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JOB DESCRIPTION – ORM-C700

Depending on the line of coverage an Adjuster is assigned to, some of the following duties may not be fully applicable.

Claims Adjuster 1-4

Adjusters 1-4 are in a training series and have the same job description.

This is a highly responsible advanced journeyman position dealing with the investigation and management of claims relative to any of the lines of coverage handled by the Louisiana Self-Insurance Program. This requires advanced knowledge of claims investigation, claims law, insurance coverage, civil and criminal law and procedures, court rulings and procedures, and medical terminology. Advanced training and experience in claims investigation and adjusting are required. It is necessary in the performance of these duties to be ready and able to travel to any part of the State of Louisiana or elsewhere.

The person in this job performs the following:

- Investigates, evaluates, and negotiates the most complex personal, casualty, and property claims.
- Performs field investigation tasks including but not limited to:
  - Inspecting an accident site
  - Developing facts of an accident from any physical evidence available
  - Taking photographs
  - Taking measurements
  - Inspecting vehicles for damages/defects
  - Making field notes
  - Making sketch drawings of accident scenes
  - Performing background checks on claimants
  - Researching agency documents
  - Obtaining recorded statements from claimants, witnesses, law enforcement officers, etc.
- Investigates, evaluates and resolves serious, complicated compensation and jurisdictional issues.
- Evaluates litigated and non-litigated cases involving but not limited to all levels of temporary, permanent, and/or multiple disabilities, future medical care payments, etc.
- Evaluates findings, prepares written report and makes recommendations toward further handling of the claim which would include settlement/defense if the case is in litigation.
- Handles litigated and non-litigated files with reserves in excess of $1,000,000 which include but are not limited to the following types of cases:
  - Catastrophic losses

- Quadriplegia
- Paraplegia
- Double amputation
- Brain damage
- Total blindness

Note: These coverages are mandated to be reported to the Excess Carrier for all claims with a date of loss prior to June 30, 2005. ORM is self insured up to $5,000,000. There is no excess carrier for claims with a date of loss of July 1, 2005 or later.

- Resolves unique coverage issues including cumulative trauma cases where coverage may involve multiple carriers or claims.
- Provides notice and updates to excess carrier regarding any claim which may exceed the state's primary policy limits.
- Handles litigation, prepares claims with attorneys for legal action, attends mediations and trials and testifies in court concerning the results of investigations conducted.
- Directly supervises cases on appeal, excess carrier cases and second injury fund cases.
- Identifies and refers cases involving salvage and potential subrogation recovery to the subrogation unit for handling.
- Must maintain daily relationships of a complex nature with public and private officials at the highest level requiring a high degree of tact and diplomacy.
- Oversees the rehabilitation of injured workers, working closely with the rehabilitation counselors in an effort to return the claimant to a gainful occupation.
- Evaluates permanent partial and permanent total disability cases upon completion of the rehabilitation program to determine claimants' occupational ability and/or settlement value of the case.
- Contacts treating physicians and/or arranges independent examinations of claimants with a medical specialist.
- Assumes an active role in litigation management.
- Maintains direct and constant contact with the assigned defense counsel.
- Evaluates cases involving litigation, working closely with the assigned attorney in developing strategy, budget, etc.
- Obtains legal opinions and case evaluations from defense attorney especially on cases requiring legal interpretation and/or posing major financial losses to the state.
- Is responsible for analyzing, planning, and managing activities of counsel in determining responses to pleadings, motions, discovery, etc.
- Authorizes the taking of necessary depositions of employees, plaintiffs, or expert witnesses.

- Supervises in the preparation of state employees for trial.
- Attends trials and offers defense counsel assistance and evaluates performance of counsel.
- Is responsible for requesting issuance of contracts to experts and other contract vendors.
- Is responsible for monitoring contracts for professional services and requesting amendments when necessary.
- Analyzes results of contracted services upon completion of work product.
- Works closely with defense counsel in determining plan of action and a litigation budget based upon complexity and exposure of case.
- Reviews bills received on all vendors providing contracted services for accuracy and appropriateness making adjustments as necessary, then approves for payment.
- Authorizes payment of benefits, damages, and/or judgments, This includes receipt of invoices, verification of services/equipment, etc.
- Consults with claimants and/or their attorneys concerning the possibilities of settlement of claims.
- Receives and reviews all bills associated with the claim, reducing costs as necessary and approving for payment.
- Coordinates claims through an exchange of information and/or by acting as a liaison with other state entities, e.g., social security, unemployment, retirement system, family security, police departments, group benefits, Office of the Attorney General, etc.
- Makes recommendations and participates in the development of policies and procedures for the claims unit. Assumes the duties of State Risk Adjuster 5 in his/her absence.
- Attends meetings and conferences as required for information regarding coverage and/or to obtain or assist in closing a specific file.
- Attends training/educational opportunities in order to gain additional knowledge and improve job performance.
- Performs any and all other duties as assigned.
- Adjusters, Supervisors and Managers are subject to be moved to another unit at the discretion of management.

INTRODUCTION – ORM-C701

Claims Adjusters in the various departments perform some activities the same. The procedures are designed so that the activities that are in common are listed in General Procedures, ORM-C800's. Activities that are specific to General Liability (CGL) because of the nature of the work performed are listed in this set of procedures.

These procedures include procedures performed by Claims Adjuster 4's, 3's, 2's, and 1's. Responsibility for each procedure is assigned.

OVERVIEW OF CGL UNIT CLAIMS – ORM-C702

Responsibility

The Comprehensive General Liability (CGL)/Civil Rights Unit State Risk Claims (SRC) Adjusters 1-4 stay abreast of new laws and regulations involving the CGL Unit.

Forms or Reference Material Required

Procedure

Overview of Comprehensive General Liability (CGL)

The State of Louisiana became self-insured for Comprehensive General Liability losses, excluding L.S.U. and the Superdome on July 1, 1986. Refer to the Coverage Matrix for all Covered Agencies and Claims Handling and Coding Guide for self-insured limits.

Comprehensive General Liability coverage for the Superdome was provided on July 1, 1987 with self-insured limits of $1,000,000. Self-insurance ended June 30, 1996, until July 1, 2005 when ORM again provides coverage for tort damages up to the self insured limits of $5,000,000.

Comprehensive General Liability coverage for L.S.U. was provided on July 1, 1988 with self-insured limits of $1,000,000. Self-insurance limits are now in accordance with the Coverage Matrix for all Covered Agencies and Claims Handling and Coding Guide.

Comprehensive General Liability provides coverage for third party losses where the State is legally liable and also provides personal injury, wrongful acts, and other contractual and tort liabilities.

Effective July 1, 2005 there is no excess coverage on general liability claims. Self insured limits of liability are $5,000,000.

SET UP NEW CLAIM – ORM-C703

Responsibility

The assigned Claims Adjuster performs the following activities to set up a new claim file.

Forms or Reference Material Required

Appointment and Contract Approval Form is located on the G-drive entitled: Attorney Appointment.doc (g:\Claims-General\ORMforms)

Petition (if litigated claim)

ORM-C800 Claims Adjuster 1-4 General – Set Up New Claim File section

Procedure

Litigated Claims

A Claim must be entered in STARS in order to obtain a claim number. Refer to details in ORM-C800 Claims Adjuster 1-4 General procedure – Set Up New Claim File section.

Appointment and Contract Approval Form

1. When the case is first assigned and the petition received, go into Microsoft Word and open the Appointment and Contract Approval Form.
2. Type in the following case information from the petition:
   - Name as it appears on the petition
   - JDC, Docket number, Parish in the upper left quadrant of the form.
   - JDC#/docket number at the bottom of the form with no punctuation or letters. ie:19/500000
3. Go into STARS and enter the plaintiff attorney name. Verify that the plaintiff attorney is listed as a vendor and has a vendor number.
4. If there is no vendor listing for plaintiff attorney, request on the Vendor Number Request form and send to Accounting.
5. Enter plaintiff attorney information on the Appointment and Contract Approval Form.
6. If the State Risk Director, Claims Manager, or Claims supervisor has added a note on the petition, add to 'special instructions' on the Appointment and Contract Approval Form.
7. Get the ORM Claim Number from STARS and type the claim number on the Appointment and Contract Approval Form.
8. Type in the JDC/Suit Number using the judicial district before the slash and the suit number after the slash. For example, suit number 508022 in the 19th judicial district would have a JDC/Suit Number of 19/508022. **Do not include any punctuation or letters.**

9. Email the Appointment and Contract Approval Form and lawsuit (petition) as attachments to NSF-ORM@ag.state.la.us. See additional details in ORM-C800 Claims Adjuster 1-4 General – Litigation Documentation-Miscellaneous section.

Request for Extension of Time Letter to Plaintiff Attorney

1. Contact the plaintiff attorney to request a 30-day informal extension time so that an attorney can be assigned to answer the petition in all suits filed in state district court. Contact the plaintiff attorney by telephone, by fax, or by letter. Send a form letter to the plaintiff attorney verifying the informal extension and have the plaintiff attorney sign the form and return it preferably by fax.
2. If the plaintiff attorney does not grant the informal extension or cuts the number of days of the extension, notify DRL immediately and send a copy of the confirmation letter to DRL.
3. For federal court suits or for a plaintiff acting on his own behalf (pro se), do not request the informal extension.
4. Refer to extension letter forms
   - g:\claims-general\ORMtemplates\30 day extension form letter(request).dot
   - g:\claims-general\ORMtemplates\30 day extension form letter(confirmation).dot

CASE MANAGEMENT – ORM-C704

Refer to ORM-C800 Claims Adjuster 1-4 General – Case Management section

ISO Claim Search

The adjustor will notify the Index Bureau via ISO Claim Search on all claims involving bodily injury.

Obtain Settlement Approval

Refer to ORM-C800 General procedure – Request for Settlement Authority section

Investigate for Subrogation Possibilities

1. Review third party claims paid by ORM that involve product liability for subrogation possibilities.
2. If subrogation is required, refer to ORM-C800 General procedure – Case Management / Subrogation Process section.

CLAIMS PAYMENTS – ORM-C705

Refer to ORM-C800 Claims Adjuster 1-4 General – Claims Payment section

RESERVES – ORM-C706

Refer to ORM-C800 Claims Adjuster 1-4 General – Reserves section

DIARY AND ACTIVITY REPORT – ORM-C707

Refer to ORM-C800 Claims Adjuster 1-4 General – Diary and Activity Report section

CONTRACTS – ORM-C708

Refer to ORM-C800 Claims Adjuster 1-4 General – Contracts section

REQUEST FOR SETTLEMENT AUTHORITY (RSA) – ORM-C709

Refer to ORM-C800 Claims Adjuster 1-4 General – Request for Settlement Authority section

CLAIMS COUNCIL – ORM-C710

.Refer to ORM-C800 Claims Adjuster 1-4 General – Claims Council section

MISCELLANEOUS ACTIVITIES – ORM-C711

Responsibility

The Assigned Claims Adjuster performs the following miscellaneous activities.

Forms or Reference Material Required

Procedure

Excess Carrier Notification

If needed, refer to Miscellaneous Activities – ORM-C800.

Reservation of Rights

If needed, refer to Miscellaneous Activities – ORM-C800.

Meetings

If needed, refer to Miscellaneous Activities – ORM-C800.

State Employee, Named Defendant

NOTE: If there is doubt about defending a particular state employee because the act sued upon appears to be outside the course and scope of his/her employment, or the allegations are of a criminal nature, refer the matter to DRL, per **R.S. 13:5108.1.** If a decision is made not to defend a state employee, a representative from DRL will contact the named defendant for a consultation. If the decision stands for no defense, DRL will notify the employee in writing that he/she should obtain his/her own legal counsel.

Claims for Glass Breakage - Third Parties

1. Due to the enactment of Act 1476, the “no pay, no play” policy, effective September 6, 1998 that requires liability insurance coverage in order to collect damages in personal automobile claims, ensure liability insurance is verified with the carrier before accepting a claim for damages to a privately owned vehicle. A copy of the vehicle registration is required to be provided from the agency, along with a copy of the driver’s license of the claimant reporting the damage. The claim will be set up in the name of the registered owner, not the driver. Payments are made to the registered owner for all vehicle damage claims.
2. Enter claim in STARS (see Set up New Claim File– ORM-C800).

   Use coverage code **2300, On Premises** (e.g., weed eating on ground of state agency when rock is thrown breaking window). Claim Number is designated with "G" for general liability. Forward claimant a letter (see Claimant Letter) requesting two (2) estimates for repair. The claim is set up in the name as it appears as owner on the Vehicle Registration Form.

   NOTE: Photographs of body damage are required.

3. On all claims, verify that liability insurance coverage is current on the day of the incident in order to accept liability.
4. Input STARS Attachments reminder.
5. **NOTE:** Adjuster must be cautious since DOTD contracts some of the grass cutting activities in some areas of the state. Glass breakage from mowers or maintenance machinery on state highways is considered a Road Hazard claim designated with "R" in the claim number. Settlement payments of Road Hazard claims are paid by ORM after appropriation through the Louisiana State Legislature ancillary fund and require an Agreement to Settle. If DOTD, Department of Transportation and Development, road maintenance work causes damage to third party vehicle, payment is through consent judgment only and paid by the legislature. Coordinate with Road Hazard Supervisor.
6. Send an offer of settlement letter to claimant.

   Note: If under $500, use the simple acceptance form. If over $500, use the receipt and release form.
7. Upon receipt of the requested information, issue a check in the amount of the lowest estimate and close the file.
8. When the third party cannot wait to have his/her windows/windshield replaced, do the following:
   - Verify the loss with the appropriate state agency.
   - Obtain pertinent information, including the liability insurance.
   - Verify liability insurance prior to approving a referral to the glass vender.
   - Call agency and provide claim number to the agency. The agency will contact the glass vendor.
   - If a rental vehicle is approved for the period of time that the vehicle is not drivable, verify that an appointment has been obtained with the body shop or glass dealer and determine the days to approve a rental.

Handling False Arrest or Civil Rights Claims – Assigned Adjuster

These steps are performed by the assigned Claims Adjuster responsible for handling false arrest or civil rights claims.

Review and set up claim in STARS

1. Review the petition and request all relevant information (investigations, files, documentation) from the defendant agencies.
2. Set up claim according to procedures (see Set up New Claim – ORM-C800 section C802).
3. For cases involving **DPS** (primarily State Police and Office of Motor Vehicles) when the petition is received, complete DPS and ORM information on the OLA (Office of Legal Affairs) Assignment Sheet including but not limited to DPS attorney, the ORM adjuster, and the various file numbers used by each agency. Fax or email the sheet to the appropriate DPS attorney. DPS-OLA monitors tort litigation for DPS-Mgmt. and Finance, Office of Legal Affairs, Office of State Police, Donald J. Thibodaux

Training Academy, ORM, Office of State Fire Marshall, Liquified Petroleum Gas Commission, La. Gaming Control Board, la. Highway Safety Commission and the DPS-Cafeteria.

4. Obtain DPS/OLA File Number from DPS/OLA attorney and enter this information in the specific field provided in STARS General screen.

Investigate and obtain information

1. Request, as needed, information from other state agencies.
2. Check court records for information on plaintiffs when appropriate.
3. For DPS cases, when DRL assigns an attorney, fill required information regarding defense counsel on the OLA Assignment Sheet and refax to the DPS attorney.
4. If a state trooper, wildlife agent, etc., is personally named in the petition, meet with him/her as soon as possible to discuss the allegations in the petition and the incident.
5. Also meet with the officer/agent's superiors to make sure that officer/agent was in the course and scope of employment.
6. The Request for Settlement Authority relative to litigated cases involving DPS named agencies may be sent to the Office Legal Affairs assigned staff attorney for their review and follow-up with Frank Blackburn, Assistant Secretary and Col. Mike Edmonson regarding any settlement demand.

Monitor and provide assistance

1. For suits against the Department of Public Safety (DPS), maintain contact with appropriate DPS legal section in-house attorney who will help with discovery and other matters.
2. As the case proceeds, periodically discuss the case with the independent adjuster, defense attorney, and the DPS/OLA attorney and request status reports. Copy the OLA attorney on all pleadings and correspondence.
3. Assist the attorney in obtaining information he/she needs to file answers, interrogatories, or requests for production.

   NOTE: The defense attorney and claims adjuster make determinations, with supervisor's approval, as to whether or not experts should be hired and which way investigation should proceed.
4. When appropriate, refer the case to Loss Prevention section for review and prevention of recurrence.
5. Obtain written recommendation from DPS/OLA attorney regarding disposition of case.
6. Before initiating actions, discuss all decisions concerning settlement, cross claims, third party suits, interventions, etc., with the Supervisor and/or ORM Claims Council as follows:
   - Settlement requests in excess of $100,000 go to Claims Council, see **ORM-C808 Request for Settlement Authority.**

- Settlement requests of less than $100,000 are handled within the chain of command depending on the amount.
- Requests to approve no settlement authority and proceed to trial require Claims Council.
- Decisions regarding appeals of adverse verdicts require Claims Council.

Hold discussions and follow the trial

1. Upon completion of the investigation, hold discussions with all concerned parties to determine whether or not ORM wants to settle or defend the case in court.
2. If the suit involves State Police or Office of Motor Vehicles, obtain written recommendation from DPS Counsel regarding settlement or decision to proceed to trial.
3. Notify OLA attorney of Claims Council decision.
4. Attend all trials when time and distance allow.
5. Follow the trial as it progresses and make determinations with the supervisor, the defense attorney, and experts towards continued defense or settlement.

Settlement to proper authorities and report problems

1. Discuss a Request for Settlement Authority (RSA) with the supervisor for amounts under $50,000, the Claims Manager for amounts between $50,000 and $100,000, and with the State Risk Administrator-Claims and Claims Council for amounts over $100,000. A copy of the Request for Settlement Authority (RSA) should be given to the General Counsel for ORM when requesting a council meeting. For RSA's less than $100,000, obtain supervisor's or manager's approval depending on the level of authority sought on the RSA and on the Claims Payment Form for the settlement check. Refer to Claims Payments, ORM-C800 procedure.

   NOTE: Refer to current ORM settlement/payment authority (located in ORM-C800 General procedure –Contracts section) for claims personnel for amounts and required approval authorities as these are subject to change. Settlements of $25,000 or above on litigated claims require the concurrence of the Attorney General, the Division of Risk Litigation.
2. Report all problems with attorneys and independent adjusters to supervisor for appropriate action.
3. Lawsuits that are being monitored by the Department of Public Safety, Office of Legal Affairs, should have a copy of all Requests for Settlement Authority, regardless of amount, forwarded to the State Risk Administrator-Claims for review along with your recommendations.

Update information and close the file

1. Update legal screens in STARS.
2. Upon the conclusion of a case, complete the File Closing Checklist.
3. In addition, for DPS cases, complete the DPS Litigation Closure Notice form (g:\Claims-General\ORMtemplates) and fax the form to the appropriate DPS attorney.

DPS Litigation Closure Notice provides written documentation that the ORM file is closed, provides information to the final disposition of the claim, and the total amount paid.

4. Close the file (see Close a File – ORM-C800 procedure).

Process Inmate Lawsuit/Claim

These steps are performed by the Assigned Adjusters responsible for handling lawsuits or claims for state inmates.

Review and set up claim in STARS

1. Receive lawsuits/claims from supervisor. Title 15 of Revised Statutes details the Administrative Remedy (ARP) R.S. 15:1171 et seq. Also refer to the Inmate Rule Book.
2. See also Disciplinary Rules and Procedures for Adult Inmates LAC 22:1.324 et seq. (Louisiana Administrative Code)
3. Set up claim according to procedures (see Set up New Claim – ORM-C703 and Set up New Claim File– ORM-C800 procedure. When setting up the new claim, use the DOC# in lieu of the social security number.
4. In the STARS Litigation screen:
   - If lawsuit, select "P" for the Litigation Flag field.
   - If claim, enter "A" (non-litigated) or "N" (non-litigated attorney represented) in the Litigation Flag field.
5. If lawsuit, send transmittal to DRL.
6. Review and approve invoice payments
1. Check invoices from outside vendors for accuracy, conformity with procedures, and limits, etc.
2. Approve payments of such invoices within procedural limits.

Monitor work and update information

1. Input and update Litigation screen in STARS.
2. Input reserves as information becomes available.
3. Supervise work of independent adjusters and investigators.
4. Monitor work of defense counsel for required case assessments, documentation, conformity with professional service contract, billing guidelines, etc.
5. Wrongful death of an inmate suits does not go through ARP. A survival action does have to go through ARP.
6. If the allegations concern medical malpractice by a state medical provider, the petition is transferred to Medical Malpractice Claims Unit.

Assess request for settlement authority and obtain approval

1. Discuss a Request for Settlement Authority with the supervisor

   Note: Make sure that the Secretary of Corrections is copied on all Requests for Settlement Authority.
2. Assess requests for settlement authority, submit them to supervisor, and then take to Claims Council for decision.
3. Negotiate settlements with claimants/plaintiff attorneys as needed.

Note: Refer to current ORM settlement/payment authority (located in ORM-C800 General procedure -Contracts section) for claims personnel for amounts and required approval authorities as these are subject to change. Settlements of $25,000 or above require the concurrence of the Attorney General, the Division of Risk Litigation.

Follow through on case to resolution

1. Act as liaison between contract attorneys and institutions for the gathering of answers to interrogatories, documentation, and other evidence needed for defense of case.
2. Maintain tickler file for claims approaching three years without activity and prompt defense attorney as each one reaches abandonment status.
3. Travel to institutions as needed to obtain data, statements, and photographs from plaintiffs, witnesses, and institutional officials.

Complete evaluation and close file

1. Complete Contract Performance Evaluation (g:\Claims-General\ORMtemplates) when closing files.
2. When claim has been concluded, complete File Closing Checklist and close file (see Close a File – ORM-C800 procedure).

CLOSE A FILE – ORM-C712

Refer to ORM-C800 Claims Adjuster 1-4 General – Close a File section