



# Medical professional liability claims solutions

*To effectively manage medical professional liability claims, risk managers need a partner with industry expertise and solutions to help control costs and reduce risks. Sedgwick can help. We provide medical professional liability claims services for many types of healthcare facilities and physician programs, and our team has extensive experience in the coverages and dynamics of malpractice loss exposures.*

## Valuable services and support

We offer 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.

For 30 years, 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. We can help by finding innovative ways to reduce risk, ensuring compliance and preventing adverse events.

## Expert resources

We can design a program to help your business reduce frequency, indemnity, expense payments, and ultimately, total loss costs. Here's how:

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

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. Sedgwick will provide you with designated colleagues, allowing them to become familiar with the client/insured's claims handling guidelines and philosophy.

Our claims specialists are located throughout the United States so as to provide jurisdictional knowledge and familiarity with laws, plaintiff attorneys, defense attorneys and experts. This experience allows the claim specialist to make qualified recommendations to the insured in regard to claim values and strategies.

## Execution and delivery

### 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 and liability evaluations**

Our national network 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. 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.

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*Our team includes registered nurses who are thoroughly trained investigators. They can identify potential problems early, pursue resolution and, in some cases, avoid or mitigate costly litigation.*

### **Reserving**

Our experienced claims team establishes 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 and cost containment**

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.

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. 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.

**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.

**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.

**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 measures best practices against internal and client-specific requirements and provides a feedback loop for continuous improvement.

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*Our Sedgwick University training program creates knowledgeable and loyal colleagues, ensuring you receive superior service and program stability.*





## Value added services

### Reporting and compliance

- Medicare —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 system provides an interface directly to the Centers for Medicare and Medicaid Services (CMS); it sends query and claims data and accommodates the return interchange of data back from CMS to our claims system. We integrate our MMSEA reporting solution with our Medicare compliance services to gain immediate access to important data (e.g., Medicare eligibility). The earlier 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—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 our team to ensure compliance with state and federal laws and regulations governing our industry.
- Carriers —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.

### Program management

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 experts at Sedgwick providing everything from implementation and contract administration to data analysis. 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.

## 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.

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. Our 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
- Integration with our system to track events that convert to claims
- 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.

### Client satisfaction

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.

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

**P.** 800.625.6588    **E.** [sedgwick@sedgwick.com](mailto:sedgwick@sedgwick.com)



To learn more about our integrated and customized solutions, visit [SEDGWICK.COM](https://www.sedgwick.com)