

TEXAS PROMPT PAYMENT OF FIRST PARTY CLAIM WORK SHEET

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Claimant: _____	Claim #: _____
Coverage: _____	Date of Loss/ accident/injury: _____
Insured (if different from claimant): _____	

No.	✓Done	Event/Action	Deadline	Date Done
1.		FIRST-PARTY CLAIMANT GIVES INSURER NOTICE OF CLAIM (Date received)		
2.		INSURER MUST RESPOND TO RECEIPT OF CLAIM <i>[Deadline = add 15 days from step 1, next step - go directly to 2a. Eligible surplus lines insurers have 30 days to acknowledge claim.]</i> * If response not made in writing, record date, means, contents of response in claim file. * Request all items, statements, forms required from claimant for investigation, see 2a below. * Additional requests may be made, if investigation reveals additional information is necessary.		
2a.		REQUEST ITEMS, STATEMENTS, FORMS FROM CLAIMANT (Use reverse side if more spaces are needed.) [List <u>all</u> items requested and <i>once all are received go to step 3.</i>]	Date Requested:	Date Received:
		1)		
		2)		
		3)		
		4)		
		5)		
3.		INSURER MUST NOTIFY CLAIMANT OF ACCEPTANCE OR REJECTION OF CLAIM, OR NOTIFY OF NEED FOR DELAY <i>[Deadline = 15 business days after all items requested in 2a are received, or if an arson claim 30 days after all items requested in 2a are received. If insurer accepts claim, go directly to step 5; if insurer needs more time or delay go to step 4.]</i> * MUST BE IN WRITING! * Pay any portion of claim not disputed by insurer * If any part of claim is rejected, Insurer must state all reasons for rejection! * If insurer unable to accept or reject claim within time period, insurer must notify claimant of delay and reasons insurer needs additional time.		
4.		IF INSURER NOTIFIES CLAIMANT OF DELAY in step 3, INSURER MUST NOTIFY FIRST-PARTY CLAIMANT OF ACCEPTANCE OR REJECTION OF CLAIM <i>[Deadline = 45 days after step 3; next go to step 5.]</i>		
5.		IS PAYMENT OF CLAIM CONDITIONED ON PERFORMANCE OF AN ACT BY FIRST-PARTY CLAIMANT? <input type="checkbox"/> YES or <input type="checkbox"/> NO IF NO, go directly to step 6; IF YES, go to step 6 when first-party claimant completes act. <i>[Date Done = date first-party claimant completes act, next step go to 6.]</i> Action to be performed by First-Party Claimant is:		
6.		IF INSURER NOTIFIES FIRST-PARTY CLAIMANT THAT INSURER WILL PAY CLAIM, INSURER MUST PAY CLAIM. <i>[Deadline = 5 business days after step 3; or step 4 if insurer delayed; or step 5 if payment conditioned on act to be completed by first-party claimant. Surplus lines insurer must pay the claim within 20 business days after the insurer gives notices of payment, or the requested act is performed by the insured.]</i>		

*** Note: Add 15 days to all deadlines for claims arising out of weather related catastrophe or major natural disaster as determined by Texas Department of Insurance.**

INSTRUCTIONS FOR USE OF THE
TEXAS PROMPT PAYMENT OF FIRST PARTY CLAIM WORK SHEET

The Texas Prompt Payment of First Party Claim Work Sheet is based on TEX. INS. CODE § 21.55 (effective April 1, 2005 TEX INS. CODE ANN. §542.051 to §542.061) Questions or comments should be directed to Mark Courtois at 713-620-7226 or by email at MJCOURTOIS@FFLLP.COM.

Basic Claim Information: Fill in the name of the first-party claimant, the claim number, policy coverage at issue, date of loss, accident, death, disability, illness (triggering event), and the name of the insured if different from the claimant. Note, if claims are being filed under more than one coverage, complete a separate worksheet for each coverage under which a claim is filed.

1. Fill in date the insurer received notice of the claim. Note, Article 21.55 requires written notice from the first-party claimant to trigger the time deadlines, but if a carrier's policy provides for a claim to be submitted in a manner other than in writing, or if carrier accepts non-written claim, deadlines are likely triggered.

2 & 2a. To determine deadline when carrier must respond to receipt of a claim, add 15 calendar days from the date the claim is received by the insurer. Put that date in the deadline column, and make sure an acknowledgment is made prior to that deadline. Record actual date acknowledgment is made. If acknowledgment is not made in writing, carrier's adjuster must document the date, means, and content of acknowledgment. Carrier must also request all items and supporting documentation to adjudicate the claim, such as statements, proof of loss, or other forms required by carrier for investigation. Carrier may make additional requests for information as investigation proceeds. Record in 2a all items requested from the first-party claimant. Use additional sheets if necessary, or the space below to document the items requested. Once the insurer receives all requested items, proceed directly to step 3.

3. To determine the deadline date when an insurer must notify the first-party claimant of acceptance, rejection, or delay of claim, add 15 business days from the date insurer received all items requested from first-party claimant. A business day is any day other than a Saturday, Sunday, or legal holiday. Note that acceptance or rejection of the first-party claim must be made in writing to the first-party claimant. If any portion of the claim is rejected, the insurer must state all reasons the claim is rejected. Insurers are recommended to pay any portion of the claim that is not in dispute. If the insurer is not able to make a determination about the claim within this deadline, the insurer must notify the first-party claimant of the need for a delay, and the reasons a delay is needed. A delay gives the insurer another 45 days to determine whether to accept or reject the claim.

4. If the insurer takes a delay, the insurer must notify the claimant of acceptance or rejection of the claim within 45 days after the claim was originally supposed to be accepted or rejected in step 3.

5. If in step number 3, the insurer notified the first-party claimant that the claim would be paid, but was conditioned on an act to be completed by the first-party claimant, then the insurer should document when that act is completed by the claimant and proceed directly to step 6. An example of a conditioned act is when the insurer requires that a written proof of claim be provided. Once completed by the first-party claimant, then move to step number 6.

6. The insurer must pay the claim within 5 business days from the date the insurer gives notice to the first-party claimant that the claim, or part of the claim, will be paid. If the payment of the claim is conditioned on an act to be performed by the claimant, the insurer must pay the first-party claimant within 5 business days after the act is performed. Surplus lines insurers must pay the claim within 20 days after the notice is given by the insurer or the requested act performed by the claimant. Calculate this deadline by adding five business days to either step 3, 4, or 5 depending on which applies to this claim.

ADDITIONAL SPACE FOR CLAIM INFORMATION:
