



LAKE COUNTY
BOARD OF COUNTY COMMISSIONERS
County Procedure

Title: Workers' Compensation and Property & Liability Claims Committee	Number: ES-5.03.01
	Approved: October 29, 2008
	Originator: Employee Services & Quality Improvement
	Review: October 29, 2013

I. PURPOSE AND SCOPE

The purpose of this document is to provide a written description of the Workers' Compensation and Property & Liability Claims Committee Procedures for Lake County. This document is an overview of the individual procedures which support the Workers' Compensation and Property & Liability Claims Committee.

II. REFERENCES

- A. Replaces Property & Liability Claims Committee Program (ES-5.03.01) approved December 11, 2006.
- B. Chapter 768.28, Florida Statutes, Waiver of sovereign immunity in tort actions; recovery limits; limitation on attorney fees; statute of limitations; exclusions; indemnification; risk management programs.
- C. Workers' Compensation and Property & Liability Policy (LCC-71)
- D. Workers' Compensation and Property & Liability Claims Policy (LCC-72)
- E. Property & Liability Program (ES-5.02.02)
- F. Workers' Compensation Program (ES-5.02.01)

III. APPLICABILITY

This procedure applies to the members of the Workers' Compensation and Property & Liability Claims Committee (herein referred to as Claims Committee) and those agencies covered by Lake County's Workers' Compensation and Property & Liability programs.

IV. PROCEDURES

A. Mission Statement

The purpose of the Claims Committee is to review, approve/deny and settle Workers' Compensation, Property and/or Liability claims of \$25,000 or less, and will review and recommend for approval claims greater than \$25,000 to be presented to the Board of County Commissioners for approval/settlement. The Claims Committee shall accept or give all proper releases on behalf of the County.

The Board of County Commissioners upon deeming it to be in the best interest of the program to settle a worker's compensation, property or liability claim shall have the authority to do so for claims with a value greater than \$25,000. The Board of County Commissioners shall accept or give all proper releases on behalf of the County.

B. Goals and Objectives

The Claims Committee will focus on the following goals and functions in order to meet the mission identified above.

1. Review Workers' Compensation and Property & Liability claims documents.
2. Discuss Workers' Compensation and Property & Liability claims.
3. Seek advice from the Third Party Administrator and outside council when necessary.

C. Meeting Schedule - The Claims Committee will meet and discuss claims in person, and when deemed appropriate the Claims Committee will review, discuss and approve/deny claims via conference calls or e-mail.

D. Quorum Rules - A minimum of 75% of the membership is required to be present in order to hold an in-person or conference call meeting. A minimum of 75% of the membership is required to be copied on and participatory during an e-mail discussion. Resolutions and process directions are passed by a majority vote, regardless of forum; in-person meeting, conference call, or e-mail.

E. Membership - The membership of the Claims Committee is comprised of three (3) employees of Lake County Board of County Commissioners with representation from the Office of Employee Services and Quality Improvement (Employee Services) and the County Attorney's Office.

F. Roles and Responsibilities

1. Chair - A representative from Employee Services will chair the Claims Committee. The Chair will coordinate the organization and scheduling of the

Claims Committee, ensure that the meeting agendas are followed, and that assignments and commitments are achieved. The Chair will also be the technical mentor and coach of the committee by providing guidance in terms of regulatory requirements, technical resources and references, etc.

2. Members - Complete the functions and tasks necessary to fulfill the goals and objectives previously listed.

G. Facilitation & Documents

1. Meeting Agenda (*Attachment 1*) - The agenda will be prepared by the Chair prior to the meeting or e-mail discussion, and a copy will be e-mailed to the Claims Committee members before the meeting or e-mail discussion occurs. The following information will be included on the agenda:
 - a. Date, Time and Location/Forum of the meeting
 - b. Topics for Discussion (e.g., current workers' compensation, property and liability claims)
2. Member Sign In Sheet (*Attachment 2*) - A member sign in sheet will be maintained by the Chair and made available to the members to sign at the beginning of each meeting, when applicable. The following information will be included on the Sign In Sheet:
 - a. Date, Time and Location of Meeting
 - b. Name, organization, position title and space for signature of Claims Committee members
3. Meeting minutes (*Attachment 3*) - Minutes will be taken for each meeting, regardless of forum, and such minutes shall include the following:
 - a. Members that attended or participated
 - b. Topics discussed and agreed upon regarding each claim, including a brief description, background information, points discussed and outcome.
 - c. The Chair will be responsible to ensure that the minutes are complete, accurate and submitted on a timely basis. (Minutes will also be distributed following each meeting via e-mail to the County Manager and Claims Committee members.)
4. Record Keeping - All records required by these procedures will be maintained by the Chair and located in the Employee Services departmental files.

V. RESERVATION OF AUTHORITY

The authority to issue or revise this Procedure is reserved to the County Manager. The County Manager may authorize exceptions to this procedure when deemed appropriate.

Approved by: Cindy Hall, County Manger
Date: October 29, 2008

Attachment 1

Workers' Compensation and Property & Liability Claims Committee
Lake County Board of County Commissioners

Agenda

Date: _____

Time: _____ (if applicable)

Location/Forum: _____

- 1) Topic for Discussion
(Background and recommendation for claim)

- 2) Topic for Discussion
(Background and recommendation for claim)

Attachment 2

Workers' Compensation and Property & Liability Claims Committee
Lake County Board of County Commissioners

Sign In Sheet

Date: _____

Time: _____

Location: _____

Organization	Name	Title	Signature

Attachment 3

Workers' Compensation and Property & Liability Claims Committee
Lake County Board of County Commissioners

Minutes

Date: _____

Time: _____ (if applicable)

Location/Forum: _____

BCC Department	Member Name	Title

1) Short Description -

Background:

Date, Claims Meeting –
Discussion Item(s) -

Outcome –

Date, Claims Meeting –
Discussion Items -

Outcome -

2) Short Description -

Discussion Item(s) -

Outcome -

Time Meeting adjourned: _____ (if applicable)

Respectfully submitted by _____, Title, Employee Services

cc: County Manager
Workers' Compensation and Property & Liability Claims Committee