# **Rocky Mountain Risk Insurance Group**

PROCEDURE NO: F-6 DATE: November 11, 2020

## **Subject: CLAIMS MANAGEMENT PROCEDURES**

1. Claim administration duties, responsibilities, and services will be governed by this procedure for reporting Liability (General, Auto, Errors and Omissions), Property, Auto, and Workers Compensation Claims. These procedures may be amended from time to time.

- 2. For claims relating to Comprehensive General Liability, Auto Liability & Errors and Omissions Coverage (Employment Claims), the District will:
  - 2.1 Notify the Third-Party Administrator (TPA) within seven (7) days of the discovery of an event, accident or potential claim. The District will provide basic identification information to the extent possible and if applicable, including date of incident, who was involved, age, statement of facts, parents name, address, and telephone number. The District will attempt to obtain the name, address, and phone number of any potential witness at the accident scene.
  - 2.2 Notify proper authorities in the event of an auto accident.
  - 2.3 Not discuss circumstances surrounding events, incidents or injuries with persons other than school district personnel, representatives of the TPA, Rocky Mountain Risk Insurance Group administrative staff or law enforcement personnel.
  - 2.4 Not admit liability when an event occurs. If parents indicate they feel the District is responsible, the District will advise them that the matter was turned over to the insurance representatives and they will be in contact with the parents.
  - 2.5 Assist with the TPA investigation.
  - 2.6 Forward notices of intent to pursue a claim pursuant to the Governmental Immunity Act to TPA.
  - 2.7 Notify the TPA and/or Rocky Mountain Risk Insurance Group administrative staff of any event involving employment claims or errors and omission claims within (7) days of receipt of a potential claim.
  - 3. For claims relating to Property, the District will:
    - 3.1 Report by means of a Property Claim Report all losses that may potentially exceed the deductible within seven (7) days of discovery.

- 3.2 Notify authorities of the loss promptly and supply a copy of the police report or the police case number to the TPA
- 3.3 Take any steps necessary to reduce further loss, such as boarding up broken windows, mopping up wet floors, or hiring restoration/remediation company.
- 3.4 Utilize a contractor to begin immediate repairs in the event of an emergency where temporary repairs are not practical. The District will notify the TPA that repairs are being made.
- 3.5 Provide full and complete investigation assistance to the TPA.
- 4. For claims related to Workers' Compensation, the District will:
  - 4.1 To the extent non-emergency medical treatment is necessary, send the injured employee to a member district designated medical provider.
  - 4.2 Complete and forward to the TPA an Employer's First Report of Accident form (E-1) within 72 hours of a report of injury.
  - 4.3 Call the TPA immediately in the event of serious injury.
  - 4.4 Forward to TPA any Workers' Claim for Compensation forms or a notice of injury letters from an employee's attorney.
  - 4.5 Assist with the TPA investigation.
- 5. Pursuant to its contractual agreement with the Rocky Mountain Risk Insurance Group, the TPA shall provide claims administration services for all claims submitted by the member Districts as follows:
  - 5.1 Review all claim reports for events, accidents, illnesses and injuries.
  - 5.2 Process claims in accordance with applicable statutory and administrative regulations.
  - 5.3 Investigate of each reported claim, which may include the use of independent investigators or medical or other experts to the extent deemed necessary by the TPA and with prior approval by the member District. Reasonable costs of investigators and/or experts shall be charged against the individual claim file as allocated loss adjustment expense.
  - Pay on behalf of the member Districts medical and death benefits, temporary and permanent disability compensation, liability to third parties, property damage, and other expenses for claims. Workers Compensation medical bills will be paid at the lesser of the agreed network provider rate, if applicable, the medical industrial fee schedule or billed charges. The TPA shall also pay on behalf of the member Districts such other benefits or expenses

- related to claims. These payments will be made in accordance with the above payment requirements.
- 5.5 Maintain a physical and/or electronic file for each claim, which shall be available for review by the Rocky Mountain Risk Insurance Group and the member Districts during normal business hours upon reasonable notice. Electronic read-only access to the database will be provided to each member District and the Rocky Mountain Risk Insurance Group.
- 5.6 Maintain a current estimate of the expected total cost of each claim. Reserve change rationales will be documented in the adjuster's notes.
- 5.7 Initiate personal contact by phone or in-person with the injured worker or claimant within one business day of receipt of the first notice of loss.
- 5.8 For workers compensation, maintain personal contact by telephone or in-person through the adjuster with temporarily disabled employees, no less frequently than every two (2) weeks to maintain rapport and to monitor medical progress and return to work status. For other claims telephone or in-person contact will be maintained on an appropriate basis for the circumstances involved, but no less than monthly.
- 5.9 Furnish all appropriate renewal application forms, and if mutually agreeable to the parties, file all periodic reports and renewal applications required by State administrative agencies to maintain the self-insurance Workers' compensation program.
- 5.10 Promptly respond to reasonable requests for data and assistance in sampling surveys as requested.
- 5.11 Take all steps necessary to safeguard any data, files, reports, or other information from loss, destruction, or erasure.

#### 6. Settlement Authority:

\$0-\$10,000 TPA discretion for settlements after consultation with impacted District. TPA will notify the District and Rocky Mountain Risk

Insurance Group Administrator.

\$10,000-\$50,000 The Rocky Mountain Risk Insurance Group Administrator shall approve such payment after consultation with, and agreement by, the impacted District's Management Advisory Council member. It is recognized that some Districts may have different operational guidelines for making determinations for settlement purposes. In those cases, the District shall discuss matters internally for settlement recommendations; and provide such information to their respective

Management Advisory Council Member who then will present the District's position in respect to settlement.

Over \$50,000

Any settlement must be reviewed by the Management Advisory Council and recommended by the impacted District prior to approval by the Board. Under normal circumstances, settlement authority requests will be presented at scheduled Management Advisory Council meetings (typically held the first Thursday of every month) and Board meetings (typically held the second Wednesday of every month). In the event of the need to obtain an emergency settlement authority before the next scheduled meeting, TPA will submit the settlement authority request to the Rocky Mountain Risk Insurance Group Administrator. Informal approval by a quorum of the member districts, including the impacted District, will constitute approval of the settlement, subject to formal ratification at the next scheduled Board meeting.

### 7. Reporting to Excess Carrier

The Rocky Mountain Risk Insurance Group Administrator or TPA is required to notify the Rocky Mountain Risk Insurance Group' excess insurance carrier as soon as practicable of:

- a. Any event for which loss and/or expense is likely to be equal to or greater that fifty percent (50%) of the applicable self-insured retention;
- b. Any event involving and of the following:
  - (1) Fatality;
  - (2) Amputation;
  - (3) Serious burns;
  - (4) Paralysis;
  - (5) Head injuries involving brain damage;
  - (6) Spinal injury;
  - (7) Multiple fractures;
  - (8) Loss of Sight;
  - (9) Employment practices;
  - (10) Actual or alleged criminal conduct by any District, its agents, employees, or board members;
  - (11) Discrimination;
  - (12) Violation of civil rights; or
  - (13) Land use matters.
- c. Any event, claim, or suit that a District could reasonably believe is covered by Part A-Specific Excess Insurance in the Declarations and could exceed the applicable self-insured retention.
- d. Any suit filed as a class action.

The notice provided by the Rocky Mountain Risk Insurance Group or the TPA regarding the above matters should include:

- 1. How, when and where the event took place;
- 2. The names and addresses of any injured persons and witnesses; and
- 3. The nature and location of any injury or damage arising out of the event.

For any event reported to the excess carrier, the Rocky Mountain Risk Insurance Group Administrator or TPA must:

- 1. Immediately send the carrier copies of any demands, notices, summons or legal papers received in connection with the claim or suit;
- 2. Authorize the excess carrier to obtain records and other information;
- 3. Cooperate in the investigation, settlement or defense of the claim or suit; and
- 4. Assist, upon the request of the excess carrier, in the enforcement of any right against any person or organization which may be liable to any member District for any loss to which the excess insurance coverage may also apply.

#### 8. Conflict Resolution

- a. In the event of any conflict as to the interpretation or application of the terms, definitions, or conditions in this procedure, such conflict shall be resolved or clarified pursuant to the terms and definitions contained in the excess insurance policy for the Rocky Mountain Risk Insurance Group and its members.
- b. In the event of any disagreement or conflict between the TPA, any member district, and/or the Rocky Mountain Risk Insurance Group in connection with the interpretation or implementation of the Claims Management Procedures set forth herein, the parties to such disagreement or conflict agree to cooperatively discuss the issues presented with the intent of reaching a mutually-agreeable resolution. If a mutually-agreeable resolution cannot be reached, the Rocky Mountain Risk Insurance Group Administrator shall present the issue to the Management Advisory Council which shall make a recommendation to the Rocky Mountain Risk Insurance Group Board for a decision to resolve the matter, which decision shall be final.