

After the Flood

Following a flood, a community or region will strive to begin the cleanup and recovery process as soon as possible – sometimes even before the waters fully recede. The National Flood Insurance Program (NFIP) stands ready to assist policyholders throughout their recovery journey.

You can assist by ensuring that NFIP policyholders have the information and resources to begin the claims process.

NFIP Claims Process

The NFIP Standard Flood Insurance Policy (SFIP) is designed to cover insured property which is damaged directly by or from a flood if a policyholder:

- paid the correct premium,
- complied with all terms and conditions of the SFIP, and
- furnished accurate information and statements.

For more information regarding the NFIP claims process, please review the Flood Insurance Claims Handbook and the NFIP Claims Fact Sheet.

Following a flood loss, the policyholder must promptly notify their insurer to start the claims process. Upon notification, the insurer assigns an adjuster to assist the policyholder with the claim. Generally, the adjuster contacts the policyholder within 24 to 48 hours after receiving the notice of loss. However, assigning an adjuster may take more time depending on upon the severity of flooding and local conditions.

Links to More Information

Flood Insurance Claims Handbook

<https://www.fema.gov/media-library/assets/documents/6659>

Flood Claims Process Fact Sheet

<https://www.fema.gov/media-library/assets/documents/114402>

Damage Estimate

The adjuster will visit the property to determine the extent of the flood loss, assess the damage, and review the policyholder's documentation to prepare a detailed estimate of the covered damages.

The adjuster may ask if the policyholder wants to request an advance payment from the insurer.

The adjuster may also request an inspection by a qualified expert to review structural or foundation damages in other buildings such as an elevated building or a building with a basement.

The adjuster will provide all of the information to the insurer for coverage consideration.

Proof of Loss

The insurer will then make a decision and the adjuster will provide the policyholder a proof of loss form, a copy of the building damage estimate, and any personal property inventory list. If the policyholder agrees, they will sign and swear to the proof of loss form, so payment can be issued. The proof of loss form is the policyholder's requested monetary covered loss amount for the flood damage.

A policyholder must provide their proof of loss with supporting documentation to their insurer within 60 days following the date of loss or any extension granted by the Associate Administrator for the Federal Insurance and Mitigation Administration.

Policyholders have the right to submit an amended proof of loss to their insurer to request an additional payment under the claim. This could be for omitted items on the initial proof of loss, or if the amount to repair or replace the flood

damaged property was more than estimated. Of course, a supporting document to justify the amount a policyholder is seeking must accompany their completed, signed and sworn-to Proof of Loss form. A policyholder should be encouraged to work with their adjuster with any assistance needed in filing an amended proof of loss.

Just like the original, the same requirements surrounding the proof of loss apply.

Following review of the amended proof of loss, the insurer may make additional payments for covered damaged items.

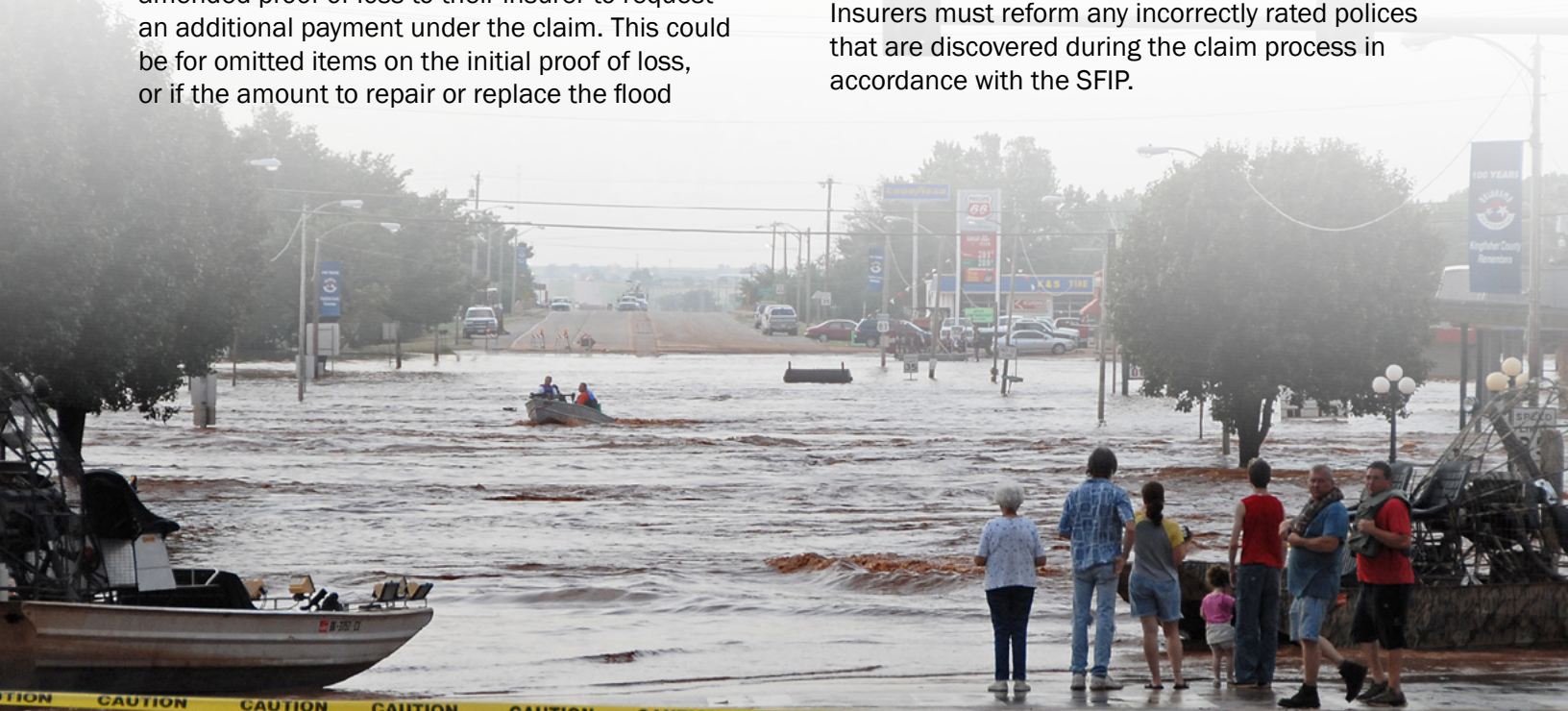
Although a policyholder may submit multiple proofs of loss for their claim, there is only one claim for every flood loss event.

If an insurer receives a policyholder's Proof of Loss form with supporting documentation after the expiration of the 60-day submission period, the insurer may request a FEMA waiver of the SFIP's proof of loss requirement. The waiver requires that FEMA's rights to fully and properly investigate the loss have not been prejudiced. FEMA approves waiver requests on a case-by-case basis.

Claim Payment

Once the policyholder receives final payment for the loss, the claim process is complete. If the insurer underwrites the policy correctly, the claim payment basis equals the agreed-upon proofs of loss, which are subject to the coverage limits and deductibles at the time of loss.

Insurers must reform any incorrectly rated policies that are discovered during the claim process in accordance with the SFIP.



Disputed Claims

Policyholders may take the following steps to resolve disputed claims:

- *Work with the Adjuster.* If the policyholder does not agree with the covered loss amount, they should coordinate with the adjuster to find an agreed to covered loss amount and submit supporting documentation to justify their position. Through this effort, the policyholder may also consult a general contractor to support their requested monetary covered loss amount for the flood damages.
- *Contact the Adjusting Firm.* If the policyholder is unable to agree with the adjuster, they should contact the adjusting firm and adjuster's supervisor. The supervisor coordinates with the policyholder to find an agreed to covered loss amount.
- *Work with the Insurer.* If the policyholder is unable to agree with the adjuster's supervisor, they should contact the insurance carrier's claims department to discuss the covered loss amount difference or coverage issue with a claim examiner.
- *File a Proof Of Loss with the Insurer.* If the policyholder is unable to agree with the claim examiner, they should complete a Proof of Loss form for the total covered loss amount requested (undisputed amount plus additional amount) and send the signed and sworn to form with supporting documentation to the claim examiner. If the claim examiner agrees with the form and supporting documentation, they will pay the total covered loss amount requested. If the claim examiner disagrees, they will issue payment for the undisputed amount and provide the policyholder with a written denial letter. If the policyholder agrees with the denial or no longer disputes the decision, the loss is settled.

Appealing a Claim

If the policyholder disputes the denial, they or an authorized representative may appeal the decision directly to FEMA. Appeals must take place within 60 days of the date of the policyholder's denial letter.

Any policyholder with a denied or partially denied claim may file an appeal to FEMA. Policyholders submitting an appeal to FEMA do not lose the right to file suit against the insurer within the one-year statute of limitations. Once the policyholder sues the insurance carrier, FEMA cannot consider any appeals.

Filing an Appeal

A policyholder must submit an appeal request in writing or online. The request should include the following:

- Policyholder name(s)
- Property address
- The flood insurance policy number (shown on the policy's Declarations Page)
- Contact information (i.e., mailing address, telephone number, e-mail)
- A copy of the denial letter from the insurer
- A summary of the issues with the underlying claim including supporting documentation, prior history, and names of the individuals involved in the claim to date

If the policyholder wishes to authorize a third party (e.g., family member, public adjuster, or attorney) to discuss the appeal with FEMA, the policyholder must provide a written authorization including the following information:

- Policyholder's full name
- Current address
- Date and place of birth
- Representative's name
- Policyholder's signature

The authorization must include the wording below and have the authorization notarized and signed as follows:

- “I declare under penalty of perjury that the foregoing is true and correct.”
- Executed on (date)
- Signature of policyholder”

The policyholder must send the appeal request and documentation to:

- By Mail:
Federal Insurance and Mitigation Administration
Federal Insurance Administrator
400 C Street SW, Washington, DC 20472-3010
- By E-Mail:
FEMA-NFIP-Appeals@fema.dhs.gov

Appeals Process

Upon receipt of the appeal, FEMA coordinates with the policyholder (or authorized representative) to address the issue(s) raised. FEMA assigns each appeal to a multi-disciplinary team that conducts a review of the entire claim file. The team works directly with the policyholder, insurer, and other relevant parties to ensure compliance with all terms and conditions of the SFIP. FEMA determines whether the insurer properly evaluated and paid the claim.

Due to Federal mail screening requirements, FEMA may not immediately receive all appeals submitted. However, upon receipt, FEMA begins its appeal review without undue delay. The typical appeal requires an initial review to assure the submission complies with the requirements. The appeal will be assigned to FEMA personnel to review the appealed items and receipt will be confirmed on how it was received, either through

regular or electronic mail (e-mail). In either case, the policyholder will receive an e-mail address to communicate with FEMA.

FEMA keeps policyholders informed of the status of their appeal during the review process. Typically, FEMA makes a determination within 90 days of receiving all necessary documentation and sends the policyholder and the insurer a decision memorandum explaining FEMA’s decision to either uphold or overturn the insurer’s denial or disallowance.

Litigation

If after an appeal the insured still does not agree with the decision, they may file a lawsuit within one year of the insurer’s first written denial letter. The insured must file the lawsuit in the United States District Court in the district where the property is located at the time of the loss. The appeal process does not extend the one-year period to file suit beginning with the original written denial by the insurer. Subsequent written denials do not restart the one-year period.

You Can Help!

Like other lines of insurance, any entity that secures a mortgage interest in the property will also be required to be listed on any insurance proceeds issued to the policyholder.

In past events, FEMA has seen cases where the mortgage holder withholds the claim payment in escrow for an extended period of time. Delays or limited disbursement of funds prevent the property owner to begin the necessary repairs and slows down the recovery process.

Before a flood event, consider strategies to work with regulated banking institutions to encourage an adequate amount of the claim payment be released and in the hands of the policyholder sooner for a speedier recovery.

Information For Appealing A Flood Insurance Claim:

[https://www.fema.gov/media-library-data/1445375610216-677b966ca615fbc30ce3d88be32611d9/FactSheet_FIMA_Appeals RID_SC_101415_v4\(2\)_accessible.pdf](https://www.fema.gov/media-library-data/1445375610216-677b966ca615fbc30ce3d88be32611d9/FactSheet_FIMA_Appeals RID_SC_101415_v4(2)_accessible.pdf)

Complaints

After a flood event, an NFIP insured may call their state regulatory authority or local community official if they have questions or concerns regarding their flood insurance claim. States do not have jurisdiction over the NFIP or the NFIP claims process. Officials should do the following with NFIP insured calls:

- Refer the insured to their flood insurance agent. The agent acts as a liaison between the carrier and the insured.
- If the agent is unable to assist, encourage the insured to work with their flood insurance adjuster.
- If the insured is having difficulty with their flood insurance adjuster, refer the insured to the adjusting firm handling the claim.
- If the insured is unsuccessful in resolving their claim issue with their adjuster and the adjusting firm, refer them to their carrier.



Information for Policyholders

If your community has been flooded and your property or home has suffered flood damage, please follow these instructions to file your flood insurance claim.

Immediately

- Call your agent or insurance company. If you or your representatives do not have policy information, call 1-800-427-4661.
- Have the following information with you when you make the call:
 - Name of your insurance company (your agent may write policies for more than one company)
 - Policy number if available (If not, they should be able to look it up, or call 1-800-427-4661)
 - Your telephone number and or e-mail address

When You Are Allowed Back To Your Property

- Local officials may require the disposal of damaged items. If you dispose of items, please keep a swatch or other sample of damaged items for the adjuster.
- Separate damaged items from undamaged items.
- Take photographs of damaged personal property. Your adjuster will need evidence of the damaged items to prepare your repair estimate.
- Make a list of damaged or lost items, and include their age and value when possible. If possible, have any available receipts for damaged items available for the adjuster.
- If a contractor documented damage estimates, provide them to the adjuster.
- Contact your insurance company if they have not assigned an adjuster to you within several days.

For More Information

For general flood insurance questions, contact your insurance company or agent, or call 1-800-427-4661.



FEMA Disaster Assistance

After a presidentially declared major disaster, FEMA provides additional assistance to disaster survivors. FEMA under the authority of Section 408 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. §5174, and Title 44 of the Code Federal Regulations (CFR) may provide financial assistance and, if necessary, direct services to eligible individuals and households who, as a direct result of a major disaster, have necessary expenses and serious needs and are unable to meet such expenses or needs through other means.

FEMA's programs help meet essential needs and assist individuals and their households in taking the first steps toward recovery. FEMA programs will not return all homes or belongings to their pre-disaster condition.

When disasters take place, the Individuals and Households Program (IHP) provides money and services to people in the disaster area when insurance does not cover losses to damaged or destroyed property. IHP helps with critical expenses not covered in other ways.

- IHP will not cover all losses from damage to property (home, personal property, household goods) that resulted from the disaster.
- IHP will not restore damaged property to its condition before the disaster.
- In some cases, IHP may only provide enough money, up to the program limits, for applicants to return an item to service.
- IHP does not cover business-related losses that resulted from the disaster.
- By law, IHP cannot provide money for losses covered by your insurance.

While some money is available through IHP, most disaster aid from the Federal Government is in the form of loans from the Small Business Administration (SBA) that borrowers must repay.

Applicants to IHP may be required to seek help from SBA first, before applying for certain types of IHP help. Applicants do not have to submit an SBA loan application for consideration for FEMA rental assistance.

Types of Assistance

The following list shows the types of assistance that are available through IHP and what each provides.

- *Temporary Housing (a place to live for a limited period):* Money may be available to rent a different place to live. A government provided housing unit may be available when rental properties are not available.
- *Repair:* Money may be available to homeowners to repair damage from the disaster not covered by insurance. The goal is to make the damaged home safe, sanitary, and functional. FEMA Disaster Helpline: 1-800-621-FEMA (3362) Hearing/Speech Impaired ONLY: call 1-800-462-7585
- *Replacement:* Money may available to homeowners to replace their home destroyed in the disaster not covered by insurance. The goal is to help the homeowner with the cost of replacing their destroyed home.
- *Permanent/Semi Permanent Housing Construction:* Direct assistance or money for the construction of a home. This type of help occurs only in insular areas or remote locations specified by FEMA, where no other type of housing assistance is possible.
- *Other Needs:* Money is available for necessary expenses and serious needs caused by the disaster. This includes medical, dental, funeral, personal property, transportation, moving and storage, and other expenses authorized by law.