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Professional liability claims solutions

There is a lot of uncertainty in the medical malpractice world today. While overall claims volume has decreased in recent years, risk managers are reporting an upswing in both the frequency and severity of claims.

Managing more with less

To add to their challenges, many organizations are cutting back on in-house resources; often leaving risk managers with fewer personnel trained to effectively manage professional liability claims.

This shift is leaving many risk managers without access to the experts they once had for managing medical malpractice claims. Many are now in need of a qualified professional liability partner to meet their ongoing claims and risk management service needs. Sedgwick can help by:

- Finding innovative ways to reduce risk
- Ensuring compliance
- Preventing adverse events
- Finding new ways to do more with less

We have been helping clients answer virtually every question there is about professional liability. As a result, our clients experience some of the best outcomes and lowest overall claim costs in the nation.

Sedgwick delivers customized, performance-based professional liability claims and risk management solutions. Where you see medical malpractice liability risk, we see an opportunity to provide a highly innovative service to reduce costs, maximize resources, and achieve a financially sound professional liability claims management program.

Think of us as a flexible extension of your existing staff; a trusted partner that can help expand your existing capabilities and provide the expertise and resources to help empower your risk management team. We offer the tools needed to control costs and reduce risks. Our services include:

- Claims management
- Investigations
- Auditing and consulting
- Healthcare risk management
- MMSEA 111 reporting and Medicare compliance
- Benchmarking and data analytics

Creating flexible programs

Sedgwick can design a customized program for your organization that can dramatically reduce frequency, indemnity, expense payments, and ultimately, total loss costs. Here's how:

- Early investigation and assessment of claims
- Aggressive management of the litigation process
- Fair and innovative settlement of meritorious claims
- Positive relationships with co-defendants, brokers, carriers and counsel
- Jurisdictional experts in state regulations and requirements

A successful professional liability program integrates both loss prevention and reduction.

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Solutions to meet your needs

Data assessment and claim control

Our team will assess initial incident reports, records and other documents to develop a strategy for controlling and investigating each potentially compensable event. In addition, a claims specialist will contact the claimant at the client's request to attempt to prevent a lawsuit. If there is already legal representation, the investigator will immediately contact retained counsel.

Claims investigations

Our national branch network is dedicated to professional liability claims management solutions and allows for prompt claims investigations anywhere in the United States. Comprehensive training, ongoing mentorship, professional support and continuing education initiatives enable our investigators to protect our clients' reputations and financial interests.

Our staff is comprised of registered nurses who are thoroughly trained investigators. They can identify potential problems early, pursue resolution and, in some cases, avoid or mitigate costly litigation.

Liability evaluations

Upon completion of our investigation, we will render an evaluation as to whether the claimant or plaintiff has sustained a compensable injury and determine if there has been any breach in the standard of care. We then consult with you as to the advisability of offering a settlement versus denying the claim.

Reserving

Our experienced claims professionals will establish financial estimates regarding the ultimate potential judgment value of each claim; they consider the damages, venue, liability and numerous other factors. This value is then reduced by the percentage of the insured's exposure or contribution to the injury, and their chances of losing the case if put before a jury. The final number is the indemnity reserve, which adjusts in accordance with the claim's development.

Pre-litigation

To prevent lawsuit filings, we provide for claimant and claimant attorney control, when appropriate, including making personal visits to the claimant.

Litigation management

We will arrange immediate response on behalf of your company or any covered person to any summons, petition, claim and/or attorney inquiries. Our philosophy calls for a published posture of hardline defense; an exception would be a case of clear liability.

As part of your program's design, we define policies and procedures to help monitor and control defense counsel activities and require completion of all investigation and discovery within specific timeframes, which enables an early evaluation of the exposure in each case.

Client banking services

We can maintain an escrow account to pay all indemnity and allocated loss adjustment expense (ALAE) invoices. Prior to approving disbursement, we will review all invoices in conjunction with established litigation guidelines. We currently provide this service for more than 75% of our healthcare clients.

Litigation cost containment

To mitigate unnecessary legal costs and expenses, we begin by assigning a lawsuit to defense counsel experienced in the nature of the claim and limiting discovery to activities essential to the defense. All defense counsel adhere to the framework set forth in our defense counsel guidelines.

Expert consulting network

For cases requiring an outside consultant, we rely on our extensive database of experienced individuals, which includes only those who are well qualified to provide expert consultations on the specific medical, legal and/ or economic issues.

The industry's most intensive ongoing training program

Investing in education through our Sedgwick University program creates knowledgeable and loyal colleagues, ensuring you receive superior service and program stability.

Claims committee and roundtables

The primary purpose of a claims committee meeting is to discuss high-exposure/high-cost claims and cases approaching mediation, trial, settlement, or denial. These discussions ensure client management is aware of the claims and relevant recommendations.

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Claim file maintenance

We create and maintain an electronic file for each reported matter. Our diary system ensures timely review of each claim, focusing all our efforts on reducing your exposure and improving the financial results of your liability program.

Resolving claims

Our staff is skilled in claimant/plaintiff negotiations and will assist in bringing about timely and equitable settlements. If, upon completion of a claim investigation, a settlement offer is deemed advisable, we will negotiate, settle and issue payment.

Client service instructions

We detail your custom liability management system in a client service instruction manual to ensure consistency in the application of policies and procedures. The manual specifies named insureds, coverages, approved defense counsel, levels of authority, reporting requirements, and responsibilities for all program participants.

Quality assurance

Our total performance management process is the strongest in the industry. It establishes best practices for performance, measuring our results against internally established standards and any client requirements. The process also monitors performance and provides client feedback for continued improvement.

Support services

Medicare reporting and compliance

We can meet your company's MMSEA Section 111 reporting requirements with our proprietary query and reporting solution. The use of internal systems and resources allows for complete control over data, enhancing data integrity, security and quality. Our proprietary system provides an interface directly to Medicare's administrative arm, the Centers for Medicare and Medicaid Services (CMS). The system sends query and claims data and accommodates the return interchange of data back from CMS to our claims system.

We also integrate our MMSEA reporting solution with our Medicare compliance services to gain immediate access to important data (e.g., Medicare eligibility). The earlier in a claim cycle we have the data, the earlier we can identify and address potential Medicare issues. It's a critical part of how we work to shorten claim cycles.

State and federal reporting and compliance

If designated as the authorized agent of the insured, Sedgwick's professional liability team will file National Practitioner Data Bank medical malpractice settlement reports on behalf of your company. We will also manage individual state reporting. Your designated client services manager will work with your claims specialists and Sedgwick's professional liability experts to ensure compliance with state and federal laws and regulations governing our industry.

Carrier reporting

A positive, collaborative working relationship with the excess carrier is fundamental to a program's success. We fulfill the reporting requirements of any excess carrier.

Healthcare risk management

Your program manager will use our proprietary risk management information system to capture details about your program and exposures. Using the data, we can recommend policy changes that may potentially lower risk frequency and reduce loss costs.

Program management – a unique value-added service

Our dedicated client services manager supports your internal claims specialists and every facet of your claims program. In addition, there is an entire team of Sedgwick experts providing everything from implementation and contract and MMSEA administration to data analysis from experienced healthcare industry specialists. Our mission is to provide back-office support to your claims specialist so they can concentrate on what is important to your organization and ensure the best outcomes on all claims.

We are the only professional liability company that dedicates claims specialists to managing claims while your program manager provides added value through data analytics and back-office support.

The right information to make informed decisions

In many ways, the professional liability industry has been in the dark ages when it comes to maximizing the use of data. Many organizations are just beginning to code and track their liability claims data and leverage its use. Without this data, hospitals and health systems are missing key opportunities to reduce and even predict future risks.

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Using relevant reporting and proprietary modeling techniques, our analysts convert data into meaningful and usable intelligence. We provide highly customized reports, incorporating events and incidents into risk management profiles and claims processes, to identify trends, potential problems and the value of new approaches.

Providing meaningful data

Capturing events and incidents is one of the most challenging risk management activities presented to all types of healthcare organizations. Many attempt to capture this information in databases such as Excel or other similar programs. Sedgwick's event reporter offers a web-based solution that helps clients capture and analyze this data. Highlights include:

- Standard and customized screens to capture your unique exposures
- Robust coding capabilities
- Real-time data
- Custom reports to aid in data analysis

Expert data analysis

Our technology solutions provide the platform in which strong reporting capabilities are coupled with the superior analytical skills of our experienced staff to drive the best possible outcomes. We go beyond what is typically expected from a TPA by converting your data into knowledge. With tools such as trend and pattern analysis, we can apply risk modeling techniques that can affect claim outcomes.

Satisfied customers

Our clients include urban, suburban and rural healthcare organizations of all sizes, such as hospital systems, medical practice groups, elder care facilities, research and teaching institutions, and medical device and pharmaceutical manufacturers.

All our clients share one simple trait – a high level of satisfaction with our programs, services and their Sedgwick team. When asked why they are satisfied, clients point to our highly trained nurse investigators, designated client services managers and experienced claims specialists, as well as the size, strength and overall stability of Sedgwick.

Sedgwick's professional liability claims services...
Improving results – one claim at a time.

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To learn more about our professional liability claims management solutions, contact:

P. 800.625.6588 **E.** sedgwick@sedgwick.com

To learn more about our integrated and customized solutions, visit **SEDGWICK.COM**

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