



ADOPTED: October 24, 2014

EFFECTIVE: October 24, 2014; Revised January 10, 2016

SUBJECT: Claims Handling Guidelines

Should there be any discrepancy between this document and either the JOINT POWERS AGREEMENT or BYLAWS, the JOINT POWERS AGREEMENT and BYLAWS will govern.

PURPOSE:

CSURMA operates various insured and self-insured coverage programs. This policy and procedure advises in a general manner how claims will be resolved, and how to address a coverage dispute.

POLICY:

It is the policy of CSURMA that claims presented under applicable CSURMA programs will be resolved in a timely and professional manner and that Members will have the opportunity to present information supporting their recovery position should a disagreement arise. This Policy and Procedure No. 22 will apply except where a Policy and Procedure more specific to a coverage program has been duly adopted. If there is a conflict between coverage documents and this Policy and Procedure No. 22, the coverage documents will take precedence and be determinative of how the coverage matter is to be decided.

PROCEDURE:

1. Notice of a Claim - Members will provide notice of a claim to the designated claims representative of CSURMA as provided in the coverage documents. Notice will include the required information and CSURMA claims representatives will work with the Member to gather the information required to present the claim. CSURMA's claims representative will advise the Member of the assigned claims adjuster and maintain contact through disposition of the claim.
2. Claim Process – CSURMA's claim representative will:
 - a. Advise the Member of the status of the claim
 - b. Assist the Member in presenting the claim for payment, including identification of professionals who may assist the member in presenting the claim.
 - c. Respond timely and provide appropriate documentation during the claim process.
 - d. The claim process will vary from program to program as provided in the coverage document or in a policy and procedure specific to the program.
3. The Member will:

- a. Cooperate with the CSURMA claims representative and insurance company adjusters to assist in completing the claim process.
- b. Notify CSURMA claims representative and insurance company adjusters of questions or concerns relative to the claims adjustment process.
4. Coverage Determinations – CSURMA’s claims representative will advise the Member of issues that may prevent or reduce coverage of a claim. For claims arising under insured coverage programs, the adjuster will perform the claim adjusting process in compliance with the applicable coverage documents and laws of the State of California.
5. Coverage Disputes – When a dispute arises, the Member will advise CSURMA’s claims representative of the dispute and seek to resolve the matter as provided in the governing coverage documents or policy and procedure. If a coverage dispute cannot be resolved, it will be referred to the CSURMA Executive Committee, which will take action in open or closed session, and advise the Member of the decision. In no event will a member take action against CSURMA, its representatives or insurers except upon review and consent by CSURMA’s general legal counsel.