



MONTHLY BUSINESS MANAGERS' MEETING

“MANAGING YOUR RISK”

Tuesday, April 5, 2011

9:30 am – 11:00 am

225 Peabody Hall

Presented by Risk Management



Managing Your Risk

Fran Guerin, Administrative Manager

Colorado Robertson

Office of Risk Management

Topics

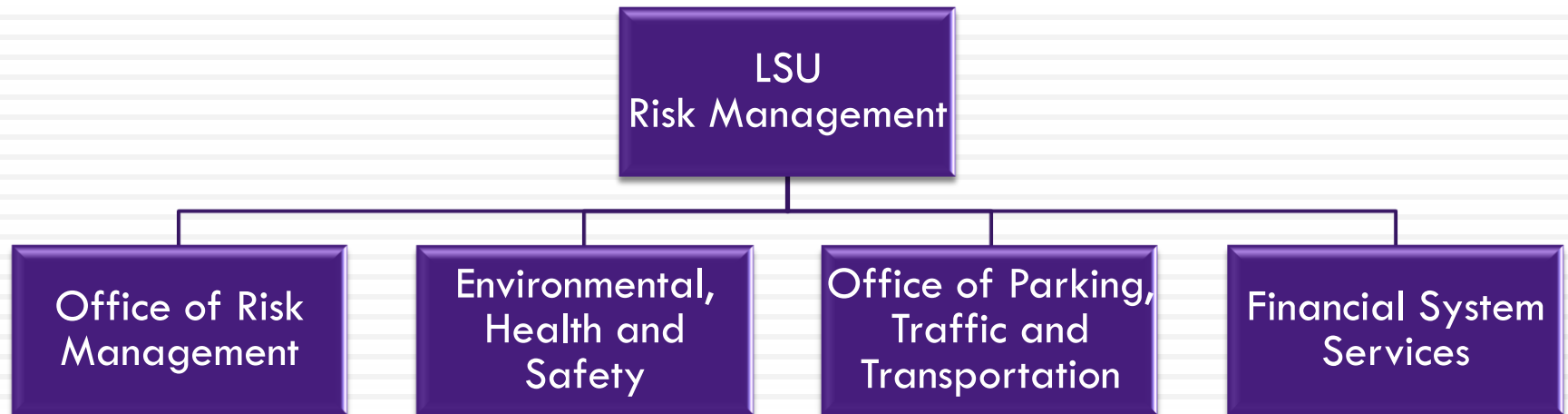
- Our Mission
- What is Risk Management?
- Enterprise Risk Management
- Insurance
- Workers' Compensation

Mission of Risk Management



- The mission of Risk Management is to protect people, property, the environment, financial, and other resources in support of the University's teaching, outreach, research, and student services.

LSU Risk Management



What is Risk Management?



Policies, procedures, and practices involved in identification, analysis, assessment, control, and avoidance, minimization, or elimination of unacceptable risks.

Enterprise Risk Management



Is a coordinated approach to assessing and responding to all risks that affect the achievement of an organization's objectives. Includes both upside and downside risks.

Enterprise Risk Management

Integrated Framework





Insurance

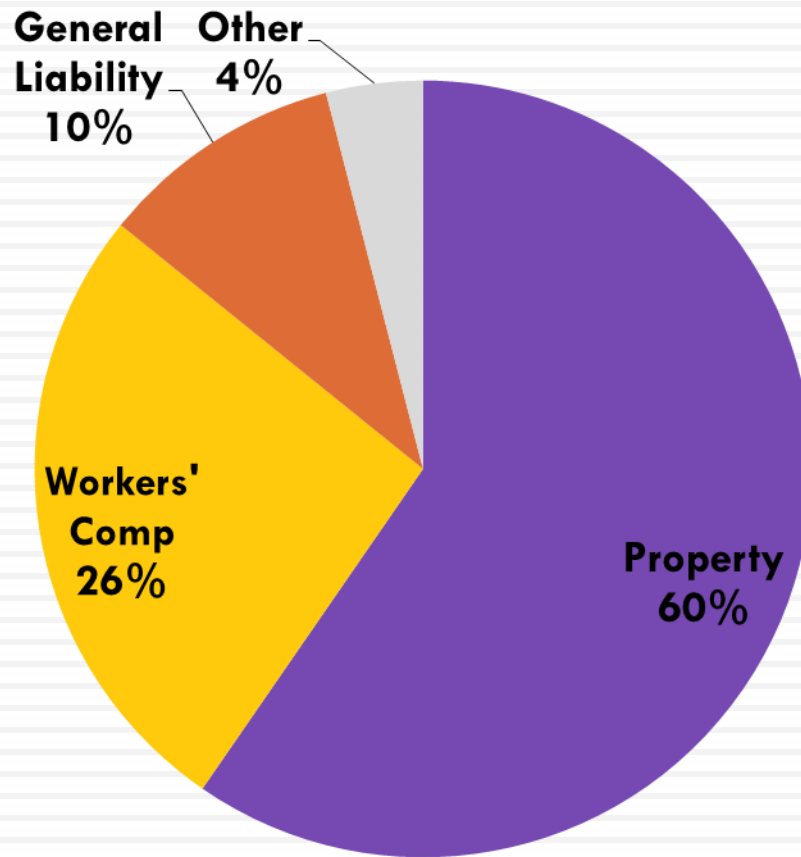
Auto Liability

Property

Student Trip Travel

Workers' Compensation

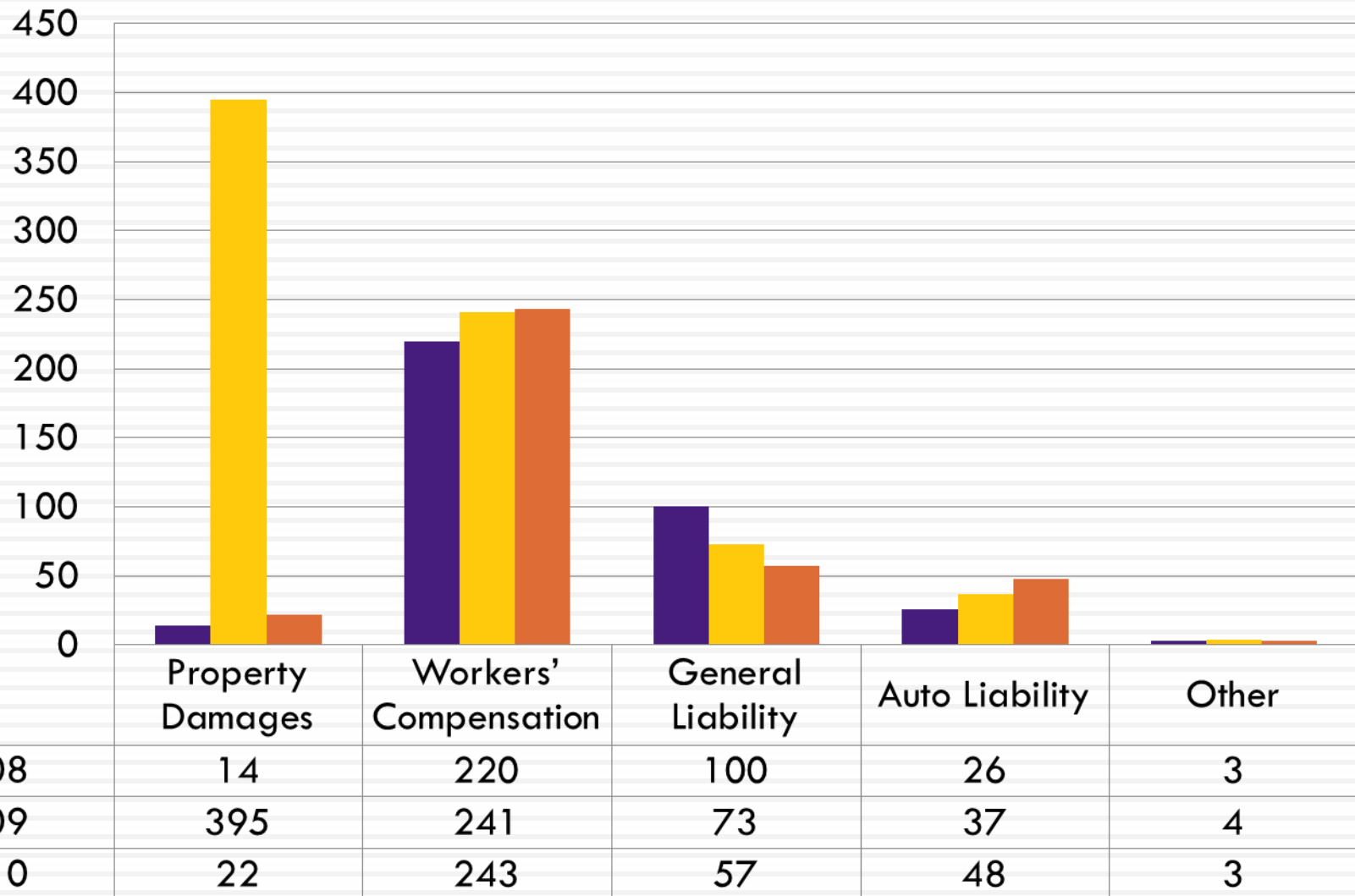
Insurance Costs



FY 2010-2011
Premiums
\$13.5 Million

5% Discount
-\$483,746
Loss Prevention
Audit

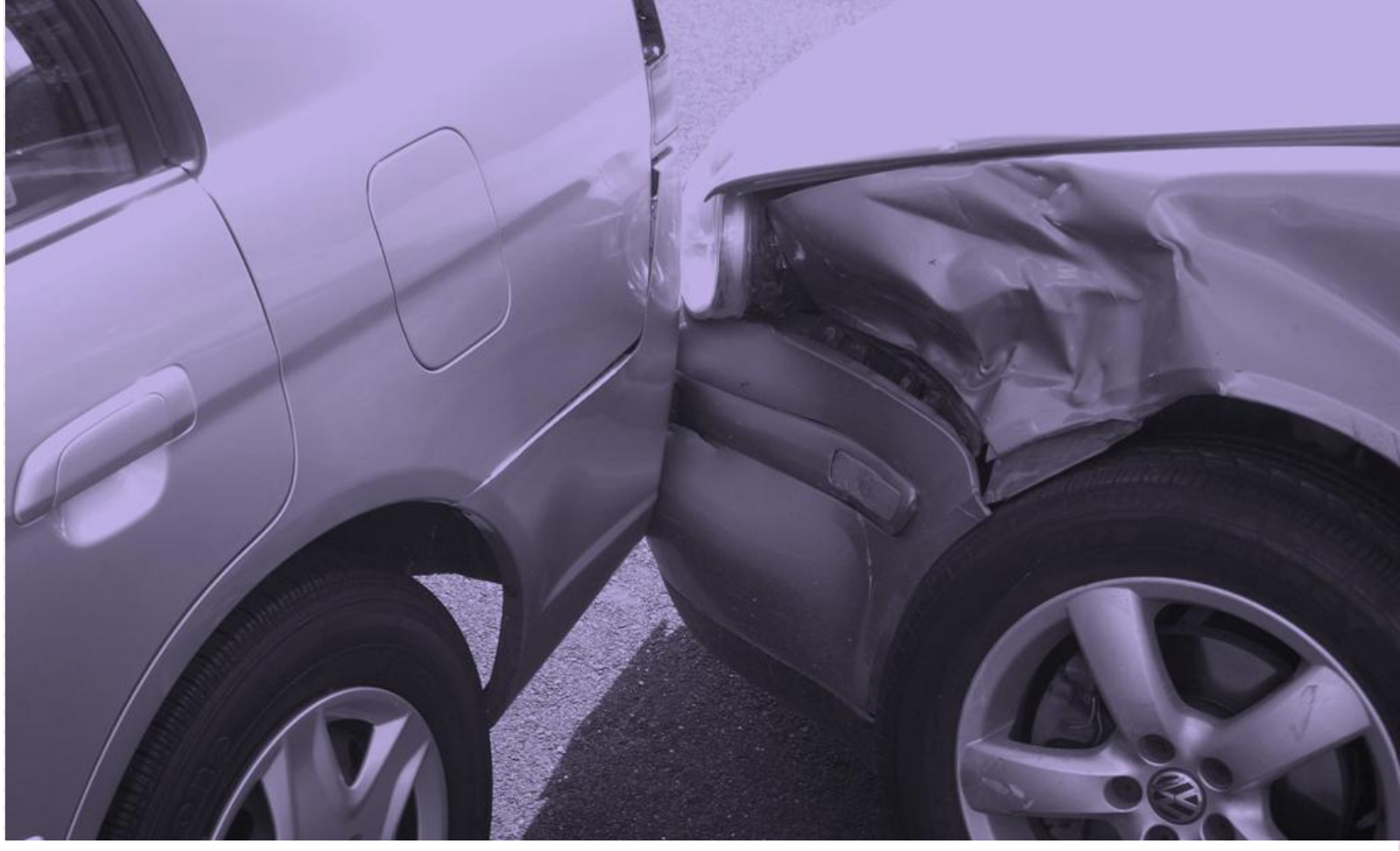
Insurance Claims



State Office of Risk Management



- Contracting of State ORM services began in 2010 with all lines of coverage to be completed by 2014
- **Has not affected the claims process**
- **We do not anticipate any major changes**



Auto Liability

Auto Coverage

University

- \$1,000 Deductible
- DA-2041 Required
- Two Estimates

Rentals

- \$1,000 Deductible
- DA-2041 Required
- Rental Agreement
- Itemized Invoice
- Proof of Payment



- In-State Rentals
- No Deductible
- DA-2041 Required
- Rental Agreement

Personal

- Collision Only
- Up to \$1,000 Deductible reimbursement
- DA-2041 Required
- Travel Authorization
- Proof of Repairs (must show deductible)
- Proof of Insurance

Drivers must:

- complete **annual** driving history form (DA-2054)
- take on-line driver safety class every 3 Years
- possess a valid U.S. driver's license
- be an employee or student worker

**Students are Not authorized
to drive university owned/rented vehicles**

Drivers must:

- report traffic violations to department/supervisor
- pay any and all traffic fines





Property Coverage

Property Coverage

- Property deductible \$1,000 (paid by department)
- Settlement is based on repair/replacement cost, less \$1,000 deductible and depreciation
- As of July 1, 2010 wages (overtime included) of state employees used for property repairs are not compensable.

Reporting Building and Content Losses

- | | |
|---|---|
| □ Required Info | □ Property Info |
| ■ Date | ■ Date of Purchase |
| ■ Time | ■ State Property Tag or Equipment Inventory Sheet |
| ■ Location (bldg/rm#) | ■ Itemized list of supplies/parts/rentals |
| ■ Police Report and Pictures if Available | ■ Proof of Payment |
| ■ Cause of Damage | |



Student Trip Travel Insurance

Student Trip Travel Insurance

- Provides coverage for students/participants
- While participating in approved field trips
- \$.08 per student/per day
 - Injury coverage only (illness excluded e.g. flu)
 - Up to \$2,500
- Employees including student workers participating as part of their job requirements are covered under workers' compensation. (trip travel not needed)



Workers' Compensation

Coverage

- Covers all University employees injured during the course and scope of their work.
 - ▣ Medical Treatment
 - ▣ Prescriptions
 - ▣ Lost Time ($66^{2/3}\%$) up to maximum
- No out of pocket expenses for employees


Claim Reporting Process



Employees should not file a claim with their personal health insurance

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Please fill out the following form. You cannot save data typed into this form.
Please print your completed form if you would like a copy for your records.

 **LSU**
LOUISIANA STATE UNIVERSITY

FILE WITHIN 5 DAYS OF INCIDENT. (In the event of a serious or fatal injury or illness, notify within 24 hours. It is the supervisor's responsibility to report lost time due to an occupational injury or disease. Failure to do so immediately may result in departmental fines. NOTE: PLEASE FILL IN EACH BLANK)

Workers' Compensation Injury Report Form

Name _____ LSU ID _____

Address _____ Zip _____

Home Phone (____) _____ Sex _____ Date of Birth _____

Marital Status _____ No. of Children Under 18 _____ Date of Hire _____

Department (Name) _____ Budget Code _____ Title Code _____

Date of Injury _____ Time of Injury _____ Normal Starting Time _____

Did the employee miss work due to this accident/illness? _____

Date Returned to Work _____ Time Returned to Work _____

Date Employer Knew _____ Supervisor _____

Work Defect? _____ Same Wage? _____ Empl. Premises? _____

Website and On-line Forms

Website: lsu.edu/riskmgt

LOG IN TO PAWS ▶ Search this website. 🔍

LSU

Office of RISK MANAGEMENT

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Welcome

Enterprise Risk Management

Claims and Insurance Information

Forms

FAQs

Links

Contact Us

The mission of Risk Management in Finance and Administrative Services (FAS) at Louisiana State University (LSU) is to protect people, property, the environment, financial, and other resources in support of the University's teaching, outreach, research, and student services.

Risk Management consists of the Office of Risk Management, responsible for the administration of the University's insurance program and coordination of insurance programs for LSU paid campuses; the Office of Environmental Health and Safety (EHS), responsible for administering the campus safety, health, and environmental programs; the Office of Parking, Traffic and Transportation, responsible for controlling, distributing, enforcing/maintaining all parking facilities, and providing various modes of transportation on campus; and the Office of Financial Systems Services (FSS), responsible for providing leadership for the development and maintenance of all FAS business processes, supporting the network, and educating and training FAS employees on the use of technology.

[View the Organizational Chart](#)

Workers' Compensation

Auto Claims

Enterprise Risk Management

Questions?

On-line Forms

- Property Claims
- Hold Harmless Agreement
- General Liability Claim
- General Liability Loss Notice
- Mileage Expense Record
- Trip Travel Request
- Trip Travel Student Listing
- Workers' Compensation Injury Report
- Workers' Compensation Worksheet

WCIjuryRp.pdf (application/pdf Object) - Mozilla Firefox

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https://sites01.lsu.edu/wp/riskmgf/files/2010/11/WCIjuryRp.pdf

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Highlight Fields



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Home Phone () Sex Date of Birth

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Department (Name) Budget Code Title Code

Date of Injury Time of Injury Normal Starting Time

Did the employee miss work due to this accident/illness?

Date Returned to Work Time Returned to Work

Date Employer Knew Supervisor

Mech Defect? Same Wage? Empl Premises?

Work Phone Number () Unsafe Act? Hourly Salary \$

Exact Location of Injury (Building, etc.)

Nature of Injury or Illness

Physician and Address

Diagnosis: Diagnosis Date:

How Did Injury Occur?

Activity When Injured

Corrective Action Taken

Questions



Office of Risk Management

Fran Guerin

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