

Risk Management Claims Reporting Professional Liability and Auto

RM (9.401) Rev. # 0.1

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Purpose:

Outline the process for reporting an automobile or professional liability claim with the company insurance carrier as well as responsibilities within the organization.

Responsibilities:

- 1) Hub International Insurance Broker assistance with any issues with captive.
- 2) GCI Insurance Captive for Workers Comp, Liability & Auto
- 3) Gallagher Bassett Insurance carrier under the captive that manages claims.
- 4) HR director Files claims, track claims, manages Crain claims process.
- 5) CFO advises on claims management as needed. Attends Captive board meetings, communicates with captive board if needed.

Procedure:

- 1) Claim filing and Management:
 - A) HR, management team (VPs, CEO) and CFO should be notified when a claim arises; or early in the discussion if there might be a claim forthcoming.
 - B) HR will collect all the details of the claim and store the information in electronic files.
 - C) HR will file the claim with Gallagher Bassett using their online system (Riskfacs) or call- in number (1-877-217-4734) **Specific Filing instructions attached.**
 - i) For delays or issues with Gallagher Bassett, reach out to HUB for assistance.
 - D) HR will work with Crain project representatives on any follow-up information needed for a claim and monitor the claim as it is being processed until the case is closed.
 - E) HR will community needed details of claim to management and the CFO, in particular if there is fault and payouts.
 - F) Claims will be filed on the network: P:\HR\Risk Management by Year and Claim Description/ Date and or Name/ Date.
 - G) For Auto Claims- determine if action needs to be taken with Crain employee if at fault in the accident.
 - H) GCI does a special Claims Review Process for claims greater than \$20k.
 - I) Luminous Portal with Gallagher Bassett can be used for claims updating or reporting.



NEW LOSS REPORTING WORKFLOW

Following is an outline of the loss reporting and initial GB branch handling workflow:

- 1. Member tele-reports via the GCI program dedicated toll free reporting number 1.877.217.4734 or web-reports via www.risxfacs.com.
- 2. Your GB client number is 003186. Please be sure to provide this number as well as your specific location code/location address when reporting all claims.
- 3. Once the loss is reported (via web or tele-reporting) the member contact receives a LOSS REFERENCE NUMBER (e.g. MV123456, 121234567). This reference number serves as your confirmed receipt of the reported loss. Please use this number along with your client number your client number is 003186 (e.g. 003186-MV123456) for inquiries or when searching for the loss in our RISX-FACS® system via Loss View.
- 4. The Loss Reference Number will be emailed to the member with the completed claim report. If reporting via the web, a copy may also be printed once the report is fully completed. All electronically transmitted claims, or losses as we refer to them, are sent to GB within an hour after intake, provided that there are no unusual circumstances surrounding intake of the claim.
- 5. Once the loss is reported, any subsequent communication must be directed to the assigned GB handling branch (see Branch Matrix document) and not to the tele-reporting line. The appropriate Gallagher Bassett office, per the branch matrix, will administer your claims. The branch team's names, contact information and addresses are listed on the matrix by line of coverage (Liability, Workers' Compensation) and then benefit state order.
- 6. After the loss is transmitted to GB, the designated General Contractors Inc. supervisor reviews RISX-FACS® several times throughout the day for any incoming losses. The loss resides on-line in a pending status and can be viewed via the Loss View section of RISX-FACS®. These losses are triaged by the supervisor and electronically assigned to appropriate handling Resolution Manager.
- 7. The Resolution Manager will check RISX-FACS® periodically to access their on-line pending losses. Three-point contact begins on lost-time claims shortly thereafter and within 24 hours of receipt. The Resolution Manager will promptly contact the insured to discuss the loss details, the medical facility and the injured employee. The Resolution Manager will document the initial investigation in RISX-FACS®, which is viewable via the member access to RISX-FACS®. Once the loss is fully established in RISX-FACS®, a GB claim number is assigned which follows this format Client Number/003186-123456-WC-01.
- 8. Supervision of the claims process is taking place from loss assignment throughout the life of the claim. Alerts and escalations are in place to ensure assignment of all losses, investigation and contact is initiated, based upon the appropriate claim level.



CLAIM REPORTING – QUICK REFERENCE SHEET

To report your claims quickly and efficiently, please have the following information ready. This is a general listing for your quick reference. Additional information may be requested based on state or case requirements. Thank you for your prompt claims reporting!

Option #1-Claimline: 1-877-217-4734

Option #2-Web reporting via: www.risxfacs.com

CLIENT INFORMATION

- Insured Name and DBA (doing business as name)
- Client Number #003186

CLAIMANT INFORMATION

- Employee name
- Social security number
- Address and home phone number
- Spouse's name
- · Number of dependents
- · Date of hire
- Gross pay per week

ACCIDENT INFORMATION

- Exact date and time of injury
- Exact location or site code where injury occurred
- Specific description of injury (i.e., employee slipped and fell on wet floor in warehouse)
- Safeguards or safety equipment provided to prevent injuries (where applicable)
- Name and address of claimant's physician
- Name and address of hospital