



**BODILY INJURY CLAIM**

For office use only

Type or print in ink

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***Under federal law, Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA) (P.L. 110-173) added new mandatory reporting requirements for liability insurance (including self-insurance), no-fault insurance, and workers' compensation, which includes coverage available for legitimate claims against the State of Oklahoma.***

**SECTION 1 – Claimant Information**

Claimant's name \_\_\_\_\_  
 Mailing address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip code + 4 \_\_\_\_\_  
 Phone number  Home  Work ( ) - Cell ( ) -  
 Last 5 digits of SS# \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender  Male  Female Email address \_\_\_\_\_

**SECTION 2 – Incident Information**

Incident Date \_\_\_\_\_ 20 \_\_\_\_ Time \_\_\_\_\_  AM  PM  
 \_\_\_\_\_ Address/Highway \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_

Describe incident/injury

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Add sheet for additional comments.

**SECTION 3 – State Agency Involvement**

Describe any evidence that will prove the state or a state employee was negligent:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_





**SECTION 7 - Claimant Insurance**

Have you reported this injury to your personal health insurance?  Yes  No

Have you filed a claim with your personal health insurance?  Yes  No

Insurance company name: \_\_\_\_\_

Policy number \_\_\_\_\_ Policy deductible \$ \_\_\_\_\_

Agent name \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Amount received/to be received from your personal health insurance? \$ \_\_\_\_\_

Do you have Medicare?  Yes  No Medicare number \_\_\_\_\_

Do you have Medicaid?  Yes  No Medicaid number \_\_\_\_\_

**Attach a copy of insurance cards for each type of insurance coverage.**

**SECTION 8 - Claim Documentation Checklist**

<input type="checkbox"/> MMSEA fields completed - DOB, SSN	<input type="checkbox"/> Police report, if applicable
<input type="checkbox"/> Medical bills, with contact information	<input type="checkbox"/> Photos
<input type="checkbox"/> Medical records	<input type="checkbox"/> Investigative reports
<input type="checkbox"/> Paid receipts	<input type="checkbox"/> HIPAA release

*Documentation to support requested compensation must be provided. Estimates or quotes and/or paid receipts should total the requested compensation amount.*

Enter amount of compensation required for full settlement of your injury damage. \$ \_\_\_\_\_

**WARNING**

It is a felony to make or present a false, fictitious or fraudulent claim for payment of public funds. The State of Oklahoma will prosecute and conviction may result in criminal penalties. 21 O.S. § 358-359

*The information in this claim form is true and correct to the best of my knowledge.*

OR

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Authorized signer's signature

\_\_\_\_\_  
Signer's printed name

\_\_\_\_\_  
Authorized signer's printed name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title of authorized signer

## Frequently Asked Questions

### **Q. Who can file a claim against the State of Oklahoma, its agencies or employees?**

- A. Only a claimant can file a claim against the state, its agencies or employees. A “Claimant” is defined by state statutes as a “person holding an interest in real or personal property which suffers a loss,” a person “actually involved in the accident or occurrence who suffers a loss”, or “in the case of death,” the administrator or personal representative of the estate of an individual who suffered a loss due to the actions of the state, its agencies or an employee. If damage is to property (i.e., a vehicle), the claimant would be the party listed on the title.

### **Q. How long from the date of the incident does the claimant have to file claim?**

- A. A claimant must present a claim against the state within one (1) year of the date the loss or injury occurs. If a claim is not filed within one (1) year of the date on which the loss occurs, then an individual is forever barred from bringing his or her claim. 51 O.S. §156(B).

### **Q. From the time the claim is received into Risk Management, how long does the state have to respond?**

- A. By statute, the state has 90 days from the date the claim is received to respond to the claim. A claim must be filed in writing. A telephone call does not constitute a claim. If the state has not approved the claim or denied it, the claim is automatically deemed denied by law ninety (90) days after the claim was received. 51 O.S. § 157(A). A claim may be settled after the 90-day period ends, but this does not stop or pause the time within which a claimant has to file a lawsuit, unless agreed to in writing. The state makes every effort to investigate and respond to claims as quickly as possible.

### **Q. When can the claimant file suit?**

- A. By statute, a claimant cannot file a lawsuit until a claim has been denied or 90 days has passed from the date the claim was filed with the state.

### **Q. How long do I have to file suit?**

- A. A claimant has one hundred eighty (180) days from the date a claim is either denied or deemed denied by the passing of the ninety (90) day period to file a lawsuit. 51 O.S. §157(B).

## Frequently Asked Questions

**Q. Can the claimant get vehicle rental authorized?**

A. Risk Management cannot authorize a claimant to rent a vehicle. Each claim must be reviewed by the office of the Oklahoma Attorney General or authorized legal counsel to determine whether a claim will be approved. If a claim is approved, reasonable vehicle rental will be considered as part of the settlement of the claim.

**Q. What if the claimant is my minor child?**

A. You would then need to fill out the claim form with both custodial parents names as the parent or guardian of the minor. You would both need to sign the claim form.

**Q. Will an adjuster be assigned to my claim?**

A. Occasionally, Risk Management will assign an adjuster to review a property damage claim for a vehicle.

**Q. Can a claimant get authorization for medical care?**

A. Risk Management cannot authorize any medical care. Each claim must be reviewed by the office of the Oklahoma Attorney General or authorized legal counsel to determine whether a claim will be approved.

**Q. What type of additional documentation may be needed for my claim?**

A. For property damage, two estimates or a repair bill and copy of title and registration are required. Other documentation that may be submitted if incurred are estimates or receipts for vehicle rental, towing charges, lost wage statements, etc. If the claim is for personal injury, then copies of all the medical bills and doctors' reports are required. Other documentation that may be submitted are medicine prescriptions, medical aids, etc.

**Q. Does the state work like regular insurance companies?**

A. The State of Oklahoma is self-insured by Risk Management.

**Return claim form and documentation by fax, mail or email to the contact information listed at the top of the page. If you wish to hand deliver the documentation, you will need to contact our office to schedule an appointment at 405-521-4999.**