

RESOLUTION NO. 3-13

**CAMDEN COUNTY INSURANCE FUND COMMISSION
AUTHORIZING WORKERS COMPENSATION SETTLEMENT WITH
JENNIFER FEDORIW**

WHEREAS, Jennifer Fedoriw has filed a claim against the Camden County Insurance Fund Commission with the State of New Jersey, Department of Labor, Division of Workers' Compensation; and

WHEREAS, the parties have recommended a resolution for 12&1/2% of partial total for a total settlement in the amount of \$15,825.00, plus costs of \$3,165.00; and

WHEREAS, the claim so filed has been resolved, now, therefore,

BE IT RESOLVED, by the Camden County Insurance Fund Commission that disposition of the claim filed by the above-referenced individual is authorized as follows:

<u>CLAIMANT</u>	<u>PETITION NO.</u>	<u>AMOUNT OF AWARD</u>
Jennifer Fedoriw	CP2011-13087	\$15,825.00 (12&1/2% partial total)
		\$3,165.00 (costs)

BE IT FURTHER RESOLVED, that the proper Commission officials and/or their agents, be and are hereby authorized to execute such documents as shall be necessary to effect the disposition set forth above.

ADOPTED: 1-24-13

BY: _____

CHAIRPERSON

ATTEST:

VICE-CHAIRPERSON

**Camden County Insurance Commission
Settlement Authority Request**

Claimant: Jennifer Fedoriw	Date : December 27 th .2012
CSI File Number #: 630 111 328	Claim Type: Workers' Compensation
CSI Handling Adjuster: Huguette S. Atherton	Date of Incident/Loss: March 25 ^h .2011-3:30 PM
CSI Adjuster Phone: 856-380-6539	Department: Corrections Officer
	Litigation : Yes
	Defense Attorney: Kenneth Sylvester
	Claimant/Plaintiff Attorney: Adam Kotlar

Policy Type : Workers' Compensation

Petitioner has filed CP2011-13087

DEFENSE COUNSEL RECOMMENDATIONS:

Per enclosed PAR of December 27th.2012 and counsel's correspondence of December 12th.2012, it is counsel's recommendation that this matter be resolved up to 12 ½% of partial total or \$ 15,825.00 plus costs of \$3,165.00 for a total of \$18,990.00.

Seeking authorization for settlement recommendation in the amount of \$ 18,990.00 . Last payment authority received July 15,2011, was for \$94,983.00 . we are now seeking settlement authority for total amount of \$ 89,132.00, reduction of \$ 5,851.00.

APPROVAL FROM CCIC : YES NO

Camden County Insurance Commission Payment Authority Request

Claimant: Jennifer Fedorlw

CSI File Number #: 630 111 328

Date of Birth: 07/08/74

Date of Hire: 09/19/10

CSI Handling Adjuster: Huguette S. Atherton

CSI Adjuster Phone: 856-380-6539

Excess Carrier: Meadowbrook

Excess Notice Date:

Excess Handling Adjuster:

Excess Adjuster Phone:

Excess SIR: \$ 250,000.00

CIB: yes- no pre-existing back condition

Location code: 1926

Subrogation: Not applicable-if condition occurred as a result of job duties and no third party is involved

Status As of: December 27th.2012

Claim Type: Workers' Compensation

Date of Incident/Loss: March 25,2011-3:30 PM

Department: Corrections Officer

Litigation : yes

County Attorney: Kenneth Sylvester-Cooper Levenson

Claimant/Plaintiff Attorney: Adam Kotlar

Claimant/Plaintiff Attorney Firm:

Claimant/Plaintiff Phone: 856-761-7878

Policy Type : Workers' Compensation

CEL-JIF Companion File#:

Summary of the Incident Facts:

Petitioner is a corrections officer, on 03/26/11, she was involved in an altercation with an inmate as a result she reported discomfort in her back, chest pain, upset stomach anxiety. She was taken by ambulance to ER at Virtua evaluated by many specialists, multiple tests done and discharged, follow up at Worknet given prescription for PT sessions, muscle relaxers, back brace and MRI of the lumbar was ordered revealed disc bulging at L3-L4 and L4-L5 without significant herniation Petitioner was then referred to Ortho. Dr. Conliffe at Rothman-Diagnosis-lumbar disc herniation, Treatment-, PT sessions, epidural injections x 2, not a surgical candidate- reached MMI on 12/22/11-disability began on 03/26/11 through 12/22/11, the County laid petitioner off as of 04/04/11-WC paid TTD benefits benefits to petitioner. AWW-\$ 857.11-Comp. Rate-\$ 599.98. Received CP2011-13087

Dr. Meeteer evaluated petitioner on behalf of the County and estimated 2 ½% of total, petitioner's expert, Dr. Gaffney estimated 47 ½% of total. We received a demand for settlement from petitioner for 27 ½% of total or \$ 41,187.00 plus costs of \$ 8,238.00 total of \$ 49,425.00. Informed counsel that demand was excessive no surgery involved, and informed counsel to push to resolve between 12 ½% up to 17 ½% of total, counsel eventually resolved this matter for 12 ½% or partial or \$ 15,825.00 plus costs of \$ 3,165. 00

Strategy /Action Plan:

1-Will discuss this claim with CCIC and obtain settlement authority for 12 ½% of total as outlined above. 2-Will continue to monitor this claim with counsel until we can resolve this matter and close file

Financial Summary:	Indemnity	Medical	Legal	Other	Total
Paid:	\$23,400.00	\$36,491.99	\$2,664.47	\$1,937.20	\$64,493.66
Outstanding:	\$18,990.00	\$0.01	\$3,835.53	\$1,812.80	\$24,638.34
Total Incurred:	\$42,390.00	\$36,492.00	\$6,500.00	\$3,750.00	\$89,132.00

Reserve Rationale:

Indemnity reserve reflects paid TTD benefits at \$ 599.98 wkly., & 12 ½% of partial total \$15,825 plus costs-\$ 3,165.00

Total Indemnity reserve \$ 42,390.00

Medical reserve reflects paid treatment \$ 36,492.00

Expense 3,750.00

Legal 6,500.00

Last payment authority received \$ 94,983.00- (07/05/11)

Seeking payment authority of \$89,132.00-reduction of \$ 5,851.00

\$94,983 previously authorized on 7/5/11

\$89,132 requested to include settlement

(\$5,851.00 reduction)

PRIOR CLAIMS REPORT

Camden County Insurance Commission - 630

Claimant	Claim Number	Date of Injury	STATUS	Accident desc	Body part desc	Total Claim PTD	Total Claim Incr
FEDORIW, JENNIFER	630-111-0000328	03/25/2011	0	AN INMATE BECAME AGGRESSIVE, EE AND ANOTHER OFFICER TRIED TO RESTART INMATE AND WE FELL HURT LOWER BACK AND CHEST.	MULTIPLE BODY PARTS	\$64,492.87	\$89,132.00