



A MOST MEMORABLE CLAIM

CLM's ADR Committee Highlights the Importance of Making Human Connections

By Cayce E. Lynch

Why is it when we talk about alternative dispute resolution, we often forget the human connections at play? A successful claims resolution involves building rapport and trust with the claimant to get the case

resolved, yet we seem to focus more on the end result. To change that, CLM's ADR Committee will feature claims professionals sharing lessons learned from their most memorable claims.

For this first interview, I spoke with Theresa Ott, claims manager for Baystate Health Clinical Safety, Risk Management & Insurance. With

more than 20 years in the industry (and now working for a self-insured organization), Ott has learned that embracing a collaborative approach to claims resolution—and exploring how to best serve the interest of all parties involved—often leads to more timely and positive outcomes, even in the face of the most unfortunate events.



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LYNCH: CAN YOU SHARE SOME BACKGROUND ON THE CLAIM THAT LED TO YOUR MOST MEMORABLE RESOLUTION?

OTT: About 12 years into my career, I resolved a medical malpractice claim in which a widow I'll call "Nancy" was seeking compensation for the death of her husband who passed after presenting himself in the emergency room with multiple comorbidities. Both Nancy and her husband were in their late 70s at the time of the unfortunate incident.

LYNCH: WHAT WAS YOUR APPROACH TO INVESTIGATING THE CLAIM?

OTT: I often find the best way to start investigating any case is to get the story in the claimant's own words. By the time I receive a claim, the story has been told and re-told several times, and important details may be missing. When I first spoke with Nancy, I apologized for the loss of her husband and gently asked for her explain what she thought had happened.

LYNCH: WHAT DID YOUR INVESTIGATION FIND?

OTT: When multiple specialties are involved, information may be lost because practitioners often focus on specific points of treatment while inadvertently disregarding other pieces of information. In other words, practitioners often find themselves working in siloes. I concluded that hospital departments could have communicated better, and that the claim was worthy of a settlement. I did my due diligence by researching previous cases and case law to arrive at an offer I knew was ethical and fair. I would never want my integrity, or the integrity of my organization, to be besmirched by lowballing a claimant or taking advantage of a vulnerable time.

LYNCH: WHAT MADE THIS CASE SO MEMORABLE FOR YOU?

OTT: It can be difficult to connect with claimants right away, often because claims can be so data driven. As I listened to Nancy's story, though, I

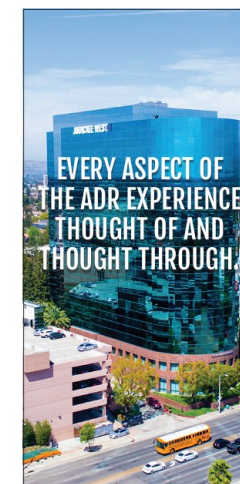
"Working with Nancy helped solidify a philosophy I have held since the start of my career: Kindness and empathy are neither liabilities nor hindrances," says Ott.



Our conversations and journey to resolve the claim became part of her healing process.

LYNCH: WHAT WAS YOUR MAIN TAKEAWAY FROM THIS CASE?

OTT: Working with Nancy helped solidify a philosophy I have held since the start of my career: Kindness and empathy are neither liabilities nor hindrances. Rather, these sentiments can be catalysts to resolution and provide closure for a claimant. While we as insurance professionals will soon move on to the next claim, those affected by the event must carry on living with what happened. When someone is dealing with an unexpected, negative outcome, they deserve to be treated with patience and respect. However, contrary to outdated beliefs, this does not mean you should be a doormat. Even when dealing with angry claimants or aggressive plaintiffs' attorneys, there is still a way to be firm but courteous to reach an optimal resolution for all parties. Viewing the participants through a lens of empathy and kindness can lessen a tense situation and move the process swiftly toward resolution. ■



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