

Maureen P. Farran, MBA, CPCU, ARM, AIC Portland, OR

SUMMARY:

Over 35 years' experience in multi-line claims handling. Multiple years of managerial experience including the responsibility for multiple claims operations. Involved in the design, development, testing and implementation of claims systems for Liberty Mutual Insurance and Zenith Insurance. Collaborated with regional offices to resolve operational and regulatory issues. Active in the development and implementation of several national claims' initiatives, including regulatory compliance processes, jurisdictional issue resolutions and customer service procedures. Developed process improvement strategies.

STRENGTHS:

Excellent communicator, team leader and hands-on manager with ability to create and implement processes to achieve corporate goals. Extensive project management experience. Working knowledge in most phases of insurance, including regulatory compliance, actuarial analysis, reinsurance, budget, policy and procedures development and claims handling. Strong systems background with the ability to learn new systems quickly. Proven problem-solving skills. Proficient in several Microsoft applications.

PROFESSIONAL EXPERIENCE:

Litigation Adjusters, Inc. – October 2020 to Present

Senior Adjuster

Attend Mandatory Settlement Conferences and Small Claims Cases as well as Monitor trials for adjusters.

Comprehensive Claims Consulting – May 2017 to September 2020 President

Working with organizations as a consultant to create strategic initiatives for growth. Involved in the development of process improvement for organizations. Provide

management and leadership training. Analyze and work with claims technical teams to create a more comprehensive work product.

Veritas Administrators – May 2017 to September 2019

Chief Claims Officer – (Consultant)

Responsible for the leadership and management of national claims for Veritas Administrators, a third-party administrator. Product categories include Worker's Compensation, General Liability and Transportation claims.

Crawford and Company/Broadspire – March 2008 to May 2017

National Technical Operations Manager

Plan and modify operational processes to assist the field in meeting corporate goals. Work with field management team to ensure that state regulatory compliance is met. Audit claims files to evaluate risk and compliance within our best practices. Facilitate resolution of conflicts among clients, field staff and regulators. Develop and conduct training of field personnel. Assure claims handling compliance for operations in Oregon, Washington and Alaska. Participated as the EDI Council member for Crawford and Company on the IAIABC EDI Council. Coordinate and participate in various State and client audits conducted within the field service centers nationally. Develop and provide extensive training on new policies and procedures that effect claims operations.

Crawford and Company/Broadspire – 2005 to March 2008

National EDI Specialist

Responsible for National EDI compliance with State regulatory agencies for claims and medical reporting. Facilitate understanding between field personnel, IT and regulators to meet regulatory requirements. Develop and conduct training of field personnel. Coordinated resolution of issues between various regulatory agencies and the Crawford field offices.

Claims Consulting Services – 2004 to 2005

President/Insurance Consultant

Facilitate management teams during problem solving exercises. Conduct evaluation of processes and procedures within the business organizations and facilitate development of process improvement plans. Strategize with clients to develop process improvement plans. Audit claims files on behalf of insurance companies or employer groups. Provide customized training on technical insurance topics to various clients. Provide project management services for technical projects.

Zenith Insurance Company – 2000 to 2004

National Director Project Management

Led a claims team that was charged with the design, development and implementation of electronic tools that will assist the claims technicians achieve a better claims outcome. Worked on the design, development, testing and implementation of various system changes as a result of reporting requirements and other corporate requirements. Established departmental goals in line with strategic corporate goals focused on outcomes. Worked with IT and regional claims operations to implement major corporate initiatives. Reported to Senior Management on national projects.

Superior National Insurance Group - 1998 to 2000

(Purchased Business Insurance Group 12/98)
Assistant Vice President of Claims

Developed claims best practices with respect to interactions with third party administrators. Directed, monitored, and evaluated third party administrators (TPAs) handling workers' compensation claims nationally for Superior National Insurance Group. Created and implemented policies and procedures to be used by the Captive TPA group to comply with regulatory and financial data reporting. Conducted extensive audits of claim files to ensure state compliance of benefits as well as accurate reserving of exposures. Developed and provided reports identifying trends and strategies to improve trends on claims handled by TPAs. Provided on-site training addressing claim-handling issues.

Business Insurance Group (subsidiary of Foundation Health Systems, Inc.) 1991 to 1998

Vice President of Claims Assistant Vice President of Claims Regional Claims Manager

Liberty Mutual Insurance Company – 1978 to 1991

Regional Claims Manager Home Office Director of Liability Home Office Catastrophic Examiner National Systems Trainer Multi-Line Claim Supervisor Examiner/Senior Examiner

EDUCATION:

Salve Regina University, MBA San Jose State University, B.S. CPCU, ARM, CRM, AIC, AIS Adjuster Licenses — Alaska, Oregon

OTHER ACTIVITIES:

CPCU Instructor
NLI Facilitation Trainer
CPCU National Claims Committee member
Claims Training Committee Chair – IAIABC
Claims Committee Member - IAIABC
EDI Council Member
Past President Oregon CPCU Chapter