

Speak UP: How to communicate with your insurance company

Communicating with your insurance company is an incredibly important part of the claims process. The insurance company may try to handle your claim by telephone, with no records. However your claim is handled, you must make sure that everything gets documented in writing.

How you communicate makes a world of difference in the amount of benefits you collect and how fast you collect them.

How to “Speak UP”

- **Strong as possible**
 - **Paperwork organized**
 - **Empowered**
 - **Assertive but polite**
 - **Keeping a claim diary**
 - **Insurance educated**
 - **Networking with others**
 - **Getting professional help when needed**
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- **Unwilling to be short-changed**
 - **Pro-active**

We recommend that you:

1. Document every communication with your insurance company in a notebook or diary so you can keep track of the status of your claim.
2. Create a paper trail. Confirm representations and promises made in person or over the phone by

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insurance company personnel by sending them a short follow-up e-mail or letter.

3. Use good grammar, punctuation and capitalization. Promptly respond to letters and requests if they are unreasonable. If they are, say so, in writing.
4. Be proactive: Give your insurer proof of your losses and ask for the dollar amounts you are entitled to. Don't wait for them to tell you how much they owe you.
5. Use specific instances of improper conduct by your adjuster or insurer as leverage to negotiate the settlement you need. Your diary will come in handy.
6. Don't mistake a friendly claim adjuster for a friend. Remember you're in a business negotiation. Keep it professional.
7. Don't use your insurance company as an outlet to vent frustrations and emotions related to the original cause of your loss.
8. Remember that everything you write and say may be noted in the insurance company's records. Even if you're frustrated, avoid saying or writing things that will make you seem uncooperative or the cause of delays or problems.
9. Don't sign a confidentiality or non-disclosure agreement without consulting with an attorney. Agreeing to an overly broad or premature non-disclosure agreement can significantly reduce your leverage and ability to obtain full policy benefits.
10. Attitude is Everything: Be Polite, Be Prompt, Be Persistent

How a typical insurance company is organized

It is very useful to understand how insurance companies are typically organized. Each person you deal with at an insurance company has an upper limit of dollar authority to settle your claim. As you go up the chain of command, that limit gets higher: Adjusters typically have the lowest settlement offer authority limit; Home Office executives have the highest. Claims departments are often structured as follows:

1. Adjuster
2. Supervisor
3. Unit Manager, over several supervisors by line of business
4. Assistant Manager, over Unit Managers, but not in all offices
5. Claims Manager or Claims Vice President, in charge of local office
6. Regional Claims Vice President, in charge of several offices in a region

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7. Home Office Claims: At the home office, there are several levels:

- Field Management – Senior VP in charge of regional managers
- Technical Management – Vice Presidents in charge of lines of business, such as auto, general liability, property
- Major Claims – Such as asbestos, lead paint, claims with long occurrence-type exposures, large and complex claims. (Large being over \$750,000.00)

Resolving disputes, delays and complaints with your insurance company

When communicating with your insurance company, start with the adjuster and contact superiors as necessary. What motivates an insurer to resolve an issue is a focused complaint that causes people above the adjuster to pay attention. The higher up you go within the insurance company's claim department, the greater your chances of success in resolving your complaints.

When you raise a concern over how your claim is being handled or how much you are still owed, documentation is everything. If you write to an adjuster, send a copy to his or her supervisor and request a written response in a set time frame (e.g., "Please reply within 10 business days from the date on this letter"). When you send a letter that asks for a response by a certain date, make sure you send it via certified mail so you have proof of the date you mailed it. Follow up with a phone call to confirm that your letter was received. If there is an issue over coverage or procedure, ask your insurer to point you to the specific part of the policy that explains it.

Your letters should not be threatening or lengthy. They should be clear, polite and to the point. It should confirm how cooperative you have been and continue to be. Be the good guy and put the ball in their court. If you are nasty, your next contact may be from a lawyer for the insurer which may block you from continuing to work with the adjuster.

If you feel stuck or that you've run out of "self-help" options, it's probably time to hire professional help. Start at the [Find Help section of our website](#). If you don't want to hire professional help, you can file a complaint with your state insurance regulator.

United Policyholders offers specific tips on getting government help solving an insurance problem. Start by reading [Claim/Coverage Dispute Resolution Help](#). Some people fear that filing a complaint with a

government agency will make their insurance company angry and made a bad situation worse. In our more than 30 years of experience – it’s just the opposite. Insurance companies stand up and take notice when a customer complains to a state official, and they generally act quickly to try and resolve the problem. However, if there’s a coverage dispute or a large sum of money at issue, a state agency is unlikely to have the staff or the authority to resolve it. In those situations, an experienced attorney or public adjuster is the more likely path to a successful settlement.

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