

(Revised –10/21/2014)

Client Instructions – General Liability/Civil Rights Claims

ORM Internal Authority Designation

Lisa Fullington and Sherry Price will be the primary contact persons on all general liability/civil rights claims. Lisa Fullington will be responsible for all requests from FARA Adjusters under the Supervision of Terrie Raffety and additionally Julian Ford who is supervised by Tanzleda Vinnett. Sherry Price will be responsible for all requests from FARA adjusters under the Supervision of Tanzleda Vinnett excluding Julian Ford. ORM Supervisors will be responsible for handling the RSA process, approval of payments in excess of \$25,000, request for an attorney appointment, request for a contract amendment, and request for reserve increases, etc. If the request is above ORM Supervisor's authority level, they will route it to the appropriate person within ORM. Please copy Jimmy Meaux on all emails to Lisa Fullington and Sherry Price. If ORM Supervisor is out of the office, Jimmy Meaux will handle your requests. Contact information is as follows:

Lisa Fullington – (225) 342 8432 - lisa.fullington@la.gov

Sherry Price - (225) 342 8438 – sherry.price@la.gov

Jimmy Meaux – (225) 342 8433 – Jimmy.Meaux@la.gov

GENERAL

EMAIL COMMUNICATION BETWEEN FARA AND ORM Always include the FARA claim number and the name of the claimant in the subject line. If there is a critical date or some urgency, flag as high importance and add in subject line such as “Trial date___ or Follow-up to RSA or Contract Amendment.

General Liability Claims Handling Guidelines

iCE claim coding ORM Claim Number: The date of loss alleged in the incident/lawsuit determines the ORM claim number. Two digit fiscal year (07/01/13-06/01/14) is 14, the number would be 14G two digit month and day of loss, first two letters of injured party's last name and 4 numbers assigned at random.

The claim is set up in the name of the injured party, coded as self, deceased, minor, other which could be parent, trustee, etc. Note should be made of the name of the filing party and the relation to injured party.

Location code should be the four numbers at the lowest level of the facility named in the petition. Use the L number that corresponds to the facility, not the S number.

- Personal or telephone contact by the FARA adjuster must be made with the claimants on all cases within one (1) business day of receipt of the claim.
- Contact by mail will suffice only in those instances where personal or telephone contact is not possible.
- Medical releases and copies of all pertinent medical records should be requested and evaluated by FARA.
- Personal or telephone contact must be made with the agency personnel having knowledge of the claim within two (2) business days following receipt of the claim.
- FARA adjuster shall send contact information and FARA claim number to agency personnel via email for future communications.
- Recorded statements must be taken from the claimant and all witnesses in all cases where there is injury or where liability is questionable. Reasons for not obtaining a recorded statement must be explained in the claim file notes.
- Police reports and B.A.C. test results will be obtained when appropriate.
- FARA will report all bodily injury claims to ISO/the Index Bureau, as soon as possible and make repeat queries on long term claims to identify and accidents that may have occurred after the subject claim.
- FARA will utilize economic experts when necessary to evaluate economic damages and will retain other experts as needed to properly defend and evaluate the claim.
- The State will contract with the experts identified by FARA and/or the assigned defense counsel.
- **ORM is to be notified immediately if the exposure assessment or demand exceeds \$100,000.00 for all non-litigated claims.**

RESERVES:

Initial reserves must be established within seven (7) calendar days of the receipt of the claim. Initial reserves are to be reviewed within 60 days after receipt of the claim as more is known about the claim.

ORM reserve authority is needed to increase reserves with a total incurred reserve of \$100,000 or greater. Subsequent reserve increases shall require approval by ORM. Email requests for reserve approval should reference “**reserves**” in the subject line.

Reserve requests shall be sent to assigned ORM supervisor and Jimmy Meaux for action. If the reserve request is above their authority, they will route it to the appropriate person within ORM for approval. Reserve requests shall include reasons for the increase. Reasons for changes to reserves shall be placed in the claim management system.

ORM reserve authority is not required for the following reserve changes nor should these be included on the monthly reserve report:

- **A decrease in the reserve where the total incurred is over \$100,000.**
- **Funds are shifted from one reserve category to another, but the total incurred amount is unchanged.**
- **Reserve adjustments/reallocations that occur within the same month that results in no change to the total incurred amount.**

RETROSPECTIVE RESERVE AUTHORITY

There will be instances when it will be necessary for FARA's ICE system to automatically generate reserve increases to accommodate certain transactions. This includes system generated and/or la ORM operator reserve changes. It will be necessary for FARA to obtain retrospective reserve authority in these situations.

At the end of each month, FARA will prepare a Generalized Claim Export for Reserves. No later than the 10th day of the month following the month of the increase, FARA will seek retrospective approval for reserve changes they have identified where the total incurred amount exceeds \$100,000 and ORM approval was not obtained. See exceptions noted above in bold. Individual requests noting justification for the increase must be submitted to ORM and should include the date the reserve was changed, and should request retrospective approved by ORM.

For System Generated Reserve changes on claims that are "closed", the adjuster shall reopen the claim, review the claim documentation and appropriateness of reserves, and submit a separate email requesting reserve authority if the total incurred is over \$100,000. Note, when the file was closed reserves were reduced to the total paid. Therefore, when the claim is reopened, new reserves must be established.

For System Generated Reserve changes on "open" claims, ORM will grant blanket retrospective authority for those claims listed on the respective monthly report. This retrospective authority shall be noted by FARA in each of the retrospective claim files identified. Additionally, it is expected that the assigned adjuster will review the claim to determine appropriate reserves and request updated authority to avoid future deficiencies.

PETITIONS RECEIVED ON EXISTING NON-LITIGATED CLAIM

When a Petition for Damages (lawsuit) on an existing non-litigated claim is **received** by FARA, it must be promptly referred to ORM for processing the request for assignment of defense counsel with the AG. ORM will complete the required Appointment and Contract Approval Form and submit it to the AG for appointment of counsel. If the AG appoints an in-house AAG, no concurrence from ORM is required. A copy of the Appointment will be sent via email to the FARA adjuster. If the AG appoints contract counsel, the Appointment is returned to ORM for the concurrence of the Assistant Director for Litigation Management and the State Risk Director. Afterwards, a copy is returned to the AG for their records and ORM contracts will issue a professional services contract to the

appointment counsel. The FARA adjuster will receive a copy of the Appointment from ORM Contracts for their records. Expense reserves should reflect at least, the amount of the legal contract.

Upon notification of the assigned defense counsel, the FARA adjuster should contact counsel within seven (7) working days to discuss the case and develop a plan of action for defending the allegations contained in the petition.

DIARY

Litigated claims must be maintained on a diary to ensure that required reports are received from the defense counsel defining the status of the litigation and the plan for resolution of the litigation. At a minimum, the FARA adjusters should establish diary dates for the following:

- Initial Case Assessment – 60 days from date of counsel acceptance/assignment
- Six Month Case Assessment – 180 days from date of counsel assignment
- Ninety Days Prior to Trial – RSA due from assigned counsel

SETTLEMENTS

A release and receipt must be secured on all bodily injury claims and third party damage claims upon settlement – Regardless of the amount of settlement (excluding “glass only” when damage is less than \$500)

- Releases should be obtained on all injury claims and property damage claims where liability has been disputed.
- **“Glass only” damage claims of up to \$500 do not require a release. If there is property damage other than glass, a release must be obtained.**
- All settlement requests over \$25,000 must be approved by ORM and the AG.
- Settlement requests above \$250,000 require approval by ORM, the Attorney General and the Commissioner of Administration.
- Settlement Requests of \$500,000 and above require the approval of ORM, The Attorney General, the Commissioner of Administration and the Joint Legislative Subcommittee on the Budget.

LITIGATED SETTLEMENTS AND JUDGMENTS:

- All litigated claim settlements and judgments require the submission of an RSA and ORM approval. FARA will be notified in writing of the decision on the requested authority.
- Settlements above \$25,000 require ORM and AG approval.
- Settlement requests above \$250,000 require approval by ORM, the AG and the Commissioner of Administration.

- Settlement Requests of \$500,000 and above require the approval of ORM, the AG, the Commissioner of Administration and the Joint Legislative Subcommittee on the Budget.

CHECK REQUESTS FOR SETTLEMENTS AND JUDGMENTS

- The file should be documented with the amount of each settlement check requested and the payee information.
- Each Client Authority Request should include the settlement/judgment payment authority documentation.
- Client Authority Requests shall be sent to assigned ORM supervisor for action. Please copy Jimmy Meaux on all client Authority Requests.

If the Client Authority Request is above her authority, ORM Supervisor will route it to the appropriate person within ORM for approval

Third party property damage claims, in cases of liability, at least two estimates must be obtained from the claimant for damages estimated below \$1500.00. Damages estimated to be \$1500 or greater must be inspected by a material damage appraiser. In both cases, a copy of the vehicle registration and proof of insurance will be required. Note: Property damage to privately owned vehicles not involved in a collision with a State owned licensed vehicle still requires verification of liability insurance. Liability insurance must be current as of the date of loss at or above the State required minimum coverage, per Act 1476 of 1997 Regular Session found in R.S. 32:866.

Third party vehicle damage claims for “glass only”, where liability is clear, such as agency personnel grass cutting or weed eating resulting in thrown rocks at parked vehicles, are submitted by the agencies on the DA2073 (Vehicle Glass Repair/Replacement Loss Notice) directly to FARA at claimopening@fara.com

Civil Rights cases, the FARA adjuster must contact the Human Resource (HR) department of the named agency to obtain a copy of any investigation in all employment liability cases. Wages and benefits are to be verified in all employment liability cases. Payments of lost wages and benefits are the responsibility of the named agency as they are excluded from the State Insurance Policy Provisions. FARA must provide a method to work with the agency.

MEDICAID LIENS:

- The adjuster or defense counsel (if case is in litigation) must obtain information as to whether or not the claimant is a Medicaid recipient.

- Obtain the claimant's date of birth and social security number. The MRP requests and/or petition need to be attached to this request.
- When DHH asserts a claim for reimbursement as the result of Medicaid payments, DHH will negotiate directly with ORM when seeking reimbursement.
- ORM may delegate the negotiation of Medicaid reimbursement claims to defense attorney.
- DHH will not negotiate with the plaintiff or plaintiff's counsel.
- **The assigned ORM CGL Supervisor** will handle the negotiations with DHH after the amount claimed has been determined. Notify the assigned ORM CGL Supervisor of Medicaid payments as soon as possible to allow enough time for a thorough review of the pertinent records to identify related charges relative to the claim. Please provide the assigned ORM CGL Supervisor a copy of the petition or the accident report with your requests.
- Communicate Medicaid payment amounts to defense counsel and make certain it is included in the RSA. Medicaid lien amounts must be indicated on all FARA Settlement Evaluation Forms.
- ORM will negotiate the final amount of the Medicaid reimbursement claim and this amount will be included in settlement authority granted.

MEDICARE LIENS:

- Medicare's interests must be protected as they are considered a Secondary Payor.
- Medical bills paid by Medicare must be considered for reimbursement in any settlement.
- When the claim is first received the adjuster should request the claimant's date of birth and Social Security Number or HICN from the plaintiff attorney or pro se' plaintiff.

If the needed information is not voluntarily provided, the information should be obtained by counsel through discovery.

FUTURE MEDICAL CARE FUND:

- Settlements and judgments on bodily injury claims may include an award for future medical care. R.S. 39:1533.2 authorizes that the funds be paid directly to the medical provider as the expenses are incurred pursuant to R.S. 13:5106(B) (3) (c). Specific language should be included in all settlements and judgments that reference amount allocated for future medicals.
- Once the agreement is reached or there is a final judgment, the FARA adjuster handling the claim will send a letter to the plaintiff attorney with instructions as to the handling of future medicals that are payable from the date of settlement forward.
- FARA has copies of the standard letter regarding payment from the Future Medical Care Fund.
- Sandy Pittman at FARA handles all future medical payments. A copy of the settlement/judgment and information regarding the injuries involved should be sent to her at Sandy.Pittman@fara.com telephone number is (225) 448-0367.

Non-Litigated Claims Excluding DPS and DOC Claims

FARA will have the authority to settle all claims up to and including twenty-five thousand (\$25,000) per claimant without the approval of the State (ORM or DOJ).

For settlements over twenty-five thousand (\$25,000) per claimant, FARA must submit a Settlement Evaluation Request to ORM for approval prior to extending the settlement. In addition, The Attorney General Settlement Concurrence Form for Non-Litigated Claims must be approved by the AG and attached to the FARA claim file before a settlement check request can be approved by ORM.

Settlement of claims for DPS and DOC is covered in another section of the client instructions as authority to settle cases for these departments differs from the norm.

Litigated Claims Excluding DPS and DOC Claims

All litigated claims require the submission of an RSA and ORM approval. FARA will be notified in writing of the decision on the requested authority.

Settlements over \$25,000 must be approved by ORM and the AG, settlements above \$250,000 must be approved by the Commissioner of Administration, and for claims settlements of \$500,000 and above, approval of the Commissioner of Administration and the Joint Legislative Subcommittee on the Budget is required.

Settlement of DPS and DOC claims is covered under another section of the client instructions.

CONSTITUTIONAL CLAIMS CHALLENGING MEDICAL MALPRACTICE STATUTES

Lawsuits containing allegations that the following Medical Malpractice statutes are unconstitutional will be handled as General Liability Claims. Third supervisor will be listed as Jimmy Meaux.

R.S. 40:1299.39 STATE OF LOUISIANA AND R.S. 40:1299.41 PATIENT'S COMPENSATION FUND

CONSTITUTIONAL CLAIMS (PCF AND ORM) "Y" Claims

Constitutional Challenges to the Statutory Limit on Damages for Medical Malpractice Cases

For non-state challenges:

The Office of Risk Management entered into an agreement with the Office of the Attorney General to provide defense for allegations involving the constitutionality of the private medical malpractice statute's limitation of damages to \$500,000. The statute is Louisiana Revised Statute 40:1299.41, et seq. handled by the Patient's Compensation Fund.

The suit is received from the Office of the Attorney General following service. A claim is set up with coverage code 9001 and location code 9900. Only a legal reserve is established for \$5,000.00. No further reserves are needed.

ORM supervisor will send the file materials and a transmittal to the Attorney General's office for appointment of defense counsel. A cover for the materials is in the form of an Appointment and Contract Approval Form. **A long term diary of six (6) months is recommended due to the fact that the movement of the case is directly connected to the Patient's Compensation file.**

The files emanating from south Louisiana will be assigned by the Attorney General to J. Elliott Baker in Covington. Files emanating from north Louisiana will be assigned by the Attorney General to David Nelson in Shreveport.

The attorneys are to contact the plaintiff attorneys to determine if they are in agreement to the State intervening in the suit and filing a motion to bifurcate the merits from the constitutional issues. If there is mutual agreement, our attorney will file the appropriate motions with the court. If there is not an agreement, the defense attorney will file the motions and set them for hearing.

Following intervention and bifurcation, there remains only to wait until/if the case goes to trial and a judgment is awarded in excess of the \$500,000 statutory limit for damages. At that point, one of the two designated defense attorneys (Mr. Baker or Mr. Nelson) would file pleadings contesting a judgment in excess and petition for that judgment to be reduced to the "cap". There may be a Sibley hearing in conjunction if the judgment is not reduced. A Sibley hearing is a separate action involving the constitutionality of the \$500,000 statutory limit. Actuarial and economic experts are needed as the matter is brought before the courts.

If the plaintiff settles the case for an amount less than the \$500,000 cap or a judgment is rendered for less than the statutory limit; or if there is dismissal on abandonment, or a motion for summary judgment to dismiss, or voluntary dismissal, Attorneys Baker and Nelson will merely close their files. A Contract Performance Evaluation must be completed by the FARA adjuster and submitted to Lucille Gautreaux at Lucille.gautreaux@la.gov

For State challenges:

As part of cases involving State health care providers, a post-panel suit may contain allegations that the State statute's regarding limitation of damage to \$500,000 is unconstitutional. The statute governing medical malpractice coverage for State healthcare providers is Louisiana Revised Statute 40:1299.39 et seq.

There should be a medical malpractice claim already in the ORM/FARA database.

The instructions for handling a State constitutional challenge are exactly the same as those for non-State constitutional challenges beginning with the second paragraph in the previous section of instructions where a separate attorney must be assigned to defend the constitutional allegations..

The only exception is that on State cases, Mr. Baker or Mr. Nelson will work in conjunction with the previously assigned defense attorney who is handling the merits portion of the State medical malpractice file.

Monitoring of files defended by other insurers

Considering the necessity for attorneys to monitor cases that are defended by other insurers, defense counsel should be appointed initially, and their involvement in the claim would be dictated by the situations outlined below:

- I. In such situations, three events should be evaluated:
 - A. The state's demand to the insurer to provide defense and indemnification
(and the response to such demand).
 - B. The actual filing of responsive pleadings
 - C. The policy limits of the insurer

- II. The state will make demand (tender) to the insurer to provide defense and indemnification. We must evaluate and document the response to this demand:
 - A. If the response is a denial of the request, then AG/ORM defense counsel will file responsive pleadings on behalf of the state defendant, and potentially assert a third-party demand against the insurer demanding defense and indemnification. At this juncture, we know *the state has potential exposure on the claim.*

- B. If the response is a reservation of rights letter, then we would also *know the state has potential exposure on the claim*. Depending on the response and the issues involved, AG/ORM defense counsel may need to enroll as co-counsel, but would at least monitor the file to insure the state's interest is protected.
 - C. If the response of the insurer is acceptance of defense and indemnification, then the state *may have no exposure*. Proceed to III below.
- III. If the insurer accepts the defense and indemnification of the case (*as in II. C above*), AG/ORM defense counsel should review the actual filing of responsive pleadings by the insurer, to confirm that an appropriate appearance has been made on behalf of the state. (This would confirm that the pleadings reflect the insurer's unqualified acceptance of defense and indemnification).
- A. If an appropriate appearance has not been made on behalf of the state (i.e., responsive pleadings are not filed to protect the state's interest), communication with the insurer is needed (AG/ORM defense counsel should confer with the insurer's counsel) to reconcile the insurer's acceptance of defense and indemnification with the lack of an appropriate responsive pleading. If appropriate responsive pleadings are not timely filed on behalf of the state, the state *would have potential exposure*, and AG/ORM defense counsel may need to enroll as counsel or co-counsel to protect the state's interest.
- IV. Finally, the policy limits of the insurer should be verified, and evaluated in light of the allegations of the petition. In the event plaintiff's alleged damages may exceed the insurer's policy limits, the state *would have potential exposure*. AG/ORM defense counsel would continue to monitor the case to protect the state's interest.
- V. In the event the state has no potential exposure (as a result of the above considerations), no further monitoring of the file is needed.

CLAIMS COUNCIL:

- A “Settlement Evaluation/Claims Council Review Form” is required on all cases presented to ORM Claims Council.
- Settlement requests over \$200,000 require the approval of Claims Council at ORM. The FARA adjuster may present the case in person or by telephone.
- The following items require Claim Counsel approval with participation by Joe Roussel and written concurrence of the DOJ Senior Counsel to the Attorney General:
 - Requests for stipulation to liability
 - Requests to waive a jury trial
 - Authority to proceed to trial without any monetary authority
 - Request to forego an appeal/writ.
 - Request to file appeal or writ.
 - Request to remove or remand a suit from one jurisdiction to another.
- If the settlement amount requires approval from the Attorney General or other parties, ORM will coordinate that approval process and notify FARA of the final settlement authority.

HANDLING OF DPS – PUBLIC SAFETY SERVICES CASES

Litigation received from DPS&C – Public Safety, herein referred to as DPS, include an OLA Assignment Form. DPS attorneys within the Office of Legal Affairs monitor their tort litigation. This form will list the name and contact information for the DPS-OLA monitoring attorney. The form requests that adjuster and defense counsel be completed and returned to DPS - OLA. It is imperative that this be accomplished. In addition, the FARA adjuster and the assigned defense counsel need to communicate with the assigned DPS-OLA monitor and keep them apprised of developments in the case.

All settlement requests for litigated tort claims for any agency within DPS&C – Public Safety Services must be submitted to DPS – Office of Legal Affairs for review, approval and input. **If approval and/or input is not received from DPS – Office of Legal Affairs within 5 working days, FARA is to submit the RSA to ORM for processing.** FARA will be notified in writing of the authorized settlement authority. If the settlement amount requires approval from the Attorney General or other parties, ORM will coordinate that approval process and notify FARA of the final settlement authority.

Settlements for non-litigated claims for DPS&C must be submitted to ORM for review and approval. If the settlement amount requires approval from the Attorney General or other parties, ORM will coordinate that approval process and notify FARA of the final settlement amount.

HANDLING OF DPS&C – CORRECTIONS CASES

PRISONER CASES

Non-litigated prisoner claims are received directly from the DPS&C – Corrections, referred to herein as DOC.

Any claim received directly from a prisoner shall be returned to DOC for processing.

A copy of the Administrative Remedy Procedure (ARP) file must be obtained from DOC along with any investigative material for claims filed by prisoners. The ARP file should be reviewed by the FARA adjuster for completeness of cited medical records, statements of witnesses, guards, etc. The record may be supplemented during the investigation at the ARP level. Once the ARP is submitted to the Court, it cannot be supplemented. Court decisions on prisoner claims are made based on the ARP record as submitted. No outside evidence may be added.

All settlements of prisoner claims, whether or not in litigation, must be submitted to ORM with a Request for Settlement. FARA shall solicit input from representatives of the DOC prior to submitting their requests to ORM. **If DOC has not responded within 5 working days then FARA will submit the RSA or non-litigated settlement request to ORM.** ORM will notify FARA in writing of the authorized settlement amount. If the settlement amount requires approval from the Attorney General or other parties, ORM will coordinate that approval process and notify FARA of the final settlement authority.

DOC NON-PRISONER CASES

All settlements of non-prisoner claims (excluding minor claims such as windshield, other property damage and BI), whether or not in litigation, must be submitted to ORM with a settlement request form. FARA will solicit input from representatives of the DOC. If DOC has not responded within 5 working days then FARA will submit the RSA or non-litigated settlement request to ORM. ORM will notify FARA in writing of the authorized settlement amount. If the settlement amount requires approval from the Attorney General or other parties, ORM will coordinate that approval process and notify FARA of the final settlement authority.

RSA PROCESS:

Upon receipt of an RSA the FARA adjuster will closely review the RSA to ensure that all important elements of the claim and the defense are thoroughly covered, as well as to ensure that all sections of the RSA are properly completed. Please ensure that the current

version of the RSA is being used by the defense attorney. Should the information in the RSA be incomplete, incorrect or lacking certain elements of defense preparation, the FARA adjuster will communicate directly with the assigned defense counsel to seek additional information. A copy of this query will be sent to LitigationRSA@Ag.State.La.Us and the assigned ORM Supervisor and Jimmy Meaux. A completed FARA Settlement Review Form with recommendations and the RSA shall be submitted to ORM within 10 calendar days of FARA's receipt of an RSA.

Should a critical date be looming soon after receipt of an RSA needing either correction or supplementation, the adjuster is to send the deficient RSA on to ORM with a label indicating that further information has been requested. This will allow ORM to commence its review in light of the critical date.

All assigned defense counsel (AAG staff attorneys and contract attorneys) shall submit a RSA in accordance with the guidelines established by the Litigation Program of the Department of Justice and ORM. RSA should be reviewed and submitted to ORM within 10 calendar days of receipt. In the event of exigent circumstances, the RSA must be submitted to ORM in sufficient time for ORM to evaluate and take action on the request.

RSA's prepared by an AAG should include comments from the section chief and then routed to the FARA adjuster. The FARA adjuster will review the RSA; provide an email which includes their comments regarding the proposed settlement, a "FARA Claims Council Review Form" (Exhibit 12), then forward to the assigned or Supervisor for disposition. After the ORM review process, ORM's comments/recommendations and RSA and Claims Council Decision form, where required, will be emailed to the AG via Wanda Hebert at LitigationRSA@Ag.State.La.Us for the AG approval process. Upon approval by the AG, they will notify FARA and ORM as to the approved authority. Settlements \$500,000 and above are not final until approval has been granted by the Commissioner of Administration and the Joint Legislative Subcommittee on the Budget. ORM will coordinate these approvals. No further action for settlement will be taken by FARA until all required approvals have been obtained.

RSA's prepared by contract counsel will be sent to the assigned FARA adjuster. The FARA adjuster will review the RSA and provide a completed FARA Settlement Review Form with recommendations, then forward to the assigned ORM Supervisor for disposition. After the ORM review process, ORM's comments/recommendations and RSA and Claims Council Decision form, where required, will be emailed to the AG via Wanda Hebert at LitigationRSA@Ag.State.La.Us for the AG approval process. Wanda Hebert will notify FARA and ORM as to the approved authority. Settlements \$500,000 and above are contingent upon the approval of the Commissioner of Administration and the Joint Legislative Committee on the Budget. Attendance by a FARA representative is mandatory. ORM will coordinate these approvals and notify FARA accordingly. No action for settlement will be taken by FARA until all required approvals have been obtained. Upon final approval by all required parties it will be FARA's responsibility to notify contract counsel of the approved action.

NEGOTIATION TRACKING:

Once settlement authority has been approved at all appropriate levels, the adjuster shall send a copy of the “Mediation-Negotiation Summary”(Exhibit #13) to defense counsel along with a written request that all offers, counter-offers and settlements be recorded on the “Mediation-Negotiation Summary” form and that the form be updated with each offer and counter-offer. Defense counsel should inform the adjuster of each offer and counter and the latest information should be posted in ICE by the FARA adjuster. If a claim is settled or negotiations end, the defense counsel shall send a completed copy of the “Mediation-Negotiation Summary” to the FARA adjuster. The FARA adjuster will review the form, update the Litigation Offer Section in ICE and attach the completed form in ICE. Throughout, this process, the FARA adjuster should maintain a diary for follow-up

SETTLEMENT AUTHORITY WITH MEDIATION

At mediation, the adjuster shall complete a copy of the “Mediation Summary” (Exhibit #10). Upon conclusion of mediation, the adjuster shall update the Litigation Offer Section in ICE to include all offers, counter-offers and settlements and attach the completed form in ICE.

SETTLEMENT AUTHORITY WITHOUT MEDIATION

When defense counsel is given monetary authority without mediation authority, the FARA adjuster shall inform defense counsel that authority has been granted using the following e-mail format.

Per the authority granted by ORM and concurred upon by the Attorney General’s Office, you now have settlement authority in the amount of ... (describe monetary authority granted, as well as any non-monetary authority granted: this would include any authority regarding individual plaintiff offers, Medicare and other liens, Medicaid reimbursement claims, future medical expenses payable through the Future Medical Care Fund, stipulations as to the existence of a duty and a breach thereof, waiver of a jury trial, participation in mediation, proceeding to trial, etc.....)

Unless particular circumstances or your granted authority dictate otherwise, please extend an offer in a timely manner. You must advise and update your adjuster re: any offers or counter-offers extended, counter-offers received or reasons for withholding any offers, as negotiations progress, but in any case no later than 30 days from receipt of this e-mail. It is vital that all offers, counter-offers and settlements are reported to the FARA adjuster as negotiations progress. This information is critical to the completion of ORM’s bi-annual reports to the Legislature.

Your cooperation is appreciated.

The FARA shall create a 30-day diary to follow-up on the e-mail and add additional diaries to obtain the latest information on negotiations until the case is resolved or negotiations are discontinued.

The FARA adjuster shall enter all offers, counter-offers and settlements in the Litigation Offer section in ICE. This information is critical to the completion of ORM's bi-annual reports to the Legislature.

CATASTROPHIC CLAIMS

Immediate notification by telephone to the ORM Claims Administrator shall be made in all cases involving catastrophic injuries or damages.

RESERVATION OF RIGHTS LETTER

Reservation of Rights letters must be discussed and approved by the assigned ORM Supervisor prior to sending. When it has been determined that there are allegations in a lawsuit that are not covered under the policy, a reservation of rights letter must be sent to the following persons advising them as to the reason for non-coverage:

- The "head" of the insured state entity, agency or department named as a defendant in the petition or complaint
- Also, any individual state employee named as a defendant in the petition or complaint
- A courtesy copy should be sent to the general counsel of the state entity, agency or department named as a defendant in the petition or complaint.
- Finally, a copy should be sent to the assigned defense counsel.

The reservation of rights letter should be sent out no more than thirty (30) days from receipt of the new lawsuit. The FARA adjuster will draft the reservation of rights letter and submit it to the assigned ORM Supervisor for approval prior to it being sent to the involved party. **The reservation of rights letter must be sent by certified mail, return receipt requested.** The FARA Supervisor will establish a diary system to confirm that the signed return receipt is returned and attached to the ICE file.

Following are the two forms for the reservation of rights letters that should be utilized:

FORM A

This form is to be used when the primary claims asserted in the petition/complaint sound in tort. This letter provides the option of the defendant allowing the AG/ORM appointed

counsel to defend all claims asserted (in this instance, the non-tort allegations are incidental to the tort demands).

Date:

(Agency/employee)

RE:

Dear _____:

FARA Insurance Services is the third party administrator for the State of Louisiana, Office of Risk Management. We are in receipt of the above-referenced lawsuit, in which you are a named defendant. In review of same, please be advised that the Office of Risk Management provides a policy of liability coverage that was in force at the time of the alleged incident. While there are certain allegations contained in the petition/complaint that obligate ORM to defend and potentially indemnify you, other allegations contained in this pleading, and claims asserted therein, are not covered by any liability policy provided by ORM.

ORM provides coverage (defense and potential indemnification) for tort claims only. It does not provide coverage for claims of declaratory, injunctive or other equitable relief, claims for back pay, front pay, loss of overtime or employment benefits, punitive or exemplary damages, civil penalties, contractual or quasi-contractual claims and other matters. Any money judgment rendered against you on the basis of such claims would be your sole responsibility.

The Attorney General, with ORM's concurrence, will appoint legal counsel to defend the asserted tort claims.

With respect to claims in tort, ORM does not provide coverage for intentional acts, or for acts resulting in injury that is expected or intended from the standpoint of the insured. Additionally, coverage is not provided in the event any alleged tortious conduct is found to have been outside the course and scope of employment with the state. The Office of Risk Management will defend you with respect to such tort claims. However, in the event any alleged wrongful conduct is found to be intentional, or found to be outside the course and scope of employment with the state, you may receive no indemnification pursuant to the terms of the policy. Thus, any money judgment rendered against you under these circumstances would be your sole responsibility.

You may wish to retain your own counsel, at your expense, to represent your interests in connection with the non-covered claims. Alternatively, you may choose to have such

claims defended by the attorney designated by the Attorney General's Office and ORM to represent you in connection with covered claims. However, the Office of Risk Management will not be responsible for the payment of any judgment, or of any amount awarded to the plaintiff, which is based on non-tort claims.

Please be advised, however, that the State of Louisiana through ORM is defending this litigation with full reservation of all rights which are now, or which may become, available to it under applicable law, the insuring agreement, or otherwise, with regard to the payment of any sums, including settlement, in this matter. No action on the part of the state, or on the part of any of its engaged agents in investigating, inquiring into, corresponding about, or otherwise defending this claim should be construed as a waiver of those reserved rights. Again, ORM will not be responsible for any judgment, or other monetary award, which may be rendered on the basis of any non-insured claim; the funding of such a judgment or award would be solely your responsibility.

A copy of the suit is enclosed for your review.

Please advise if you have any questions or concerns.

Sincerely,

FORM B

*This form is to be used when the primary claims asserted in the petition/complaint **do not** sound in tort. This letter **does not** provide the option of the defendant allowing the AG/ORM appointed counsel to defend all claims asserted (in this instance, the tort allegations are incidental to the non-tort demands; for example, as when the primary allegations sound in contract, etc..). **Here, the defendant must retain its own attorney to defend the non-tort allegations.***

Date:

(Agency/employee)

RE:

Dear _____:

FARA Insurance Services is the third party administrator for the State of Louisiana, Office of Risk Management. We are in receipt of the above-referenced lawsuit, in which you are

a named defendant. In review of same, please be advised that the Office of Risk Management provides a policy of liability coverage that was in force at the time of the alleged incident. While there are certain allegations contained in the petition/complaint that obligate ORM to defend and potentially indemnify you, other allegations contained in this pleading, and claims asserted therein, are not covered by any liability policy provided by ORM.

ORM provides coverage (defense and potential indemnification) for tort claims only. It does not provide coverage for claims of declaratory, injunctive or other equitable relief, claims for back pay, front pay, loss of overtime or employment benefits, punitive or exemplary damages, civil penalties, contractual or quasi-contractual claims and other matters. Any money judgment rendered against you on the basis of such claims would be your sole responsibility.

The Attorney General, with ORM's concurrence, will appoint legal counsel to defend the asserted tort claims.

With respect to claims in tort, ORM does not provide coverage for intentional acts, or for acts resulting in injury that is expected or intended from the standpoint of the insured. Additionally, coverage is not provided in the event any alleged tortious conduct is found to have been outside the course and scope of employment with the state. The Office of Risk Management will defend you with respect to such tort claims. However, in the event any alleged wrongful conduct is found to be intentional, or found to be outside the course and scope of employment with the state, you may receive no indemnification pursuant to the terms of the policy. Thus, any money judgment rendered against you under these circumstances would be your sole responsibility.

As the primary allegations of the petition/complaint do not sound in tort, it is your responsibility to retain your own legal counsel, at your expense, to defend your interests in connection with those non-covered claims. Legal counsel appointed by the Attorney General, and concurred upon by the Office of Risk Management, will only defend the claims asserted in tort, and will coordinate with the attorney you elect to retain. The Office of Risk Management will not be responsible for the payment of any judgment, or of any amount awarded to the plaintiff, which is based on non-tort claims.

Please be advised, however, that the State of Louisiana through ORM is defending this litigation with full reservation of all rights which are now, or which may become, available to it under applicable law, the insuring agreement, or otherwise, with regard to the payment of any sums, including settlement, in this matter. No action on the part of the state, or on the part of any of its engaged agents in investigating, inquiring into, corresponding about, or otherwise defending this claim should be construed as a waiver of those reserved rights. Again, ORM will not be responsible for any judgment, or other monetary award, which may be rendered on the basis of any non-insured claim; the funding of such a judgment or award would be solely your responsibility.

A copy of the suit is enclosed for your review.

Please advise if you have any questions or concerns.

Sincerely,

The FARA adjuster will draft the reservation of rights letter and submit it to the FARA supervisor for approval. The letter must then be sent to the assigned ORM Supervisor for approval prior to it being sent to the involved party. The reservation of rights letter must be sent by certified mail, return receipt requested.

DENIAL OF CLAIMS

When it is determined that the State has no liability for a loss, FARA will issue a letter of denial to the claimant which must be approved by the FARA supervisor. The letter must then be submitted to the assigned ORM Supervisor for review and approval. In the event that a denial is appealed, the FARA supervisor on the case will review all applicable documentation and issue a supplemental letter to the claimant advising them of the final decision.

STAFFINGS

A staffing may be requested by the FARA adjuster, ORM or the AG to discuss a plan of action on a case. The adjuster should attend the staffing and document the names of those who attended and the outcome of the staffing. A plan of action should state the subsequent steps in the defense of the case that were decided in the staffing. The notes and plan of action must be attached to the ICE file.

NOTIFICATIONS AND ATTENDANCE of TRIALS and MEDIATIONS

FARA must maintain a calendar of all scheduled mediations and trials. Notification must be made to the ORM supervisor and to Jessica Brown Jessica.brown@la.gov on behalf of Joe Roussel, Assistant Director for Litigation Management, thirty (30) days prior to all trials.

FARA adjusters must attend trials and mediations as well as meetings of the Joint Legislative Subcommittee on the budget. The adjuster may have to sit at the defense table with our attorney as the representative of the State in the event that a representative of the named agency is not available.

MEDIATION SUMMARY

A mediation summary documenting the offers and demands, initial settlement authority and final settlement amount along with an evaluation of defense counsel should be attached to the file. A copy of the format will be provided to FARA.

MEDIATION AUTHORITY

No “tentative” mediations are to be scheduled prior to the disposition of an RSA submission specifically seeking authority to mediate. Mediations shall be scheduled only after ORM approval of, and Attorney General concurrence on, a properly submitted RSA requesting authority to mediate and corresponding monetary authority.

LITIGATION MANAGEMENT:

Adjusters should be thoroughly engaged in the management of litigation and should work closely with defense counsel to bring about a prompt resolution of the claim.

- Adjusters should make certain that written discovery (interrogatories, requests for production of documents, and requests for admissions) are propounded (sent) to plaintiff counsel very early in the life of a case. They should monitor this aspect of the defense and communicate directly with counsel to make certain it is done.
- Discovery propounded by defense counsel is to be promptly answered. If plaintiff does not respond promptly, the adjuster should discuss the possibility of filing a motion to compel with defense counsel. Defense counsel is to provide a copy of the discovery responses to the adjuster.
- As a general rule, written discovery should be propounded and answered by the plaintiff prior to plaintiff being deposed. Receipt of this information beforehand will assist defense counsel in preparing for the deposition.
- The timing of a deposition is important. Plaintiff should not be deposed too early, because we want to obtain as much information as possible regarding alleged injuries. It is often desirable for the injuries to mature to a degree (time for plaintiff to receive a diagnosis, treatment and, hopefully, a prognosis) before he is deposed. In most cases, a deposition should be taken from 8 to 12 months from filing suit; if not earlier (depending on how long after the incident suit is filed).
- Suggest discussing the need for, and the scheduling of, plaintiff’s deposition with defense counsel. Confirm that written discovery has been sent to and answered by plaintiff. When appropriate, *ask (rather than direct or instruct)* defense counsel to take plaintiff’s deposition. Document your requests. If there is disagreement or delay on the part of our defense counsel, please notify your FARA management team, as well as the assigned ORM Supervisor, Jimmy Meaux, Ann Wax and Joe Roussel. The matter will be addressed accordingly.
- It is FARA’s responsibility to move and manage these cases. Confirm conversations through a follow up email.

Abandonment of Litigated Cases

- *A new policy will be implemented on all cases that abandon **after October 1, 2013**. When a case is believed to have abandoned, defense counsel will consult with the adjuster to review relevant dates and to confirm that the delay for abandonment has indeed lapsed. If there is agreement that the case has abandoned, defense counsel will file a "Motion to Declare Case Abandoned " or "Motion to Dismiss on the Basis of Abandonment", or similar pleading between 15 and 45 days from the alleged date of abandonment. In the event the motion is granted, defense counsel will immediately inform the adjuster of all costs associated with a dismissal of the case, and will provide the adjuster with an itemization of such costs from the Clerk of Court.*
- *Please note that La. C.C.P. Art. 5188 provides that, in the event a judgment is rendered against a party who has been permitted to litigate without the prior payment of costs (i.e., an indigent party who has prosecuted the action "in forma pauperis" pursuant to La. C.C.P. Art. 5181 et seq.), said party should be cast with all costs. This article further provides that failure of the indigent party to pay such costs shall not prevent the entry of a judgment in favor of another party. This article should be referenced within the Motion and Order/Judgment of Dismissal in the appropriate circumstance.*
- *Cases that are currently in the possession of the Litigation Division and that have been administratively closed due to abandonment (i.e., cases that have allegedly abandoned **before October 1, 2013**) shall be reviewed by defense counsel and the corresponding Section/Office Chief to confirm (1) the date it allegedly abandoned, and (2) that there has been no waiver of abandonment. If there is agreement that the case has abandoned, defense counsel shall file a "Motion to Declare Case Abandoned " or "Motion to Dismiss on the Basis of Abandonment", or similar pleading on such cases **prior to December 31, 2013**.*

SUBROGATION:

- FARA must ensure that they protect the State's subrogation interest on all claims.
- Filing of suit to interrupt prescription or filing of suit to recover the State's interest should be requested by the FARA adjuster at least ninety (90) days prior to prescription.

- All requests for the appointment of an AAG staff attorney to handle a subrogation matter will be submitted to ORM to the attention of Farrel Hebert along with a Subrogation Summary. ORM will prepare the Appointment and Contract Approval Form and submit it to the AG for assignment. AG will notify FARA and ORM as to the name of the appointed attorney/law firm.

For General Liability claims, authorization to waive less than 50% of our subrogation interest can be obtained from the designated General Liability staff member as noted in the above section titled ORM Internal Authority Designation. **Authorization to waive more than 50%** of our interests will require an RSA and submission to ORM claims council which shall be directed to Farrel Hebert at farrel.hebert@la.gov. A request for the appointment of an attorney to pursue/protect our subrogation lien should be directed to Farrel Hebert at the email address noted previously.

CONTRACT AMENDMENTS

DOJ/Office of the Attorney General Staff: The Office of Risk Management has an Interagency Agreement between ORM/DOJ for the legal services provided by the Office of the Attorney General. It will not be necessary for FARA to request any amendments for legal services performed by DOJ/Office of the Attorney General/Litigation Program. FARA adjusters do need to monitor billings for excessive charges and make sure that they have proper documentation in their files.

Contract Counsel – Contract counsel is appointed by the AG and concurred upon by ORM. A Contract for Professional Services is executed between ORM and the respective law firm/attorney. Amendments will be necessary when the initial contract has been exhausted or when it is expected to exceed the initial amount. The initial contracts to defense counsel are normally issued in the amount of \$20,000. So, it isn't uncommon to receive an amendment request along with the initial case assessment. Contract counsel must submit a budget in Acuity that will need to be approved by the FARA adjuster. Approval of a budget in Acuity DOES NOT eliminate the need for the adjuster to submit a written request for a contract amendment. Contract counsel should provide an email or letter stating reasons that the amendment is required.

Since contracts are issued by ORM, we will need **written email requests for amendment requests up to \$199,999.99** in the following format along with a copy of the budget and a current case assessment.

RE: Request for Contract Amendment
Contract Number:
Claimant:
ORM Claim Number:
FARA Claim Number:
Contractor:
Current Contract Amount:
Contract Dates:

Requested Contract Amount:

The first paragraph should be a brief description of the loss and what legal action has been accomplished.

Second paragraph should include additional action required as well as note critical dates (hearings, trial date, etc.).

Third paragraph should include the amount of monies paid by ORM towards the defense of this claim on the current contract, the total amount of outstanding invoices, and a statement recommending that the contract be increased from \$_____ to \$_____.

The adjuster will route this email to the respective ORM supervisor/manager for approval. If in order, the ORM supervisor/manager will approve it and forward the approved request to the ORM Contract's Unit for processing with a copy to FARA.

For contract amendment requests **\$200,000 and above, a Memorandum is required** which will be a Microsoft Word document that can be revised. The format will be as follows:

FARA Letterhead

Font will be Verdana 12 point

Modified Block style

Justified

MEMORANDUM is uppercase, bold, underscored and centered

Justified paragraphs

TO: J. S. "Bud" Thompson, Jr
State Risk Director

FROM:

DATE:

RE: Request for Contract Amendment
Contract Number:
Claimant:
ORM Claim Number:
FARA Claim Number:
Contractor:
Current Contract Amount:
Requested Contract Amount:

The first paragraph should be a brief description of the loss and what legal action has been accomplished.

Second paragraph should include additional action required as well as note critical dates (hearings, trial date, etc.).

Third paragraph should include the amount of monies paid by ORM towards the defense of this claim on the current contract, the total amount of outstanding invoices, and a statement recommending that the contract be increased from \$_____ to \$_____.

APPROVED BY:

J. S. "Bud" Thompson, Jr. Date
State Risk Director

Joseph M. Roussel Date
Assistant Director for Litigation Management

Ann D. Wax Date
State Risk Administrator - Claims

Please try to keep the memorandum to two pages. A copy of the Acuity budget and a current case assessment should be included along with the amendment request.

This memorandum should be directed to Ann Wax for review. If in order, she will obtain the required signatory approvals and route to the ORM Contract's Unit for processing.

Approval Levels for Contracts:

| <u>Amount of Contract</u> | <u>Approval Required</u> |
|---------------------------|--------------------------|
| \$ 0 - \$100,000 | Claims Supervisor |

| | |
|-----------------------------|--|
| \$100,000.01 - \$199,999.99 | Claims Manager |
| \$200,000 and above | State Risk Administrator – Claims, Assistant Director for Litigation Management, State Risk Director, and Commissioner of Administration |

CONTRACTS FOR EXPERTS:

When the assigned defense counsel and/or an adjuster requests an expert, the adjuster shall have the request for “Contract Expert/Consulting Services” form (See exhibit 11) completed (signed by the adjuster, FARA supervisor and defense counsel) and returned to the ORM Contract Reviewer, Deborah Grand at Deborah.Grand@la.gov. Ensure that the Curriculum Vitae, Fee Schedule and W-9 are attached. ORM Contracts will prepare the contract, obtain approval, and then route a copy to the FARA adjuster. When the contractor has concluded his assigned tasks and their services or no longer needed, or upon expiration of the contract, the adjuster shall complete a Contract Performance Evaluation Form and submit it to Deborah.Grand@la.gov.

The FARA adjuster will provide:

- Expert’s W-9
- Expert’s name and company name
- Expert’s address, city, state, and zip code
- Expert’s phone and fax numbers
- Expert’s Curriculum Vitae
- Expert’s Social Security Number or TIN #
- Expert’s Fee Schedule
- Amount of contract, and effective date
- Scope of Services
- If a potential expert is employed by a college or university, a PM 11 form is required, which grants permission from the college or university for the expert to handle private work.

EXPERT CONTRACT PAYMENT REQUESTS

The adjuster will verify all necessary information and contract balances prior to submitting an invoice to assigned ORM Supervisor for payment.

1. List vendor/defense attorney name
2. List contract number, balance on contract prior to payment of invoice and contract dates
3. Invoice number, dates of service range and approved amount of invoice
4. If any invoice amount is reduced include an explanation of why it was reduced.

Example:

Please place the attached invoice in line for payment. I have reviewed and audited the invoice and the charges are in line for payment as follows.

CONTRACT PERFORMANCE EVALUATION FORM:

Contract Performance Evaluations (CPE's) must contain all information required by the Louisiana Administrative Code, Title 34, Part V, Appendix F and Louisiana Revised Statute Title 39:1500. Adherence to these laws and guidelines are addressed in the agency's audits. CPE forms have been revised. There is one form specific to Legal (Contract Performance Evaluation – Legal) and one form specific to Expert (Contract Performance Evaluation – Expert) services. Completion of the appropriate form is required at the conclusion of the case or upon expiration of the contract. This form shall be completed on all cases wherein defense counsel was assigned and where an expert was obtained under contract. CPE's must be signed by the handling adjuster and their supervisor. When outside defense counsel has been assigned, Acuity will send the assigned adjuster a notice of contract expiration 90/60/30 days prior to the expiration date of the contract. Use the Contract Performance Evaluation – Legal form to request contract renewals before the expiration of the 3 year attorney contract and to close a contract upon the conclusion of the case. Also, this form must be completed on cases handled by AAG staff attorneys upon the conclusion of the case.

OCR Number: information will be input by ORM Contracts Unit

CFMS Number: Contract number

Actual Amount Paid: the total amount paid under this contract number

Contract Amount: current amount of contract

Hourly Rate of Pay: dollar (\$) amount per contract as some counsel receive regular hourly rates and some receive increased hourly rates

Actual Begin and End Dates: date of the first and last billing entries

Number of Contract Amendments and Reasons: information will be input by ORM Contracts Unit

Remaining questions on form are self-explanatory and must be completed.

CPE's completed on cases handled by contract defense counsel should be emailed to Lucille Gautreaux at lucille.gautreaux@la.gov with a copy to Ann Wax at ann.wax@la.gov. CPE's completed on cases handled by AAG staff attorneys, should be emailed to Ann Wax @ ann.wax@la.gov. CPE's must be signed by the handling adjuster and supervisor.

When a renewal is needed on a case being defended by contract counsel, the FARA adjuster will complete the CPE checking off the "Case Ongoing - Renewal Needed" box

and attach a copy of the most recent case assessment or status update form (must not be more than six months old) and submit them to Lucille Gautreaux. If the last case assessment/status update report is more than six months old, then it will be the responsibility of the FARA adjuster to obtain a current status update to submit along with the CPE to Lucille Gautreaux (lucille.gautreaux@la.gov) to begin the renewal process along with a copy to Ann Wax at ann.wax@la.gov. Lucille will not be able to process the renewal request unless she has received both documents.

ORM has an Interagency Agreement with DOJ – Office of the Attorney General – Litigation Program. The following questions will be left blank on the CPE for AG staff attorneys:

OCR Number
CFMS Number
Contract Amount
Hourly Rate of Pay
Contract Begin and End Dates
Actual Begin and End Dates
Number of Amendments

Contractor Name will be the name of the AG attorney – DOJ/AG – Litigation Program. All other questions asked should be self-explanatory and must be completed. CPE's completed on cases handled by AAG staff attorneys, should be emailed to Ann Wax @ ann.wax@la.gov. CPE's must be signed by the handling adjuster and supervisor.

On expert contracts, Deborah Grand will notify the FARA adjusters quarterly of upcoming expiring contracts. Deborah will actually provide the adjuster with a CPE that will have the contract information completed and request that they complete the form requesting a renewal and email it to her at deborah.grand@la.gov. Once the services of an expert are no longer required and their final invoice has been paid, the FARA adjuster should complete a CPE-Expert form and email it to Deborah at the email address stated above. Do not send a copy of the Contract Performance Evaluation – Expert form to Ann Wax.

DEFENSE COUNSEL BILLING:

Most defense attorneys will submit their invoices through Acuity. An exception may be made when defense counsel is out of state. Assigned ORM Supervisor must approve all

invoices not presented through Acuity. The adjuster will provide the following required information when requesting contract attorney bill payments:

1. Defense attorney name
2. Contract number and remaining balance.
3. Outstanding, approved invoices with dates of service.
4. An explanation for any reduction in the invoice amount.
5. Contract period dates.

Example:

“Please place the attached invoice in line for payment. I have reviewed and audited the invoice and the charges are in line for payment as follows”.

Acuity contact person is Lucille Gautreaux at Lucille.gautreaux@la.gov>
(225) 342-1517.