

July 2019

The Official Newsletter of the Texas Association of Special Investigation Units (TASIU)

Editor: Gabriella Marshall

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HOUSTON Meeting Wednesday, July 25, 2019 9:00 am TASIU Chapter meeting 9:30 am TASIU Speaker 10:30 am NICB meeting

SAN ANTONIO (this month only) Thursday, July 25, 2019

9:00 AM TASIU 9:30 AM Speaker 10:30 AM NICB meeting

TASIU meets in both Houston and San Antonio to provide updates on chapter activity and 1-hour of antifraud training for our members. A link to upcoming TASIU training can be found at www.tasiu.org.

TASIU and NICB work together to schedule their respective meetings on the same day for convenience.

*TDI CE credit may be offered. Please have TDI adjuster license number.

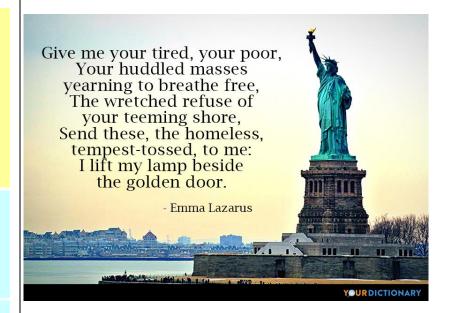
Texas Antifraud Vendors Directory

Please be sure to check out our Texas Antifraud Vendors Directory in this issue.

We hope it becomes a valuable reference for you as a one-stop directory for claim investigative needs and suggest printing copies for your claim office bulletin boards.

To our vendors, thanks for your support.

Happy Fourth of July!



Our Houston July meeting is Wednesday, July 10.
Our San Antonio meeting is on a different day,
Thursday, July 25 than usual due to the holiday.
In Houston, our July speaker is Trent Simon from
HospitalCanvass.com who will be giving a presentation about hospital canvassing.

Our San Antonio speaker is Gabriella Marshall from TASIU who will be speaking about investigating fatality claims.

Our August Houston speaker will be an Ethics CE presentation from Michele Hughes of US Forensics. If you need an ethics CE credit this is a great opportunity.

TASIU was officially formed as a 501(c)(3) nonprofit organization by a group of Houston SIU investigators in 1993. TASIU now meets in both Houston and San Antonio.

The TASIU Observer is published monthly and distributed throughout the Texas SIU community. If you would like to submit an article for consideration, please submit your inquiry to Gabriella Marshall, gabriella.marshall@nationwide.com

TASIU OFFICERS:

President (2018-2020): **Jesse Lopez,** *Travelers Insurance,* <u>noahsmile@msn.com</u>
Vice President (2018-2020): **Ken Pearce,** *ACCC Insurance,* <u>hunterclus@yahoo.com</u>
Secretary (2018-2020) **Gabriella Marshall,** *Nationwide Insurance,* gabriella.marshall@nationwide.com

Treasurer (2020-2022): **Les Sutton**, *Kemper/Infinity*, <u>LSutton@Kemper.com</u> Sergeant at Arms (H): **Stephen Schoonover**, *HCFMO*,

stephen.schoonover@fmo.hctx.net

TASIU Counsel: Tom J. Usery, Law Office of Tom J. Usery, PLLC, tju@userypllc.com

TASIU BOARD OF DIRECTORS:

Director (2018-2020) Joel Ramirez, National General, joel.ramirez@ngic.com

Director (2016-2018) Darren Ravey, Farmers Insurance,

darren.ravey@farmersinsurance.com

Director (2018-2020) Keith Barbier, USAA, keith.barbier@usaa.com

Director (2017-2019) Daniel McGettrick, Farmers Insurance,

daniel.mcgettrick@farmersinsurance.com

Director (2017-2019) **David Godell**, AAA Texas, godell.david@aaa-texas.com
Director (2017-2019) **Richard Luna**, The Hartford, Richard.Luna@thehartford.com

TASIU PAST PRESIDENTS/ADVISORS:

Past President: Brent Walker, Travelers, bwalker4@travelers.com
Past President: Doug Endicott, AAA Texas, Endicott.doug@aaa-texas.com

TASIU COMMITTEES:

Membership Education & Training Constitution & Bylaws Laws & Legislation

- San Antonio - Outreach & Awareness - Nominations & Awards

- Newsletter - Seminar - Website

Anti-trust Statement: As Members of this organization or participants in our meetings, we need to be mindful of the constraints of the Anti-trust laws. There shall be no discussions of agreements or concerted actions that may restrain competition. The prohibition includes exchange of information concerning individual company rates, coverages, market practices, claims settlement practices, or any other competitive aspect of an individual company's operation. Each member or participant is obligated to speak up immediately to prevent any discussion falling outside the bounds indicated.

Advertise with TASIU and get noticed by the Texas SIU community.

http://www.tasiu.org/content.aspx?page_id=87&club_id=62802&item_id=72138

international Association of Special Investigation Units

The Texas Association of Special Investigation Units is the Texas-South chapter of the International Association of Special Investigation Units.

The IASIU Mission:

- Promoting a coordinated effort within the industry to combat insurance fraud;
- Providing education and training for insurance investigator;
- Developing greater awareness of the insurance fraud problem;
- Encouraging high professional standards of conduct among insurance investigators; and
- Supporting legislation that acts as a deterrent to the crime of insurance fraud.

TASIU Chapter Membership

Who can join?

As the Texas-South chapter of the International Association of Special Investigation Units (IASIU), we follow IASIU membership rules and our chapter members include:

IN ORDER TO BE A MEMBER OF TASIU, YOU MUST ALSO BE A MEMBER OF IASIU. We are a chapter of the national/international organization unless you are in law enforcement.

Regular Chapter Membership (must also be a member of IASIU):

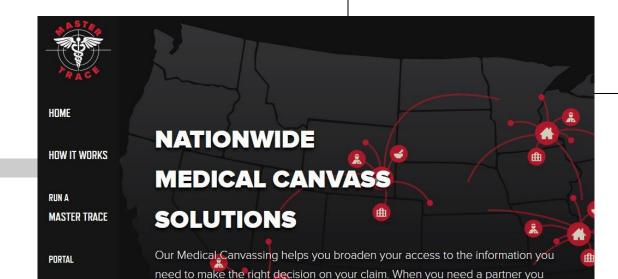
- Full-time SIU employees of insurance companies or self-insured corporations whose primary responsibility is the investigation or supervision of insurance fraud,
- Agents of the National Insurance Crime Bureau.

Associate Chapter Membership (must also be a member of IASIU*):

- Employees of insurance companies, third party administrator, state fraud bureaus and government agencies involved in or providing special expertise in the investigation of insurance fraud.
- Local, state, federal, provincial, or similar governmental entities' law enforcement officers, or prosecutors,*

*International (IASIU) membership is optional for sworn law enforcement and fire officials who join the TASIU chapter.









The Law Offices of Tom J. Usery, PLLC

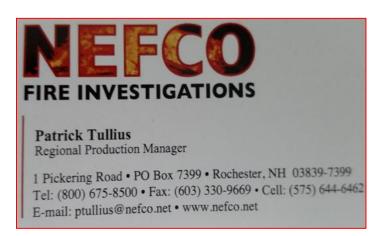
Phone: (281) 362-2797 Email: <u>tju@userypllc.com</u>

TASIU Counsel









Dues Renewal Notice

Please remember to be eligible for membership you must be a member in good standing (dues paid) of IASIU. This includes to be able to take the CIFI or CIFA Exams. Payment can be made on-line, by cash, or by check. Please check the website for more information. Please go the TASIU website and renew your membership if you haven't already.

The link is here: http://tasiu.clubexpress.com/content.aspx?page_id=0&club_id=62802

What are the benefits of joining IASIU/TASIU?

- Certification available Certified Insurance Fraud Investigator
 - Free training for members, regular meetings
 - TASIU newsletter
 - Job opportunities
 - Latest fraud related news
 - Networking and connections
 - Opportunities for Certifications



TASIU Scholarship WINNERS!

The TASIU Chapter sponsors two \$1000 scholarships for students. To qualify, a chapter member, a dependent child or grandchild of a chapter member may apply. This is for a high school senior attending a qualified college, university, or technical school, or a student currently attending a university, college or technical school The chapter member sponsoring the student must be an active member of the TASIU and IASIU. The TASIU awards two \$1,000 scholarships each year for member-sponsored applicants. Each scholarship is distributed in two \$500 payments for the fall and spring semesters to total \$1,000. The scholarship for 2019 closed May 31, 2019.



AND THE WINNERS ARE:

Sponsor: Shay Gause, USAA

Kate Gause is a sophomore Construction Science student at Texas A&M University in College Station. She discovered her passion for this career path while attending Construction Careers Academy in San Antonio, TX. She was selected as one of two Construction Science students to attend a school sponsored study abroad to Costa Rica this past May. She enjoys competing in build competitions and using her skills to help members of the community that are unable to afford home repairs. She is sponsored by her father, TASIU member, Shay Gause. Shay is employed by USAA as the Director of SIU.



Sponsor: Chris Janvier, TASIU/North Texas IASIU

My name is Emily Janvier. I am 20 years old and I am going into my Junior year of college. I attend The University of North Texas and am a member of the sorority, Alpha Phi. My dad, Christopher Janvier, is a member of South Texas Chapter of IASIU. I am so thankful for this scholarship opportunity. Go Mean Green!

WEBINAR: TRACKING, TRACING AND MONITORING CRYPTOCURRENCY TRANSACTIONS

Please join us for this 1 hour webinar is being presented by Teresa Anaya, Director - Financial Institution Strategy, Blockchain Intelligence Group on Thursday, July 18th at 11:00 am PT, 12:00 pm MT, 1:00 pm CT, 2:00 pm ET.

7/18/2019

When:

1:00 pm CT

Where:

Online Webinar

N83 W13410 Leon Road

Menomonee Falls, Wisconsin 53051

United States

Contact: Greg Haag

ghaag@iasiu.org

414 375-2992 ext. 1118

Online registration is available until: 7/18/2019

Bitcoin has been an effective way to transact anonymously which created a welcoming environment for criminal activity. As more anti-money laundering controls are put into place by the cryptocurrency exchanges, investigators can now use these controls to help them look for fraud.

In this session you will gain a basic understanding of Bitcoin and Blockchain. You'll learn the anatomy of a Bitcoin transaction and see how to "follow the money." You'll also review case studies for an introduction to the different types of illicit activity associated with cryptocurrency.

Registration is free to IASIU members and \$50 for non-members to attend this event. If you are not a member of IASIU who works in SIU and would like to register please contact our office.

WEBINAR: INVESTIGATION TO LITIGATION: DOES YOUR EVIDENCE YIELD RESULTS?

Please join us for this 1 hour webinar is being presented by Adam Brand, Partner, Brand & Tapply on Wednesday, November 13th at 11:00 am PT, 12:00 pm MT, 1:00 pm CT, 2:00 pm ET.

11/13/2019

When: 1:00 pm CT

Online Webinar

Where: N83 W13410 Leon Road

Menomonee Falls, Wisconsin 53051

United States

Greg Haag

Contact: ghaag@iasiu.org

414 375-2992 ext. 1118

Collecting evidence during an investigation is the critical role of investigators and adjusters alike. Will the evidence you collect during the investigation be admissible at trial? Will all that work be without reward or will your efforts win the day? This presentation will discuss strategies in collecting information/evidence during the investigation to ensure its admissibility at trial. This presentation will also address how the decisions made during an investigation will impact the litigation and provide you with best practices to keep you from a tough day on the witness stand.

NEWS YOU CAN USE

Body shop owner sentenced for fraud

March 20, 2019

A Travis County body shop owner was sentenced to 10 years of probation after Texas Department of Insurance investigators found he had reported wrecks that never took place and damaged vehicles to increase insurance payouts.

The fraud took place over about five years, during which Elias Zapata changed the body shop's name several times to avoid bad reviews.

Zapata pleaded guilty to a first-degree felony in February. He was sentenced March 13 to probation and ordered to repay more than \$76,000.

The case was prosecuted by Travis County Special Assistant District Attorney Brian Chandler, one of six prosecutors employed by TDI who work in district attorneys' offices across the state to fight insurance fraud.

TDI investigators are certified peace officers and work closely with law enforcement authorities around the state when investigating fraud cases. You can report suspected insurance fraud by calling 1-800-252-3439.

April 2, 2019

TDI to issue call to identify rules that need updating

Agency plans structured process later this year to collect suggestions

Best practices, strong consumer protection, modernization, user-friendly processes, clear communication – these are the goals of improvements happening across every program at the Texas Department of Insurance. As part of that focus, Insurance Commissioner Kent Sullivan will be issuing a call later this year to identify specific agency rules that need to be updated or changed.

"We want people to comply with the law," Sullivan said. "To facilitate that, you have to make sure your rules and processes are user-friendly. We'll be asking interested stakeholders to identify any rules that make compliance unreasonably difficult or that they find to be ambiguous, out of date, or inconsistent with statute."

TDI staff are working on a structured process and timeline to collect, review, and prioritize suggestions about specific rules that need to be modernized or changed. Details about the process will be provided later this year.

"We want to announce this now so our stakeholders have plenty of time to think through their suggestions," Sullivan said. "It will be most helpful when interested parties can tell us exactly what issue or confusion the current language causes and have proposals on how we can change it. That information also will help us determine which rules need to be updated and how to prioritize those projects."

Sullivan noted that the agency's rulemaking standards remain the same. "Our rules must be authorized by and consistent with state law," he said. "We also will continue to review our rules on a regular schedule as required by law. This project is an additional effort to identify rules that need to be modernized."

To get a notice when the agency announces more information about the open suggestion period, <u>sign up</u> to get email notices from TDI and subscribe to the News category.

February 28, 2019

Former agent gets 5 years for selling fake policies

A San Antonio woman pleaded guilty to fraud after a Texas Department of Insurance (TDI) investigation found she pocketed money from clients who thought they were buying home policies.

Cynthia Olague, a former insurance agent, stole premiums from more than 20 different homeowners leaving their property unprotected.

A TDI investigation found Olague would collect premiums but deposit the payments into her personal checking account, instead of forwarding the money to the insurance company. To hide the crime, she created fake insurance documents to give to her clients and their mortgage companies.

Several victims only found out they did not have coverage when they tried to file insurance claims for losses.

Olaque was sentenced Monday to five years' in prison and ordered to pay back \$19,128.

TDI investigators are certified peace officers and work closely with law enforcement authorities around the state when investigating fraud cases. You can report suspected insurance fraud by calling 1-800-252-3439.

Texas Department of Insurance Obtains Order Requiring Houston Company to Pay \$250,000 in Workers' Comp Fraud Case

A Houston company has pleaded guilty to workers' compensation premium fraud in a case that spanned four years. Alpha Mar, which makes custom parts...

By FC&S Legal Director Esq. Steven A. Meyerowitz | January 29, 2019 at 05:00 AM

A Houston company has pleaded guilty to workers' compensation premium fraud in a case that spanned four years.

Alpha Mar, which makes custom parts for various industries, entered the plea in a district court in Travis County, Texas. The company was ordered to pay \$250,000 to Texas Mutual Insurance Company, the workers' compensation carrier.

The prosecution unit of the Texas Department of Insurance, Division of Workers' Compensation ("DWC") obtained the conviction. The DWC prosecution unit is embedded in the Travis County district attorney's office.

Workers' compensation premiums are based on an employer's payroll, job classification codes, and the employer's past losses, which are used to estimate future losses. Manipulating or misrepresenting one or more of these factors to get lower rates is premium fraud.

In a statement, the DWC said that, from 2008 to 2012, John Stergion of Alpha Mar concealed payroll and misrepresented the number of employees the company had. This resulted in a lower workers' compensation policy premium.

"When companies commit premium or payroll fraud, they can put their employee's coverage at risk," said Debra Knight, DWC's deputy commissioner of compliance and investigations. "It gives dishonest companies a business advantage over ethical companies that are paying the full cost of their premiums."

Learn more: www.tdi.texas.gov/fraud/.



SEMINAR SPONSOR - THANK YOU!



City of Pasadena Fire Marshal's Office









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Investigator

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www.theclaimsinvestigator.com



Milan G. Marinkovich & Associates, PLLC

25211 Grogans Mill Rd Suite 130, Spring, Texas 77380, United States

Phone: (832) 232-9600

SKOPENOW



Employment Opportunities

Does your company have an SIU position to post / announce? E-mail the information to gabriella.marshall@nationwide.com

HARRIS COUNTY DISTRICT ATTORNEY FRAUD EXAMINER

The Harris County District Attorney's Office employs Fraud Examiners in the Major Fraud Division, Consumer Fraud, and the Public Integrity Division. The Major Fraud Division specializes in investigating and prosecuting all types of white-collar crimes (swindles, frauds, thefts, insurance fraud, misapplications, mortgage fraud, etc.) as opposed to street crimes. The Consumer Fraud Division specializes in investigating and prosecuting all types of criminally fraudulent conduct that occurs, at least in part, in Harris County, Texas. The Consumer Fraud Division often works in conjunction with other law enforcement or regulatory agencies in investigating potentially fraudulent conduct that occurs in the marketplace. The Public Integrity Division specializes in investigating and prosecuting criminal allegations against public servants in their official capacity.

The duties of a Fraud Examiner, under the supervision of prosecutors and/or investigators, include but not limited to the following:

- 1. Interviewing individuals who are victims, witnesses, and suspects for the purpose of:
- Determining the criminal potential of each complaint.
- Developing all facets of any criminal schemes and obtaining all testimony and documentary evidence to establish the commission of a crime.
- 1. Review and analyze financial records to identify and trace stolen funds to their final disposition.
- 2. Preparation of evaluation reports and evidentiary exhibits to assist the prosecutors in grand jury presentations and at trial, including giving witness testimony.
- 3. Testifying as an expert witness.

https://hrrm.harriscountytx.gov/Pages/CareerOpportunities.aspx

APRIL 1, 2019

LOCATION

Houston

DEPARTMENT

Legal

The ACLU is the nation's foremost defender of civil liberties and civil rights, dedicated to defending the Bill of Rights and advocating for marginalized communities through litigation, legislation, and public education. The ACLU of Texas, founded in 1938 and headquartered in Houston, is one of the largest ACLU affiliates in the nation. The ACLU of Texas has regional offices in Austin, Brownsville, Dallas, and El Paso.

Whether it's protecting the rights of immigrants, ending mass incarceration, achieving full equality for the LGBT community, or preserving the right to vote and reproductive rights, the ACLU takes up the toughest civil rights and liberties cases to defend all people from government abuse and overreach.

The ACLU of Texas seeks a full-time Paralegal / Investigator in its Houston office to provide strategic support and coordination for the Legal Department. They will assist in the identification, research, investigation, and response to civil liberties and civil rights violations. Additionally, they will help manage legal filings and administrative support for the Department. This position requires a self-directed, highly-organized person with energy, initiative, and enthusiasm.

Responsibilities and Expectations Include:

- Assist in case management, including maintenance of client relationships, court records and electronic files.
- Anticipate and identify litigation tasks in case management including but not limited to calendaring and case files.
- Conduct factual investigations related to potential civil rights violations, including handling on-site interviews and witness development.
- Assist with finalizing motions and preparing discovery requests and responses, as appropriate.
- Assist with drafting legal letters, FOIA and Public Information Act requests, and other correspondence, as appropriate, and managing responses.
- Perform general paralegal work, including preparing documents for filing in court, cite-checking, proof reading, and using PACER and Westlaw.
- Assist with management of intake process, including coordinating weekly intake review and data entry.
- Prepare reports including but not limited to metrics and maintain docket.

Qualifications:

- Commitment to civil rights and civil liberties.
- Demonstrated ability to prioritize and handle a variety of tasks, and meet established deadlines.
- Excellent computer skills, including proficiency with Microsoft Word, Excel, Outlook, and PowerPoint.
- Strong internet research skills.
- Well organized, efficient, and highly motivated.
- Excellent interpersonal and communications skills and ability to work in a fast-paced workplace.
- Knowledge of diverse groups, experience working with a multicultural workforce. Sensitivity and appreciation of cultural differences is required.
- Bachelor's degree required.
- Spanish speaking and writing proficiency.
- Willingness and ability to travel.

Compensation:

Salary is commensurate with experience and within the parameters of ACLU of Texas's salary scale. Excellent benefits include a generous paid time off policy; medical, dental and

vision insurance; 401(k) plan with an employer match; life and long-term disability insurance, and generous paid holidays.

To Apply:

Send cover letter, resume, and names and contact information of three professional references by email to jobs@aclutx.org, with a copy to Christopher Clay at cclay@aclutx.org, and include "Paralegal" in the subject line.

This job description provides a general but not comprehensive list of the essential responsibilities and qualifications required. It does not represent a contract of employment. The ACLU of Texas reserves the right to change the job description and/or posting at any time without advance notice.

The ACLU of Texas is an equal opportunity employer. We value a diverse workforce and an inclusive culture. The ACLU of Texas encourages applications from all qualified individuals without regard to race, color, religion, gender, sexual orientation, gender identity or expression, age, national origin, marital status, citizenship, disability, or veteran status.

The ACLU of Texas undertakes affirmative action strategies in its recruitment and employment efforts to assure that persons with disabilities have full opportunities for employment in all positions.

13-Jun-2019

2VP, Complex Claim Liability Spec

20322BR

Company Information

Solid reputation, passionate people and endless opportunities. That's Travelers. Our superior financial strength and consistent record of strong operating returns mean security for our customers - and opportunities for our employees. You will find Travelers to be full of energy and a workplace in which you truly can make a difference.

Job Summary

Investigate, evaluate, reserve, negotiate and resolve the company's most severe and/or complex claims, in multiple jurisdictions, in accordance with Best Practices. Provide quality claim handling and superior customer service on assigned claims, while engaging in indemnity & expense management. Promptly manage claims by completing essential functions including contacts, investigation, damages development, evaluation, reserving, litigation management, and disposition. Provides consulting and training resources, and serve as a contact and technical resource to the field and our business partners. Provides consulting and training and serves as an expert technical resource to other claim professionals, business partners, customers, and other stakeholders as appropriate or required. This may include a specific assignment as a severity management resource to one or more field offices.

Primary Location

Houston - Texas - United States

Job Category

Claim

Position Type Experienced/Professional Target Openings

1

Primary Job Duties & Responsibilities

Directly handle the Company's most severe and complex claims. Provide quality customer service and ensure file quality timely coverage analysis and communication with insured based on application of policy information to facts or allegations of each case. Consult with Manager on use of Claim Coverage Counsel as needed. Directly investigate each claim through prompt and strategically-appropriate contact with appropriate parties such as policyholders, accounts, claimants, law enforcement agencies, witnesses, agents, medical providers and technical experts to determine the extent of liability, damages, and contribution potential. Interview witnesses and stakeholders; take necessary statements, as strategically appropriate. Complete outside investigation as needed per case specifics. Actively engage in the identification, selection and direction of appropriate internal and./or external resources for specific activities required to effectively evaluate claims, such as Subro, Risk Control, nurse consultants and fire or fraud investigators and other experts. Verify the nature and extent of injury or property damage by obtaining and reviewing appropriate records and damages documentation. Utilize diary management system to ensure that all claims are handled timely. At required time intervals, evaluate liability & damages exposure. Establish and maintain proper indemnity & expense reserves. Provide guidance to underwriting business partners with res accuracy and adequacy of, and potential future changes to, loss reserves on assigned claims. Recommend appropriate cases for discussion at roundtable. Attend and or present at roundtables/authority discussions for collaboration of technical expertise resulting in improved payout on indemnity and expense. Share experience and deep knowledge of creative resolution techniques to improve the claim results of others. Apply the Company's claim quality management protocols, Best Practices and metrics to all claims; document the rationale for any departure from applicable protocols and metrics. Develop and employ creative resolution strategies. Apply expert litigation management through the selection of counsel, evaluation and direction of claim and litigation strategy. Effectively and efficiently manage both allocated and unallocated loss adjustment expenses. Actively participate in periodic file quality reviews. Responsible for prompt and proper disposition of all claims within delegated authority. Negotiate disposition of claims with insureds and claimants or their legal representatives. Recognize and implement alternate means of resolution. Manages litigated claims. Develop litigation plan with staff or panel counsel, including discovery and legal expenses, to assure effective resolution and to satisfy our customers. Track and control legal expenses to assure cost-effective resolution. Develop and employ innovative techniques to manage expense and outcome when independent counsel is engaged. Attend depositions, mediations, arbitrations, pre-trials, trials and all other legal proceedings, as needed. Closely monitor independent counsel to ensure quality product. Update appropriate parties as needed, providing new facts as they become available, and their impact upon the liability analysis and settlement options. Appropriately deal with information that is considered personal and confidential. Fulfill specific service commitments made to certain accounts, as outlined in Special Account Communication (SAC) instructions, and inquires from agents and brokers. Represent the company as a technical resource, attend legal proceedings as needed, act within established professional guidelines as well as applicable state laws. Actively provide mentoring and coaching to less experienced claim professionals to increase the technical expertise and improve bench strength. Evaluate all claims for recovery potential; directly handle recovery efforts and/or engage and direct Company resources for recovery efforts. Obtain and evaluate current information regarding trends in the law; digest and communicate this information to other Company departments and divisions to assist in underwriting and management decisions. Assist underwriting business partners in marketing and account-contact Field Severity Support: Some Complex Claim Specialists may be responsible for all or some of the following: Collaborate with field severity units in the management and evaluation of some of the Company's severe

and complex liability claims by providing claim handling guidance, recommendations and strategies to Field Product Line Managers, Unit Managers, and Major Case Specialists, for timely, cost effective resolution of liability major cases. Actively participate in the coverage, liability and damages analysis and development of creative resolution strategy for severity cases handled in the field. Assist in the recognition of available defenses to contain loss payout and setting of appropriate reserves. Regularly and actively participate in field severity roundtables to share expertise and recommendations in all aspects of severe claim management. Collaborate with the severity unit in compliance with company claim policies, procedures, practices and standards for the handling of cases that meet the Critical Claim referral guidelines. Provide mentoring or training as request by field severity management. Ensure that the right resources are being applied to each claim to achieve the best result at the most optimal cost.

Minimum Qualifications

10+ years liability claim handling experience. In order to perform the essential job functions of this job, acquisition and maintenance of Insurance License(s) may be required to comply with state and Travelers requirements. Generally, license(s) are required to be obtained within three months of starting the job.

Education, Work Experience & Knowledge

College degree preferred or equivalent business experience. 5-10 years experience handling serious injury and complex liability claims preferred (casualty claim operations environment determining coverage, liability, investigation, research, evaluation, negotiation and settlement).

Job Specific & Technical Skills & Competencies

Position requires a proficiency in oral and written communications. Advanced communications skills are required to understand, interpret and convey highly technical information in simple terms to others. Thorough understanding of product lines, objectives of claim management, and legal theory issues involving claim resolution. Familiarity with commercial lines/personal lines products, policy language, exclusions, ISO forms, effective claims handling practices. Extensive experience handling large exposure and/or complex liability claims Familiarity with commercial lines products, policy language, exclusions, ISO forms, effective claims handling practices. Thorough understanding of the litigation process, relevant case and statutory law. Ability to recognize, analyze and advise on complex coverage, liability and damage issues. Expert written and verbal communication skills to understand, synthesize, interpret and convey complex data. Create and manage positive working relationships with business and marketing partners. Ability to analyze and effectively respond to human resource issues. Utilize technology as a strategic tool. Ability to make independent decisions up to \$1,000,000 without involvement of supervisor. Competencies: Leading the Business: Drive Results. Leads Change. Executes Business Strategy. Leading Others: Attract Top Talent. Maximize Individual Performance. Holds Others Accountable. Aligns Rewards. Creates and Sustains a Dynamic Workplace. Leading Self-Emotional Intelligence: Demonstrates Self-Awareness. Initiative and accountability. Applies Critical Thinking. Communicates Effectively & Influences Others. Exhibits Courage, Conviction & Credibility.

Equal Employment Opportunity Statement

Travelers is an equal opportunity employer.

Field Investigator

G4S Compliance & Investigations 11,340 reviews - Houston, TX

Apply Now

Come grow with the Leader. G4S Compliance & Investigations has an opening for a full time surveillance investigator in **Houston, TX**. The ideal candidate will conduct field investigations to assist our customers in validating legitimate claims as well as identifying suspect claims.

JOB DESCRIPTION

Conduct Surveillance Investigations in accordance with state/federal law, and company policy

- Conduct case file review and work case in accordance with assigned objectives
- Discreetly acquire video evidence of subject's activities
- Create Daily Investigative Report which provides detailed documentation of subject's activities
- Analyze daily investigative results and write summaries highlighting significant findings
- Provide live verbal updates to customer's and internal personnel (as required)
- Submit work product daily through secure digital portals
- Provide testimony at depositions and/or hearings (when required)

QUALIFICATIONS

- Must Possess Valid State Driver's License
- Must be Dependable and able to meet Deadlines
- Must be a Self-Starter capable of working with Limited Supervision
- Must Possess a Vehicle Suitable for Surveillance
- Must Possess Investigative Tools (Laptop, Video Cameras, Mobile Phone, etc.)
- Must Possess Strong Writing and Verbal Communication Skills
- Must Possess Ability to function in a Digital Technology Environment
- Must be Available to work Flexible Schedule to include weekends
- Criminal Justice or related Degree preferred, but experience working surveillance investigations on insurance claims may be substituted in lieu of degree. Experience in Loss Prevention, Security and Law Enforcement will also be considered as well.

Interested candidates meeting the above requirements for this position should forward a cover letter and resume to G4S for review. For more information on G4S C&I please visit our website at www.g4s.us/en/Products-and-Services/Investigations

G4S Compliance & Investigations is an EEO employer fully committed to attracting, retaining, developing, and promoting the most qualified individuals without regard to race, religious creed, color, age, sex, national origin, ancestry, marital status, sexual orientation, disability or any other classification protected by applicable federal, state or local law. We are dedicated to providing and maintaining an inclusive work environment free from discrimination and harassment, where employees are treated with respect and dignity.

G4S Compliance & Investigations offers a comprehensive compensation and benefits package, for full time employees that includes medical, dental, vision, life, long-term and short-term disability, and a matching 401k plan.

Job Type: Full-time

Experience:

Surveillance Investigations: 1 year (Preferred)

Education:

• Bachelor's (Preferred)

Location:

Houston, TX (Preferred)

Work authorization:

United States (Required)

Job Description - Premium Auditor (ADM0002AG)

Job Description

The TASIU Observer July 2019, page 21
Premium Auditor-ADM0002AG
Supervisory Position: No
Description
CNA has an opening for a Premium Auditor supporting our audit needs in the state of Texas. This role is based in Houston, TX.
This opportunity is a work from home position that includes a company provided vehicle in order to make daily physical visits to various policyholder offices.
Job Summary
Under broad supervision ensures the financial integrity of premium development. Verifies and determines final exposures on commercial insurance policies that include but not limited to automobile, general liability and workers compensation. Ensures that all audits are conducted in a timely and cost-effective manner.
Essential Duties & Responsibilities
Conducts audits of accounts substantiating accuracy of policy classifications, exposure base inclusions/exclusions.

- status of subcontractors, subcontractor cost allocations, business and final customer relationship and audits the overall business.
- 2. Conducts interviews with the insured to obtain information regarding the insured's operations and business model to obtain a good working knowledge and analysis of the risk. Determines employee job classifications based on job role and responsibilities and exposure to hazard.
- 3. Compiles and analyzes client's operations and accounting records for accuracy in preparation of audit, including examining and authenticating classifications related data from business records as well as a visual inspection of the insured?s business.
- 4. Recognizes and communicates regular and irregular audit findings and financial conditions of an insured to the agent and branch underwriting. Informs corporate investigations and underwriting of questionable operations, including suspected fraud.
- 5. Prioritizes territorial assignment for policy review and audit load while adhering to strict time deadlines...
- 6. Stays up to date on trends and developments within specialty area as well as the insurance industry.
- 7. May assist in the performance of operational audits.

May perform additional duties as assigned.

Reporting Relationship
Manager or above Skills, Knowledge & Abilities
1. Strong knowledge of corporate auditing practices, procedures and principles as well as solid knowledge of the insurance industry, the organization and departmental functions and operations.
2. Strong knowledge of statutory and other complex accounting principles, practices and procedures.
3. Ability to effectively ask probing questions of insured to ascertain conclusions about the business operations. Interacts both tactfully and effectively in difficult situations to properly identify risk, delving and probing further as judgment and situation dictates.
4. Strong knowledge of the General Liability, Workers Compensation and Business Auto Liability functions and procedures, including state and regulatory guidelines.
5. Excellent project management, organizing and planning skills. Must be self-directed.
6. Strong analytical and problem solving skills with the ability to effectively resolve issues of a complex nature.
7. Strong interpersonal, presentation, verbal and written communication skills with the ability to effectively influence and interact with internal and external business partners.
8. Strong knowledge of Microsoft Office Suite, accounting systems and applications, and other business-related software systems.
9. Ability and willingness to travel.

Education & Experience

- 1. Bachelor's Degree, preferably in accounting or finance, or equivalent.
- 2. Typically a minimum of two years related work experience.
- 3. PAAS certification

Job

Administration

Primary Location

United States-Texas-Houston

Organization

WWO Executive

Job Posting

Jun 18, 2019

Unposting Date

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State Regulatory News

Texas Board of Chiropractic Examiners

The most recent newsletter available, September 2018, can be viewed here: https://www.tbce.state.tx.us/NewsLetter/2018/NLSeptember2018.pdf

Texas Medical Board

Read the latest TMB newsletter, published in July 2018, which includes complaints and discipline

http://www.tmb.state.tx.us/dl/73F98DF6-38C8-5C3A-2B39-5318A3E41EE3

Texas State Bar

Recent attorney disciplinary actions can be found at: http://txboda.org/

The entire Journal can be read on-line at https://www.texasbar.com/AM/Template.cfm?Section=Table of Contents

Texas Dept of Insurance

The Texas Department of Insurance latest cases:

http://www.tdi.texas.gov/fraud/cases.html



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