



COVID-19: FREQUENTLY ASKED QUESTIONS

1. What is Business Interruption Coverage?

Business Interruption insurance is generally intended to cover losses from interruptions to a company's operations. Coverage is triggered if there is direct physical loss or damage to the insured premises that is caused by an insured peril (e.g. Fire). The scope of this coverage is standard and common in the insurance industry.

Upon review of the Business/Clinic Package policy under the CPA/CPAP program, there may be coverage for actual loss of business income caused by the interruption of business when access is restricted to the insured property, in whole or in part, by an order of a civil authority resulting from an outbreak of a contagious or infectious disease that is required by law to be reported to government authorities.

However a successful claim under this policy wording is dependent upon several conditions being satisfied all of which would be fact specific. Each claim will be assessed and interpreted on its own merits through the claims process. Should this coverage be afforded, it is restricted to actual loss sustained for a period of up to 30 days.

The policy also includes Negative Publicity Coverage to cover actual loss of business income sustained as a direct result of, among other things, an outbreak of a contagious or infectious disease within 25 kilometres of the insured premises and that is required to be reported to government authorities. Should this coverage be afforded, it is also restricted to actual loss sustained for a period of up to 30 days. However, given the widespread nature of COVID-19 it is unknown how the insurer will adjudicate coverage in these cases.

2. If I infect a client without knowing I have COVID-19 while rendering care and am sued, will my liability insurance protect me?

Professional Liability insurance (PLI) protects you against liability or allegations of liability for injury or damages that have resulted from a negligent act, error, omission, or malpractice that has arisen out of your professional capacity as a psychologist or if a complaint is made against you to your

regulatory College. PLI protects psychologists by ensuring that your legal defence is coordinated and paid for if a claim is made against you. Your PLI also covers the cost of client compensation, or damages.

A Claim means any demand upon the Insured for damages or services alleging liability of the Insured as the result of any "injury", act, error or omission. "Injury" includes bodily injury, sickness, or disease.

Upon review of the CPA/CPAP PLI Wording, there are no exclusions relating to transmission of a virus or disease from the insured during delivery of their professional services. However negligence on behalf of the Insured must be proven for a claim to be successful. There is also standard exclusions relating to claims arising out of, or attributable to any dishonest, fraudulent or criminal act by an insured.

3. Does my professional liability insurance policy follow me if I provide care by other means such as telehealth?

The CPA/CPAP PLI policy has no additional restrictions for psychologists delivering their professional services via telehealth, as long as the insured is acting within their scope of practice and licenced jurisdiction(s). Standard policy conditions apply. There are additional considerations for professionals utilizing technology. Please refer to the Virtual Health Care Services – Ensuring Continuity of Care article linked [here](#).

If you are transitioning your practice to telehealth it's recommended that you consider Cyber Security & Privacy Liability coverage.

4. What Cyber Security & Privacy Liability coverage is available through the CPA/CPAP Insurance Program, and what does it protect against?

CPA/CPAP members have access to a \$1M Cyber Security & Privacy Liability policy. This provides first and third party coverage, including but not limited to:

- Costs involved with a regulatory proceeding relating to the violation of a Privacy Law, including penalties (where insurable)
- Coverage for Business Interruption
- Coverage for “Cyber Extortion” incidents
- Third party liability for privacy breaches
- First Party data protection
- Website media content liability

Please visit www.psychology.bmsgroup.com for more information or contact BMS to speak to a broker.

5. Does my Clinic Professional Liability Insurance extend to cover claims related to telehealth services?

It’s recommended that Clinic Owners secure Clinic Professional Liability Insurance, which protects the business and its assets if the business is named in a professional liability claim.

This includes while employees of the business/clinic are delivering services via telepsychology. If your Clinic is named in a professional liability claim based on the telehealth services provided by your employees, you would report the claim and coverage would respond similar to if the services were delivered in person.

6. If my earnings are negatively impacted by this and I am required to stop working, do I have insurance to cover this loss of income under my Professional Liability policy?

Professional Liability Insurance (PLI) is designed to protect you against actual or alleged negligence while delivering your professional services as a psychologist, as well as to protect against complaints made against you to your regulatory College.

Under the PLI policy there is a Loss of Earnings endorsement. This is to provide you with up to \$1,000 per day to cover the expenses associated with taking time away from work to assist the Insurer in the investigation or defence of a claim.

For example, you have to attend court to defend yourself in a civil suit that’s been brought against you. In the scenario that you could potentially claim under the Loss of Earnings section of the policy.

7. I’ve decided to close my clinic indefinitely. Does my Business Package policy have any requirements in relation to how often our clinic will need someone to enter and inspect the premises?

Yes. Under the CPA/CPAP Business/Clinic Package policy there is an exclusion for property at locations which, to the knowledge of the Insured, are vacant, unoccupied or shut down for more than 30 consecutive days.

The insurer has confirmed that if a clinic owner shuts their operations but intends to open within 30 days, no changes to the policy are needed.

However, the insurer suggests that if the properties are not being occupied / operated out of, and if there has been no health/government authority advices to the contrary regarding being out in public, then it would be prudent to check on the property every 72 hours.

If the vacancy is planned to be longer than 30 days, which in this circumstance may be the case – it’s required that you contact BMS so that we can notify the Insurer of the extended vacancy.

8. How do I report a claim under the CPA/CPAP Insurance Program?

Please contact BMS directly at 1-855-318-6038 or psy.insurance@bmsgroup.com.

To report a claim under your Business/Clinic Package policy please contact Aviva at: 1-866-692-8482 or [online here](#).

9. What financial measures are in place to support individuals and small businesses during the COVID-19 pandemic?

The Federal Government has announced a range of measures to support Canadians and small businesses, including the Canada Emergence Response Benefit (CERB) and a 75% wage subsidy for qualifying businesses for up to 3 months, among others. [More information can be found here](#).

More information
 This is a summary and for general information purposes only. Full terms and conditions of the policy, including all exclusions and limitations are described in the policy wordings, a copy of which can be obtained from BMS Canada Risk Services Ltd. (BMS).