs could reduce or even exhaust the policy limits. Further, such a defense is likely to be under a reservation of rights and little or none of any judgment may be covered under the policy. Or, the policy limits may be reduced or even exhausted by settlement of abuse or molestation claims, leaving less or possibly nothing for traditional general and professional liability claims during the policy period.



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MARKET PULSE

Lloyd's, Parsyl launch health risk facility

■ Lloyd's of London and technology company Parsyl Inc. launched a global health risk facility backed by 14 reinsurers and insurers to cover the distribution of COVID-19 vaccines, after securing a \$26.7 million loan from the U.S. International Development Finance Corp.

With the DFC loan, Parsyl's Syndicate 1796 begins trading Jan. 1 and is already quoting on coverage for COVID-19 vaccine shipments to developing countries, Ben Hubbard, CEO of Parsyl, said in an

The public-private initiative is backed by insurers Ascot Underwriting Ltd., Axa XL, Beazley PLC, Chubb Ltd., Talbot Underwriting Ltd., QBE, Tokio Marine Kiln and Aegis, Lloyd's and Parsyl said in a joint statement.

Reinsurers to Syndicate 1796 include Convex Group Ltd., Canopius Group Ltd., Hamilton Re Ltd. and Renaissance Re Holdings Ltd., they said.

McGill and Partners served as the broker on the reinsurance placements, the statement said.

The facility is based on a risk-sharing model whereby Syndicate 1796, with the DFC loan and reinsurance support, can provide up to a 50% line on a risk, with the existing Lloyd's cargo market sharing the remaining 50%, Mr. Hubbard said.

The DFC loan will allow the facility to offer cost-effective insurance coverage for the storage and transit of medical supplies such as temperature-sensitive vaccines and medicines, diagnostics, personal protective equipment and ancillary cold chain equipment, Lloyd's and Parsyl said.

Coverage via Syndicate 1796 is currently available to eligible low, lower-middle and upper-middle income countries only. Policy limits are up to \$20 million per territory with options for higher limits available on an excess basis if required.

All products related to COVID-19 and any other existing infectious disease control and prevention programs are covered, Parsyl said.

Eligible policyholders include private manufacturers, ministries of health, public health agencies, procurement agents, logistics companies and local market insurers via reinsurance.

Medval releases tool for Medicare reporting

■ Medval LLC has created a tool to help companies manage Medicare Secondary Payer Section 111 reporting to the Centers for Medicare and Medicaid Services, the Laguna Hills, California-based compliance company announced.

The tool, called the 111 Reporter, enables companies to track Medicare claim





Firm offers online tool to track virus suits

■ New York-based Jackson Lewis PC announced an online data tool that helps users track state-bystate legal filings and spot trends in COVID-19-related worker/employer litigation.

COVID-19 Employment Lit-Watch is an interactive dashboard that spotlights the number and types of pandemic-related employment law violations filed by industry and

by state, according to a statement. "The online tool tracks both federal and state filings, visualizes the relationship between new COVID-19 cases and filings, and allows you to sort the cases by plaintiff type to distinguish between single plaintiff verses class action filings," Patrick DiDomenico, chief innovation officer for Jackson Lewis, said in the statement.

Insights easily spotted within Lit-Watch recently include that nearly 75% of all labor and employment COVID-19-related complaints alleged wrongful termination, and only 6% of cases were filed as class or collective actions, according to data compiled through October.

status, claims by a responsible reporting entity, total claims vs. Medicare eligible claims, errors in queries to submit and important dates.

Origami Risk tool tracks outbreaks, vaccinations

Origami Risk LLC has created an online tool for health care providers, nursing homes and employers to track employee COVID-19 vaccinations and workplace outbreaks of the coronavirus, the Chicago-based risk technology firm announced.

The tool will allow employers to track vaccinations of their employee populations and monitor virus outbreaks defined as three or more workers reporting coronavirus at a single location in a 14-day period, for government-mandated reporting.

The tool is also available to employers who do not use the Origami platform.

NFP forms sports, entertainment group

■ NFP Corp. said it has formed a sports and entertainment group.

It said the group brings together NFP subsidiaries BWD Sports & Entertainment LLC and Team Scotti, both of which will be branded under the NFP name, as well various other industries within NFP "to offer a new level of collective capabilities and expertise."

The New York-based brokerage said its current clients include several North American sports organizations as well as numerous individual sports franchises, nearly 12,000 professional athletes and entertainment industry clients.

NFP Corp. acquired LFG Inc., doing business as Team Scotti, in a transaction that closed Dec. 1, 2019.

Aon digital cover for small, medium business

■ Aon PLC said it is introducing cyber and professional liability insurance online for small and medium-sized businesses.

Aon said the digital insurance service, which is designed for any business generating up to \$100 million in annual revenue, enables companies to go through the full end-to-end process of buying and managing cyber and professional liability insurance online.

Aon said businesses also have access to an insurance specialist to walk them through the application process and coverage details.

MGA, Al company partner on underwriting

■ Managing general agent Method LLC has partnered with Gradient AI to create an artificial intelligence and machine learning component into its workers compensation underwriting process, the MGA announced.

Method, which was acquired in 2019 by Nashville, Tennessee-based Salus Workers Compensation LLC, said the new underwriting model will allow it to increase speed in quoting and price risk more accurately for high-hazard and mid-market risks.

DEALS & MOVES

Brown & Brown buys Irish brokerage

Brown & Brown Inc. has agreed to buy Cork, Ireland-based O'Leary Insurances Ltd., the brokerage announced.

Terms of the deal, which is expected to close in January 2021, were not disclosed.

The acquisition is Brown & Brown's first in Ireland and its first operation in Europe outside of the United Kingdom, a Brown & Brown spokeswoman said.

O'Leary Insurances is independently owned and has about 200 employees in eight locations throughout Ireland, according to a Brown & Brown statement.

Gallagher acquires New York agency

Arthur J. Gallagher & Co. has acquired Cool Insuring Agency Inc., Gallagher said in a statement.

Terms of the transaction were not disclosed.

Queensbury, New York-based Cool, founded in 1857, provides commercial, personal, and life and health insurance and services to clients in the northeastern U.S. from offices in Queensbury and Latham, New York, with a focus on the construction, health care and government sectors, which together account for more than half of its revenue.

Marsh & McLennan Agency buys trucking specialist

Marsh & McLennan Agency LLC, the middle-market unit of Marsh LLC, has bought Louisville, Kentucky-based Heritage Insurance Service Inc., the brokerage announced.

Terms of the deal were not disclosed.

Heritage specializes in insurance for trucking and transportation companies and also places business, auto and homeowners coverage, Marsh said in a statement.

Alera acquires California brokerage

Alera Group said it has acquired Legacy Risk and Insurance Services LLC.

Terms of the transaction were not disclosed.

Walnut Creek, California-based Legacy Risk is a commercial property/ casualty broker with a focus on real estate owners and developers, and construction, manufacturing, renewable energy and technology clients, Alera said in a statement.

PEOPLE



"In many spaces, regulatory changes occur at a snail's pace. But that is not the case in data privacy. Ensuring that you are providing the best guidance based on the most recent regulatory interpretations adds that extra level of complexity."

UP CLOSE

Laura Funk

NEW JOB TITLE: Dallas-based partner, data privacy and cybersecurity practice, Lewis Brisbois Bisgaard & Smith LLP

PREVIOUS POSITION: Frisco, Texas-based senior director, compliance and privacy, Conifer Health Solutions

OUTLOOK FOR THE INDUSTRY: Data privacy and cybersecurity professionals, not just in legal practice, are a necessity in today's technology-driven society. At home and abroad, many jurisdictions have enacted or are in the process of developing data privacy regulations, and having the appropriate experts on your side to ensure compliance is an absolute must.

GOALS FOR YOUR NEW POSITION: My goal is simple — to build upon what is already an amazing and robust team of data privacy and cybersecurity attorneys so that we can be the best advocates for our clients.

CHALLENGES FACING THE INDUSTRY: In many spaces, regulatory changes occur at a snail's pace. But that is not the case in data privacy. Ensuring that you are providing the best guidance based on the most recent regulatory interpretations adds that extra level of complexity to an already fast-paced and multifaceted matter.

FIRST EXPERIENCE: My first exposure to data privacy was while working in the compliance group at Conifer Health Solutions. From day one, I completed investigations into potential HIPAA-related incidents. During my time at Conifer, my responsibilities in privacy grew, and I became the privacy officer for the organization.

ADVICE FOR A NEWCOMER: It is as interesting and exciting as you think it will be, if not more so. No two days are the same. Embrace the chaos and enjoy.

DREAM JOB: I love dogs. I honestly would love to have a dog resort where they can come and play while their families are working or away. Or maybe even run a rescue (all of our family dogs are rescues). But definitely something with dogs.

LOOKING FORWARD TO: As someone who has been focused primarily on HIPAArelated privacy matters, I am excited to learn alongside a team that has such a broad range of expertise in data privacy and cybersecurity. I am also really looking forward to practicing law again. I took a hiatus from it while working in corporate compliance, but I knew I would also find my way back.

COLLEGE MAJOR: I have a B.A. in economics.

FAVORITE MEAL: A classic — good steak, loaded baked potato and a salad.

FAVORITE BOOK: The "Harry Potter" books are amazing.

HOBBIES: My husband and I have two kids, so a lot of our activities involve them. We love to cook, bake, play video games and board games, and we try to keep every Friday night to our pizza and a movie night.

TV SHOW: I can't say that I have one favorite show, but I do have a favorite genre. I love anything with a funny, sarcastic edge, like "The Office," "Parks & Recreation," "The Good Place," and "Schitt's Creek."

ON A SATURDAY AFTERNOON: If it is football season, then watching my Wolverines. Otherwise, just getting outside and enjoying a relaxing day with my family or going to the kids' practices/games.

SEE MORE ONLINE

Visit www.businessinsurance.com/ComingsandGoings for a full list of this month's personnel moves and promotions. Check our website daily for additional postings and sign up for the weekly email. Business Insurance would like to report on senior-level changes at commercial insurance companies and service providers. Please send news and photos of recently promoted, hired or appointed senior-level executives to editorial@businessinsurance.com.

ON THE MOVE



John Keogh, executive vice chairman and chief operating officer of Chubb Group, was named president. Mr. Keogh has served as COO since 2011. He joined

the company, then Ace Ltd., in 2006.



Goldberg Segalla LLP appointed Princeton, New Jersey-based Esther F. Omoloyin co-chair of the firm's national workers compensation practice. Previously,

Ms. Omoloyin was a partner. She was the first workers comp attorney hired by Goldberg Segalla in New Jersey and has been with the firm since 2013.



Philadelphia Insurance Cos. appointed John W. Glomb CEO, succeeding Bob O'Leary, who is stepping down. Mr. Glomb, who joined the insurer

in 2007 as senior vice president of the management and professional liability division, most recently was president.



Marsh LLC named Carlos Quinteros to lead its Los Angeles **Construction Center** of Excellence, which is a newly created position. Most recently, Mr. Quinteros

oversaw the Los Angeles-based residential and real estate development group for broker Aon PLC.



Previsor Insurance Co., a workers compensation insurer, named Columbia, Missouri-based Tim Jackman president and CEO. Mr. Jackman had

been serving as interim president and CEO since November 2019.



McGriff, a subsidiary of Truist Insurance Holdings Inc., named **Paul Cicerchia** executive vice president, Northeast real estate and hospitality practice

leader for its new Manhattan office. Previously, Mr. Cicerchia was Northeast real estate and hospitality leader for Willis Towers Watson PLC.

OFF BEAT



Folgers in hot water over servings claims

he worst part of waking up is finding out you can't make as much coffee as you think you can with a canister of Folgers. Such is the claim behind a class action lawsuit filed by a Chicago-area woman against the Folger Coffee Co., claiming "a straightforward and systematic course of false, misleading and unlawful conduct" by the coffee giant on its labels that one can makes 240 six-ounce cups of coffee with one purchase, according to the complaint filed in federal court in Illinois.

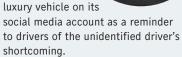
"Defendants have grossly exaggerated the number of cups of coffee that the Folgers ground coffee products can make in order to induce consumer purchases and to charge consumers more for these products," the suit, filed by Ellen Moser, states. At issue is how many grams are in a tablespoon, and how much coffee one can make with that tablespoon, according to the putative class action, which has been raising a few evebrows in legal circles.

Lamborghini driver fails insurance test

here's nothing luxurious about having one's car towed and impounded.

That is unless it's a \$350,000 Lamborghini Aventador, as one driver cruising the roads in Stechford, England, quickly discovered when he was pulled over and couldn't provide proof of insurance.

As reported by the British news outlet SWNS, the West Midlands Police posted an image of the



"Note to anyone who wants to buy a Lamborghini Aventador. Please remember to make sure it is insured for you to drive," the post states.

COVID-19 PUTS INSURANCE ON THE **ALL-INCLUSIVE MENU**



ove over breakfast buffets and welcome margaritas, health insurance is now a part of the all-inclusive offerings at Viva Wyndham Resorts vacation spots in Mexico, Dominican Republic and the Bahamas. The hotel company announced its new Hotel Assist Insurance program that protects travelers who visit any of the Viva Wyndham Resorts with travel and medical insurance coverage, including services for telemedicine, prescriptions, COVID-19 testing and assistance, extension of stay or relocation, and more.

Covering travelers from check-in to check-out, the insurance is available at no extra charge when booking directly with the company and is a part of the all-inclusive offerings.

Crew went cruisin' for a verbal bruisin'

t shouldn't be an impossible mission to follow social distancing and other COVID-19 safety

protocols on a film set.

Apparently, that's where megastar Tom Cruise was going when he went off on London-based crew

members on the set of "Mission: Impossible 7" when they were standing too close together.

The actor's profanity-laced tirade - that mentions insurance - is now available on YouTube:

"We are the gold standard. They're back there in Hollywood making movies right now because of us. Because they believe in us and what we're doing. I'm on the phone with every ... studio at night, insurance companies, producers, and they're looking at us and using us to make their movies. We are creating thousands of jobs ... I don't ever want to see it again. Ever!"



No glitz impersonating a safety inspector

evada is no stranger to impersonators: Elvis, Marilyn Monroe, the Rat Pack. And now, according to an announcement from the state Division of Industrial Relations, there's the Nevada OSHA inspector.

Officials say they have received several reports indicating that individuals posing as Nevada OSHA officials are making contact with businesses in northern Nevada, according to a statement that goes on to inform businesses what a Nevada OSHA inspector can and can't do.

The division urged business owners to seek credentials and to contact Nevada OSHA if they suspect a scam. And, yes, inspectors must follow specific protocols to conduct an inspection and "do not issue citations or assess penalties on the spot."

BUSINESS INSURANCE

CAPILVE FORUM

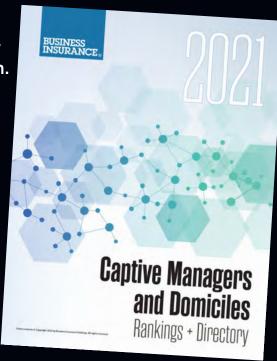
February 24-25, 2021 30th Anniversary Forum

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Registration is now open!

Celebrating its 30th year, the new and refreshed World Captive Forum will be presented in a virtual format, which promises to reach an expanded global audience. This new platform will host the ability to engage in direct, meaningful connection with the global captive community.

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