



CARDINAL COMP

Health Care (non-Home Health) Supplemental Application

Applicant Name:

Applicant Address:

List all combinable entities insured elsewhere?

What locations are unionized?

Non-Profit For Profit

Business Operations:

| | | |
|------------------|---------------------------|-----------------|
| Home Health | Substance Abuse | Assisted Living |
| Hospice | Mental Health Counselling | Paratransit |
| Physical Therapy | Crisis Response | Mental Illness |

Human Resources:

| | |
|-----------------------------|--|
| Physical Capabilities Tests | Post-Offer Pre-Placement Questionnaire |
| Criminal Background Check | |

What employee benefits are offered to new hires?

Participation % in Group Health Coverage:

Turnover rate for previous calendar year:

Any 1099 used without a Work Comp COI? Yes No

If yes, please provide details.

Estimated # of volunteer hours from the previous calendar year?

Is there an expectation of Work Comp coverage for these people? Yes No

If not, are any other coverages in place to address this exposure?

If the risk is an Assisted Living Facility (or similar operation), what % of clients have a Dementia diagnosis?

What additional controls are in place to address worker safety when treating this population?

What work is completed in the patient's home?

Will the insured engage / employ a relative of the client to provide services? Yes No

Safety Programs:

MVR checks? Pre-hire Yes No At least annually Yes No Other:

Frequency of Defensive Driving Training?
 Frequency of Patient Handling training?
 Frequency of Combative Patient Training?
 Frequency of your Safety Committee meetings?
 Frequency of Blood Borne Pathogen training?
 Formalized Accident Investigation in place? Yes No

EE Count by Class Code:

| | FT | PT | Average Wage |
|------|----|----|--------------|
| 8824 | | | |
| 8826 | | | |
| 8829 | | | |
| 8832 | | | |
| 8833 | | | |
| 8835 | | | |
| 9040 | | | |

Cost Containment Programs:

Formal Light Duty / Return to Work Program? Yes No
 How is light duty accommodated?

Drug Testing Program (check all that apply):

Pre-hire Post-Accident Random For-cause

Testing Method (check all that apply):

Saliva Blood Urine Hair

of drugs tested for:

What are your claim reporting practices to the insurance carrier?

To what extent do you self-handle claims?