Attached are the district's **2024 Workers' Compensation Board Member Only** (BMO) renewal documents, which includes the renewal invoice, payment instructions, declarations page, and certificates if applicable.

The minimum stipend per board member continues to be \$1,200 a year for each board member (i.e.: the minimum total stipend for five (5) board members is \$6,000). The annual minimum contribution remains the same at \$450.

There are a couple of important dates to mark on your calendar:

- By October 20, 2023, let us know if you would like to make any changes to the renewal coverage.
- By January 1, 2024, renewal payment is due.
- By January 30, 2024, WC coverage is subject to cancelation for non-payment. If the CSD Pool does not receive
 payment by January 30, 2024, Workers Compensation coverage will cancel for non-payment.

As a reminder, BMO coverage is designed only for work-related injuries and illness for board members while in the course and scope of their duties as board members, which are strictly administrative functions. If any of the following scenarios apply to your district, you must report it to us for proper classification:

- Non-administrative functions performed by any board member, such as occasionally working at a water/sewer, or other plant operations, helping with landscaping or maintenance, meter reading, plowing snow, and so forth.
- Entering into a contract with a party, whether verbally or written, to perform work for your district, when the party does not provide proof of his/her own workers' compensation insurance coverage.
- Hiring district employee(s).

Not reporting accurately may also affect prior years' coverages as the NCCI administrative rules allow for Audits to be conducted and reconciled for corrected contribution payments for the prior three (3) years.

It is important to note that board members are considered employees under the current Colorado Revised Statute while in the course and scope of their board member administrative duties; therefore, coverage is required unless the district opts out by filing a statement with the Colorado Division of Workers' Compensation no less than 45 days before the start of the coverage year along with an annual resolution adopted and signed by each board member. If the district decides to opt out, please send us a copy of the statement and resolution so that we can properly update our file and non-renew the district's coverage. Please also note that opting out or canceling BMO coverage will lead to the loss of the 8% Multi Program Discount associated with the district's Property & Liability coverage.

Finally, the district may qualify for the CSD Pool's SDA Conference Scholarship Program. The CSD Pool sponsors board members who have never attended a Special District Association of Colorado (SDA) Annual Conference in September.

Thank you for renewing your Workers' Compensation Board Member Only coverage with us. If you have any questions regarding your renewal, please do not hesitate to contact us.

TCW Risk Management Renewal Team

On behalf of Nikki Rickord & Sebastian Arulraj 303.872.1930 • tcwinfo@tcwrm.com



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Workers' Compensation Coverage Invoice

District: Spring Mesa Metropolitan District

c/o CliftonLarsonAllen LLP

8390 East Crescent Parkway, Suite 300 Greenwood Village, CO 80111-2814

Broker: TCW Risk Management

384 Inverness Parkway

Suite 170

Englewood, CO 80112

Coverage No.		Entity ID			Effective Da	ate	Expiration Date		Invoice Date	
24WC-60707-0870		60707			1/1/2024		EOD 12/31/2024		8/14/2023	
Class	Description		No. of Employees		No. of	2024 Rate	2024 Estimated	2024 Estimated		Estimated Manual
Code			FT	PT	Volunteers	2024 Kate	Employee Payroll	Volunteer Payroll		Contribution
8811	Board Member Coverage		0	0	5	0.75		Ş	\$6,000.00	\$45.00

Manual Contribution:		\$45.00
Experience Modification:	×	1.00
Modified Contribution:	=	\$45.00
Minimum Contribution:		\$450.00
Contribution Volume Credit:	-	\$0.00
Designated Provider Discount:	-	\$0.00
Cost Containment Credit:	×	1.00
Manual Adjustment:	×	
Multi-Program Discount:	×	1.00

Estimated Annual Contribution: \$450.00 Pro Rata Factor: 1.00 \$450.00

Total Estimated Contribution:

Total Amount Due: \$450.00

Estimated payroll is subject to yearend audit.

Payment evidences "acceptance" of this coverage. The terms of the Intergovernmental Agreement (IGA) require timely payment to prevent automatic cancellation of coverage. Please return this invoice and reference the coverage number on your check to help us apply your payment correctly. Only prior notice to the board of directors of the Colorado Special Districts Property and Liability Pool and subsequent approval may extend cancellation provision.

Please remit to: Colorado Special Districts Property and Liability Pool

c/o McGriff Insurance Services, LLC

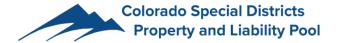
PO Box 1539

Portland, OR 97207-1539

We accept online payments at E-Bill Express

Refer to Payment Instructions page for additional options

billing@csdpool.org 800-318-8870 ext. 3



Workers' Compensation and Employer's Liability Declarations Page

 Coverage Number:
 24WC-60707-0870
 FEIN:
 27-0081375

 Coverage Period:
 1/1/2024 — EOD 12/31/2024
 Entity ID:
 60707

Named Member:Broker of Record:Spring Mesa Metropolitan DistrictTCW Risk Managementc/o CliftonLarsonAllen LLP384 Inverness Parkway8390 East Crescent Parkway, Suite 300Suite 170Greenwood Village, CO 80111-2814Englewood, CO 80112

Coverage is provided for only those coverages and classifications indicated below.

State: Colorado

Limits of Liability: Coverage A Workers' Compensation Statutory

Coverage B Employer's Liability \$2,000,000

Annual Contribution: \$450.00

Class	Description	2024 Estimated Employee Payroll	2024 Estimated Volunteer Payroll
8811	Board Member Coverage		\$6,000.00

This Declarations page is made and is mutually accepted by the Pool and Named Member subject to all terms that are made a part of the Workers' Compensation Coverage Document. This Declarations page represents only a brief summary of coverages. Please refer to the Coverage Document at csdpool.org for actual coverages, terms, conditions, and exclusions. Named Member must be a member of the Special District Association of Colorado and must adopt the Pool's Intergovernmental Agreement.

Date: 8/14/2023

Countersigned by:

Authorized Representative

Colorado Special Districts Property and Liability Pool



Payment Instructions

The contribution for coverage with the Pool is due upon receipt of this invoice.

We accept the following payment methods:

- Online using E-Bill Express (www.e-billexpress.com/ebpp/CSDPool). For detailed instructions, please click <u>here</u> or go to csdpool.org/documents. You can also find an FAQ <u>here</u> or go to the E-Bill Express logon screen.
- 2. Mail your check to:

Colorado Special Districts Property and Liability Pool c/o McGriff Insurance Services, LLC PO Box 1539 Portland, OR 97207

For express or overnight mail services, please use the address below:

Colorado Special Districts Property and Liability Pool c/o McGriff Insurance Services, LLC 1800 SW 1st Ave, Suite 400 Portland, OR 97201

To ensure that your payment is accurately applied, please always include a copy of the invoice.

3. Wire or ACH transfer from your own bank account. Please let us know if you wish to use this method and we will be happy to provide you with these instructions.

Please be advised that in accordance with the Intergovernmental Agreement (IGA), automatic expulsion will occur on the 60th day should your account not be current. If you wish to reinstate your district's coverage after cancellation has occurred, a \$100 reinstatement fee will apply.

If your district requires a payment extension, please submit a written request within ten (10) business days from the date of the invoice, for consideration by the CSD Pool Board of Directors.

Finally, all members of the Pool must be members in good standing with the Special District Association of Colorado (SDA). Please visit the SDA website at sdaco.org for member information.

Please contact us at billing@csdpool.org or 800-318-8870 ext. 3 for billing questions.