

JANE D. BROWN  
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**Objective:** A leadership position in an organization that seeks extraordinary bottom line results, talent building and succession planning and a software sales position in an organization seeking an extraordinary record of generating new accounts, exceeding sales targets and enthusiastic customer relations.

**Employment History:**

**XXXX Company Name XXXX: 2001-present** – Director of Workers Compensation & Reinsurance Claims

Overseeing claims operations and claim technical management for the U.S. Reorganized and consolidated California field offices into a single Division. Created 2 major Centers of Excellence in IL and CO to oversee claims handling outside of CA. Implemented technical discipline to stabilize and standardize loss evaluations and reserving. Established vendor programs to reduce benefit delivery costs. Reduced LAE by 10% in a single year. Established Reinsurance Claims Department from ground up. Responsible for 20% increase in reinsurance claims collections, annually, on average over a 3-year period, and a \$11M addition to surplus via reduction in Annual Statement penalties in a single year. Developed and implemented Business Plan for department, Claims Handling Protocols, and Consolidation Plan for Department and function. Responsible for the Identification, Reporting and Collections of Casualty, Property, Workers Compensation, Professional Liability and No Fault catastrophic claims. Developed and implemented Training Programs. Created job descriptions, recruited and hired professional talent for positions.

**XXXX Company Name XXXX: 2000 –2001** - Claims and Claims Operations Consultant  
Advised, managed and consulted with client MGA to incorporate processes and workflows that met organizational and regulatory requirements for Personal and Commercial Lines Auto insurance programs. Provided suggestions, management assistance and technical claim handling direction designed to streamline existing procedures. Performed file and operations audits and acted as troubleshooter of internal and external non-compliant procedures and file handling.

**XXXX Company Name XXXX- Various Divisions: 1986 – 2000**  
**XXXX Company**, Hartford & San Francisco, CA

*Vice President, North American Claims 1999-2000*

Responsible for oversight of North American claim operations including U.S., Canadian and Latin American claims. Supervised and managed domestic technical and administrative claim handling functions. Directed staff in the audit function of our client ceding companies for all business underwritten from all US branches and Toronto, with authority over structure of North American claim areas and branches.

*Assistant Vice President 1997-1999*

Established and managed the San Francisco Claim branch of Hartford Re upon its expansion to the West Coast. Responsible for claim operations of that branch including recruitment, selection and training of all personnel, management and supervision of claim technical and clerical staff, oversight of audit function for the West Coast operations, and supervision of large loss claims within that branch.

*Assistant Director 1993-1997*

Managed caseload of 5,000+ treaty and facultative reinsurance files. Supervised administrative and technical claim units. Performed claim audits of client ceding

companies, reviewing their claim operations and claim handling, making suggestions for improvement and reporting results and recommendations to senior management. Liaison and Project Leader for development and implementation of company reinsurance claim support system.

*Assistant Vice President* **XXXX Company Name XXXX** Boston, MA 1986 - 1993

Directed the investigation, evaluation, supervision and settlement of excess and surplus lines claims emanating from policies written from managing general agency business, including commercial general liability, auto liability, workers compensation and employer's liability, public official liability, law enforcement liability, umbrella liability, medical and legal malpractice, director's and officer's liability, errors and omissions liability, and a variety of manuscript policies.

**XXXX Company Name XXXX** 1981 – 1986, Brockton, MA

*Claim Supervisor & Training & Education Coordinator*

Supervised and trained Claim Representatives and Sr. Claim Representatives, directing the course of complex investigations and litigation while being held accountable for overall claim dollar expenditures and expense savings.

Coordinated the educational program and efforts for the Personal Lines claim branch, enlisting instructors and leading the instruction for a variety of basic claim skills courses.

**XXXX Company Name XXXX**. 1976 – 1981, Boston, MA

*Casualty Claim Adjuster*

Investigated, evaluated & settled personal and commercial lines casualty claims.

**Education:** Bachelor of Arts Degree – XXXX Name of the University XXXX

**Insurance Industry Education:**

GAB Basic Casualty School

GAB Intermediate Casualty School

GAB Workers Compensation School

Aetna Supervisory Skills School

ARE 141, Principles of Reinsurance

ARE 142, Reinsurance Practices

CPCU 5, Insurance Operations

**Professional Memberships & Licenses**

CWCI – Member of Board of Directors, 2006 - present

Pacific Claims Executive Association 1997-2000

Independent Reinsurance Underwriters Association 1993-2000

California DOI Qualified Manager Insurance Adjuster License 2001

