

Class Number	Approved Instructor	Presentation Title	Presentation Topic Area	Presentation Level	Your Presentation's Intended Audience	CE Category	Course ID Number / Course Offering	Course Objective	Brief Description of your Presentation	Insurance Relevance	Speaker Name, Title - Firm;
SESSION 1 JULY 20th, 2026 1:20 - 3:10 PM											
100	130949	Driven by AI: The Rise of Driverless, Connected, and Autonomous Vehicles	Accident Reconstruction	Intermediate	All Attendees			This course is designed for those whose duties require them to have an in depth understanding of vehicular accident investigation and reconstruction, vehicle dynamics, occupant kinematics, human factors engineering and biomechanics of injury causation issues in order to evaluate plethora of vehicular accident claims. The objective of the course is to outline the current state of technology, artificial intelligence and scientific methodology to develop decision making tools needed to evaluate insurance related claims.	This presentation reviews the current development status of autonomous vehicles and evaluates the long-term effect as presented by case studies as well as interviews with experts in the automotive industry, the technology sector, and insurance companies. The audience will gain an understanding of the lasting future implications due to the introduction of autonomous vehicles and artificial intelligence in the mainstream market.	Autonomous vehicles are likely to impact the insurance industry particularly in terms of liability and risk distribution. Although there is a potential reduction in accidents due to improved safety features in autonomous vehicles, there are also new risks that may emerge, such as cyber threats or software malfunctions, that insurance models may need to adapt to. Insurance adjusters will also need to navigate the evolving laws and regulations related to self-driving cars. The course will discuss the role of data collection and analysis in investigating accidents involving autonomous vehicles. All of these insights and more into the changing landscape of the insurance industry will help insurance adjusters stay informed about the latest developments in technology and regulations.	Fahad Booshahri, Principal Engineering Scientist - Global Engineering Scientific Solutions Shamell Tebeau, Engineering Technician - Global Engineering Scientific Solutions
110	1338862	Combating Low Impact Insurance Claims	Low Impact	Intermediate	All Attendees			This presentation provides a process to attack suspect claims at an early stage, with consistent investigative/dispositive strategy. Focus is not centered on analysis of medical records. Rather, assesses element of "causation" and credibility of claimant. Attendees will be provided a clear plan to approach claims to contain costs, reduce indemnification and avoid litigation.	Frustration is what we hear throughout the industry when confronting BI claims emanating from low impact collisions. Damages so minor, common-sense screams no one could have been injured. Yet, insurers settle claims every day for substantial sums as liability is clear or to avoid litigation expenses. This presentation provides a process to attack suspect claims at an early stage, with consistent investigative/dispositive strategy. Focus is not centered on analysis of medical records. Rather, assesses element of "causation" and credibility of claimant. Attendees will be provided a clear plan to approach claims to contain costs, reduce indemnification and avoid litigation.	This presentation provides a process to attack suspect claims at an early stage, with consistent investigative/dispositive strategy. Focus is not centered on analysis of medical records. Rather, assesses element of "causation" and credibility of claimant. Attendees will be provided a clear plan to approach claims to contain costs, reduce indemnification and avoid litigation.	Timothy Tappay, Attorney - Brand & Tappay, LLC
120	1326151	Florida Law and Effective Examinations Under Oath: A Practical Approach to Eliciting Relevant Claim Information	Property Fraud	Introductory	All Attendees			This presentation will include both lecture and interactive facets to provide attendees with a beneficial understanding of Florida law on insured's compliance with post loss conditions, as well as the unique experience of observing portions of a simulated examination under oath during which commentary is offered on an effective approach to eliciting relevant information in the investigation of a questionable or fraudulent claim.	This presentation will include both lecture and interactive facets to provide attendees with a beneficial understanding of Florida law on insured's compliance with post loss conditions, as well as the unique experience of observing portions of a simulated examination under oath during which commentary is offered on an effective approach to eliciting relevant information in the investigation of a questionable or fraudulent claim. During the simulated examination under oath, the presenter will discuss issues that arise before and during examinations under oath, and effective tactics to control their claim investigation.	The examination under oath demonstration is also designed to educate the attendees on the obligations of an insured to respond to relevant inquiry in a claim investigation, and what the contractual limitation will be that set the parameters for the examination under oath inquiry.	Robert Dehne, Shareholder/Partner - Salmon, Salmon, Labbe & Dehne; Nester Marante, Managing Partner - Salmon, Salmon, Labbe & Dehne, PA; Gregory Gilkey, SIU Manager - Tower Hill Insurance Group
130	1349958	The Name(s) Storm Game: Wind, Waves, and Beyond	Hurricane/ Catastrophe Fraud	Intermediate	Any Insurance Employees			This course will provide essential guidance for differentiating between damage caused by high winds or floodwaters; as well as separating the legitimate from the fabricated. This course is being presented by attorneys and a forensic engineer to provide insight on what is being seen in field investigations and in the courtroom.	The Name(s) Storm Game: Wind, Waves, and Beyond provides a practical, multidisciplinary overview of hurricane related property damage claims. Presented by forensic engineers and attorneys, the course focuses on distinguishing wind damage from flood damage, evaluating storm impacts, and identifying legitimate versus questionable claims. Through case studies, field investigation methods, weather research, and policy analysis, attendees learn how evidence is assessed from first notice through litigation. The presentation also addresses coverage defenses, claim investigation tools, and recent case law, offering real-world insight into how named storm claims are analyzed both in the field and in the courtroom.	This presentation is relevant to Florida insurance adjusters who routinely handle hurricanes and named storm claims. It provides practical guidance on differentiating wind damage from flood damage, evaluating storm-related losses, and identifying legitimate versus questionable claims. The course addresses field investigation techniques, weather research, documentation of evidence, and the role of third-party forensic engineers. It also reviews policy interpretation, duties under the policy, coverage defenses, and recent Florida case law. These topics directly support adjusters in making accurate coverage determinations, conducting thorough investigations, and effectively managing named storm claims from initial report through potential litigation.	Patrick Phillips, Principal Engineer - NVS, Inc; Kameron Romaele, Attorney - Kubicki Draper; Nina Williams, Attorney - Kubicki Draper
140	1334341	Corporate Representative Deposition Boot Camp	Legal Matters- Property	Introductory	Any Insurance Employees, Civil Litigation Attorneys			This course aims to prepare both the corporate representative and the defending attorney for a corporate representative deposition. In this 100 minute course we will cover the purpose of the corporate representative deposition, effective preparation techniques, factors to consider in anticipation of your deposition and what types of questions you should expect during the deposition. We will also provide useful and effective tips for attorneys in preparing their corporate representatives for deposition.	This course aims to prepare both the corporate representative and the defending attorney for a corporate representative deposition. In this two-hour course we will cover the purpose of the corporate representative deposition, effective preparation techniques, factors to consider in anticipation of your deposition and what types of questions you should expect during the deposition. We will also provide useful and effective tips for attorneys in preparing their corporate representatives for deposition.	Florida insurance adjusters are often called upon to serve as a carrier's corporate representative at deposition. This course will assist in preparing adjusters to successfully serve in that role.	Tracy Jurga, Partner - Butler Wehmuller Katz Craig LLP; Jennifer Velasco, Attorney - Butler Wehmuller Katz Craig LLP
150	1342295	The Silent Witness - How Vehicle Data Tells the Real Story Behind a Claim	Leveraging Technology	Intermediate	All Attendees			Equip insurance professionals with the skills to identify when modern vehicle data should be used, properly preserve and analyze that data, and compare it to claimant statements, police reports, and loss facts so they can confirm what really happened, uncover potential fraud, and make accurate, defensible claim decisions based on objective evidence rather than stories alone.	The Silent Witness shows how modern vehicles act as unbiased digital witnesses in questionable claims. Built by a multidisciplinary team from SIU, claims, mechanical engineering, and accident reconstruction, this session teaches insurance professionals how to use EDR, telematics, infotainment, ADAS data to verify what really happened. Attendees learn when to use vehicle data, how to preserve it properly, and how to compare it to statements and reports. Real-world cases demonstrate how this technology exposes staged accidents, exaggerated injuries, and questionable thefts, leading to stronger, more defensible claim decisions.	For Florida insurance adjusters, this presentation directly supports accurate claim handling in a high fraud and litigation environment. Florida sees a heavy volume of questionable auto, theft, and injury claims tied to staged crashes, exaggerated injuries, and disputed vehicle usage. Learning how to use EDR, telematics, infotainment, and ADAS data gives adjusters objective evidence to verify speed, braking, location, occupancy, and vehicle access. This helps resolve liability, challenge questionable narratives, and document files with defensible facts that stand up in disputes, arbitration, and litigation while supporting fair claim outcomes.	Curtis Whitfill, VP SIU Compliance & CE Program - NVS, Inc; Steven M. Tuskan, Senior Forensic Consultant - Mecanica Scientific Services
160	1348544	From Generation Alpha to AI: Mastering Social Media and the Evolving Landscape of Tools in Fraud Investigations	Artificial Intelligence	Intermediate	All Attendees			This course will focus on three core objectives: recognize generational shifts in claims trends, apply AI tools to workers' comp investigations, and implement practical strategies in daily roles. Attendees will gain insight into how younger demographics are using technology, application to workers' comp claims patterns and potential fraud vectors, how integrating AI and social media investigation can increase efficiency and accuracy, and provide actionable strategies utilizing these insights and tools in a rapidly evolving landscape.	This session equips SIU professionals with practical, modern strategies for fraud detection in the digital age. It examines how social media, artificial intelligence, and emerging platforms such as BeReal, Clapper, and Instagram Reels are transforming investigations, while highlighting generational differences in online behavior. Through real-world case studies, attendees will see how tools like Open Source Intelligence (OSINT) uncovers staged accidents, disability claims, counterfeit goods, and provider fraud. The presentation also explores AI's role in pattern recognition, synthetic identity detection, and deepfake identification, alongside key ethical and regulatory considerations. Attendees will leave informed, motivated, and better prepared to combat evolving fraud risks.	This session equips SIU professionals with practical, modern strategies for fraud detection in the digital age. It examines how social media, artificial intelligence, and emerging platforms such as BeReal, Clapper, and Instagram Reels are transforming investigations, while highlighting generational differences in online behavior. Through real-world case studies, attendees will see how tools like Open Source Intelligence (OSINT) uncovers staged accidents, disability claims, counterfeit goods, and provider fraud. The presentation also explores AI's role in pattern recognition, synthetic identity detection, and deepfake identification, alongside key ethical and regulatory considerations. Attendees will leave informed, motivated, and better prepared to combat evolving fraud risks.	Christopher McDavid, VP of Desktop Solutions - Delta Group
170	2533245	Fraud In Practice: The Anatomy of Major Cases Against Rogue Providers	Medical Fraud	Intermediate	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, Civil Litigation Attorneys, State/Criminal Attorneys			Equip insurance professionals with the knowledge and tools to identify, investigate, and mitigate major provider fraud schemes. This course emphasizes data analytics, regulatory insights, and collaborative strategies to uncover patterns, validate evidence, and build strong cases. Participants will learn practical techniques—from claims analysis to field investigations—that protect policyholders, reduce financial exposure, and support legal and industry-wide fraud prevention efforts.	This session explores the anatomy of major fraud cases against rogue providers, focusing on investigative strategies, data analytics, and collaborative tools. Attendees will learn how to detect patterns, validate evidence, and build strong cases that protect insurers and policyholders while supporting legal and regulatory action.	This presentation is highly relevant to a Florida insurance adjuster because it addresses provider fraud schemes that directly impact claim costs and compliance in the state's regulated insurance environment. It equips adjusters with practical tools—data analytics, investigative techniques, and legal insights—to detect patterns, validate evidence, and collaborate effectively with SIUs and regulators. These skills help adjusters protect carriers and policyholders, reduce financial exposure, and ensure adherence to Florida's strict fraud prevention statutes.	Jeanne Strick, National Account Manager - Command Investigations; Janecia Moreau, Major Case Medical Investigator - Nationwide Insurance
180	537300	The Life Cycle of a Lie: Property Fraud from Inception to Verdict (and Beyond)	Property Fraud	Intermediate	All attendees, Civil Litigation Attorneys			Provide understanding of fraud that can occur in life cycle of a claim—from Underwriting to Trial (and beyond), including investigations and relief, including referrals to DFS.	Misrepresentation, schemes and fraud during Underwriting and post Policy inception. Identifying questionable dates of loss, pre-existing damage & prior claims. Effective investigation techniques to uncover/identify/verify potential fraud. Public Adjuster, Mitigation, Mold & Remediation patterns, abuses, and fraud. Refuting questionable opinion of opposing expert. Combating obstructive litigation tactics (i.e. - Delay & Concealment). The effective use of questionable facts at Trial without using "I" word. Evaluation of claim exaggeration and inflation rising to fraud. Remediation for relief after the claim is closed, paid or at trial.	This presentation is an intermediate course designed for insurance industry professionals, experts, attorneys and law enforcement who handle first party property claims (Residential and Commercial) investigation to assist in identifying misrepresentation and fraud starting at the Underwriting/Application process and throughout the life cycle of a claim, which will assist claims professionals handling claim, attorneys litigation these cases and law enforcement in understanding, as well as prosecuting these claims, including referrals to DFS.	Gregory Hengber, Attorney - Goldstein Law Group; Zasha Rodriguez, Senior Partner - Goldstein Law Group; Jon Pruitt, Licensed General & Roofing Contractor; Agrapras Jimping, Adjuster - Addison Riley; Lauren Weiner, SIU Field Investigator - Windward Risk Managers
SESSION 2 JULY 20th, 2026 3:30 - 5:20 PM											
200	1327710	The Truth, the Whole Truth and Nothing But the Truth, Successfully Preparing Your Corporate Representative in a Fraud Proceeding	Legal Matters - Other	Intermediate	Any Insurance Employee, SIU & Private Investigators, Law Enforcement Officials, Civil Litigation Attorneys, State/Criminal Attorneys, State/Government Employees			The course objective is to instruct defense counsel and insurance and SIU professionals on how best to prepare when they are called as corporate representatives for trial testimony in civil and criminal proceedings.	This presentation discusses the best methods to utilize in preparing a corporate representative in different types of fraud cases. It explores concerns arising from privilege and immunity issues, explains the differences in preparing for a civil vs a criminal matter and explores how testimony can be utilized across proceedings in both positive and negative connotations. The presentation includes a mock trial where the techniques discussed will be given their practical applications through real life examples.	Adjusters are often called to testify as corporate representatives in fraud related matters. It is important that they understand the parameters of their testimony, the impact to the case and how privilege and immunity may impact what is said or not said.	Maria Abate, Shareholder - Colodny Fass; Mariela Perez-Pennock, AVP SIU, Fraud Compliance & Subrogation - Assurant; Charles Watkins, Shareholder - Kubicki Draper
210	2536800	Crash Con: Spotting a Staged Auto Accident	Casualty Fraud	Intermediate	All Attendees			To help with the identification, investigation and fraud referrals as they relate to staged and caused auto accidents.	This course will outline the key players involved in staged auto accidents, explain the various scheme types, and detail how they are orchestrated. We will explore critical indicators that suggest you may be dealing with a staged or intentionally caused accident. Additionally, we will cover effective techniques for interviewing the parties involved. Finally, we will discuss the optimal timing for an SIU referral, including when to refer a case to the Special Investigations Unit (SIU).	This course is applicable to both commercial and personal auto insurance lines. Staged and intentionally caused auto accidents in major metropolitan areas are on the rise, often linked to organized crime syndicates.	Garrett Boeckeler, SIU Director - Becker & Company; Shannon Hooper, SIU Case Manager - Becker & Company

220	1349804	Traumatic Brain Injuries	Other - Medical	Intermediate	Any Insurance Employee, Civil Litigation Attorneys			This course will assist adjusters in working closely with their defense attorneys to ensure an adequate defense of a traumatic brain injury case from initial discovery up until trial. There are common litigation tactics used by Plaintiff attorneys which this course first identifies and then provides a strategic defense to combat the same.	This presentation walks adjusters through a Plaintiff's attorney's work-up of a traumatic brain injury case starting from the initial phase of the case leading up to trial. The adjuster will learn how the case should be defended to put the defendant in the best position for a reasonable settlement or success at trial. The sections within the presentation include discovery, investigation, understanding and defending against plaintiff's treatment and treaters, defense experts to be considered, and anticipated plaintiff's trial tactics with the appropriate defense motion practice and arguments to be made at trial to address these tactics.	There has been a rise in traumatic brain injury claims since the enactment of Florida Statute 768.0427 et seq., and Florida adjusters will benefit from an understanding of the plaintiff's bar tactics in working up their cases through trial.	Emily Silver, Partner - Segundo Law Group; Daniel A. Martinez, Partner - Segundo Law Group; Jennifer Worden, Partner - Segundo Law Group	
230	1347781	Wind vs. Storm Surge Damage: Case Studies from Hurricane Helene	Hurricane/ Catastrophe Fraud	Introductory	Any Insurance Employee, Civil Litigation Attorneys, Reconstructionist/Engineers			This course provides an overview of the field adjuster's (or inspector's) role in recognizing wind and storm surge related damage to residential coastal buildings. A basic overview of hurricanes, wind events and storm winds and waves affect properties is also presented. Multiple key facts are discussed in order to draw a clear conclusion between wind- and wave-related damage to residential coastal structures.	This presentation examines the distinct impacts of wind and storm surge during Hurricane Helene through selected case studies. By comparing damage patterns, it highlights how each hazard affects structures and communities differently, offering insights to improve risk assessment, preparedness, and coastal resilience strategies.	Understand the basic principles of wind science and wind engineering and how hurricanes form. Learn how winds and waves affect buildings and coastal structures. Present field observations and case studies from Hurricane Helene. Showcase videos of wind tunnel testing results and examples of wind damage to residential roofs.	Ziad Aazi, Director of Engineering - DDA Forensics	
240	1348254	Cracking the Code: Digital Forensics for Fraud Investigations	Investigation Techniques	Intermediate	SU & Private Investigators, Law Enforcement Officials, Civil Litigation Attorneys, State/Criminal Attorneys			Attendees will be able to list and describe types of data that can be extracted and analyzed from cell phones and other electronic devices. Through discussions of real-world case examples, attendees will develop a deeper understanding of how forensic expertise is applied in different claims investigations.	With the rapidly evolving landscape of digital technology, mobile devices are key to unlocking valuable data for fraud investigations. In "Cracking the Code: Digital Forensics for Fraud Investigations," Timothy R. Primrose, Digital Forensic Analyst with DIS Associates, introduces the types of data available for extraction and analysis from cell phones, vehicle infotainment systems, and more. Real case applications utilizing mobile forensic analysis will be explored to help attendees gain understanding of how device data can be harnessed to establish timelines, track movements, corroborate testimonies, and uncover crucial insights surrounding a person's activities and communications.	This presentation will inform Florida insurance adjusters on applications of data extracted from cell phones and other electronic devices to investigate the validity of various claims, including automotive and personal property.	Timothy Primrose, Digital Forensic Analyst - DIS Associates, Inc.	
250	1311323	Hard Fraud/Soft Fraud	Property Fraud	Intermediate	Any Insurance Employees			Recognize fraud and implement tools for identifying bad actors, investigating schemes, and successfully defending fraudulent claims involving contents.	An examination of varieties of fraud that include the complete fabrication ("hard fraud") and fraudulent inflation of what may have started as a covered loss ("soft fraud").	Florida adjusters must know how to identify, investigate, and combat both hard and soft fraud in contents claims.	Andy Rock, Owner/Partner - The Rock Law Group, P.A.; Jacqueline Allison, Contents Specialist - JS Held	
260	1307779	Sick of Being Targeted by Organized Insurance Fraud Crime Rings-Winning Litigation Strategies from Real Fraud Fighters	Organized Crime	Intermediate	All Attendees			Educate investigators and law enforcement about the crime rings currently defrauding insurers, companies and businesses. Provide strategies on how to fight back against these crime rings when they sue you. For example one proactive solution to stopping the crime rings in their tracks and that solution is the Declaratory Judgment Action. One reactive solution is a thoughtful, strategic and aggressive defense of the personal injury lawsuits brought on behalf of the crime ring participants.	Insurance companies, rideshare/delivery companies and rental car companies are more fertile targets than ever for organized crime rings. Once the crime rings know their targets exist, they spring into action to stage intentional automobile crashes. Many insurance companies, rideshare/delivery companies and rental car companies typically conduct investigations into these staged crashes and if proven, simply deny the claim. However, that never stops the crime rings. We will provide tried and true proactive and reactive strategies to fight back against the crime rings.	The Florida insurance adjuster will learn about the current day fraud schemes perpetrated by organized crime rings. They will also be taught some hard hitting, successful proactive and reactive techniques to fight back against these crime rings.	Frank Goldstein, Managing Partner - Goldstein Law Group; Jordana Kahn, Partner - Burger, Meyer, D'Angelo; Stephanie Valentine, In-House Counsel/Trial Attorney - Zurich North America; Christina Mannino, Vice President - Crum & Foster	
270	1349955	Introduction to Investigations and Interview Techniques	Investigation Techniques	Introductory	Any Insurance Employees, SU & Private Investigators			The course trains claims and SIU professionals to recognize suspicious claims using red-flag analysis and understand how various investigative methods support fraud detection. Through case studies, participants learn to apply investigative results to real claim files. The course also develops skills for conducting effective, legally compliant recorded interviews. Attendees learn interview types, ethical considerations, step-by-step interview structure, and techniques for managing interruptions, refusals, and challenging environments while documenting accurate, defensible records.	This course introduces claims and SIU professionals to identifying suspicious claims through red-flag analysis, industry trends, and thorough desktop investigations. It explains common fraud indicators, illustrates them through real claim examples, and teaches how various investigative methods generate actionable evidence. Case studies reinforce how investigative findings guide next steps. The second part focuses on conducting effective recorded interviews, emphasizing best practices for interviewing insureds, claimants, and witnesses while meeting legal and ethical requirements. Participants learn structured techniques for planning, conducting, and documenting interviews, ultimately strengthening their investigative skills and improving claim-handling outcomes.	Faster, smarter claim triage & SIU referrals. Better investigative ROI and defensible decisions. Strong, compliant recorded interviews. How to overcome real world claims handling friction points. Stronger file quality & audit readiness.	David Dawick, VP of SIU Business Development - Advantage Investigations; Scott MacDuffee, SIU VP of Investigations - Advantage Investigations	
280	1345887	The Rise of Examinations under Oath - Overview	Investigation Techniques	Introductory	All Attendees			This course provides an in-depth overview of Examinations Under Oath (EUOs), exploring their purpose, procedural requirements, legal distinctions, and key case law to equip legal professionals with practical knowledge and strategies for handling EUOs effectively.	This course offers a comprehensive guide to understanding and managing Examinations Under Oath (EUOs) in the context of Florida insurance law. Participants will learn about the statutory basis, differences between recorded statements, EUOs, and depositions, as well as scheduling protocols, material misrepresentations, and relevant case law. The course also covers practical tips for inquiries, consequences of non-cooperation or failure to appear, and how to navigate complex scenarios.	This course will provide insights into examinations under oath with respect to their legal requirements, investigative purpose, and practical applications to claims handling.	Teodora Siderova, Partner - Kubicki Draper; Jonathan Chinichilla, Associate Attorney - Kubicki Draper; Manuel Sousa, Associate Attorney - Kubicki Draper	
CIFI	CIFI	CIFI Examination Prep Course	CIFI Exam Prep	Introductory	All Attendees	n/a	n/a	CIFI Preparation Examination	This course is designed to prepare individuals interested in taking the CIFI Examination. This class is approximately 60 minutes long and the exam will be administered afterwards. This class is NOT accredited for Florida adjuster CE credits or Florida Bar CLEs. Selecting this preparatory course does not automatically register you for the examination as well. Interested candidates would need to complete the separate CIFI Examination Registration at https://www.isiu.org/page/CIFI	CIFI Preparatory Exam	Julianna Hyde, General Special Investigator - Farmers Insurance Exchange	
SESSION 3 JULY 21st, 2026 8:00 - 9:50												
300	1346980	From "Safety Rules" to Sound Verdicts: A Defense Playbook for Stopping Nuclear Verdicts* with The Apex	Legal Matters - Other	Introductory	Any Insurance Employees, Civil Litigation Attorneys, State/Criminal Attorneys			Attendees will leave this course armed with techniques to prevent Nuclear Verdicts*, drawn from The Apex, Tyson & Mendes' revolutionary new defense method for prelitigation and litigation. In addition, the course will provide attendees with ways to stop The Reptile at trial and keep plaintiffs' attorneys from using one of the most powerful tools in their arsenal.	Nuclear Verdicts* do not happen by accident; they are built. Plaintiffs' attorneys use every trick in the book to engage jurors. Using tactics like The Reptile, plaintiffs' attorneys can easily shift the burden and make defense look irresponsible and downright evil. Defense counsel and insurance professionals will leave knowing how to defuse juror anger. With The Apex, an innovative new strategy for prelitigation and litigation, defense can fight back against Nuclear Verdicts*. Attendees will leave armed with actionable techniques to fight back against plaintiff's tactics like The Reptile, as well as best practices for handling cases which may go Nuclear.	This presentation will provide adjusters a roadmap on how best to handle high-risk files from start to finish. Nuclear Verdicts* are handed down in the courtroom, but they are built in prelitigation, during case handling. By understanding how Nuclear Verdicts* are built, insurance adjusters will have a better understanding of best practices for case handling.	Jason Boone, Partner - Tyson & Mendes; Ashley L. Hollingsworth, Partner - Tyson & Mendes	
310	301575	SIU, Claims & Litigation Technology in the 21st Century	Legal Matters - Other	Introductory	All Attendees			This course educates insurance and legal professionals on the practical impact of modern court reporting, video, claims, and litigation technology. Participants will learn how authenticated video testimony, certified transcripts, centralized case resources, and litigation intelligence tools strengthen claim evaluation, improve fraud detection, support earlier settlement discussions, reduce trial volume, and enhance efficiency across SIU investigations, EUOs, depositions, mediations, hearings, and trials.	The program provides insurance and legal professionals with a practical, real-world overview of modern technologies transforming SIU investigations, claims handling, and litigation strategy. The course focuses on improving operational efficiency and strengthening collaboration among claims professionals, SIU teams, and defense counsel. It also examines how proven, technology-driven strategies can be implemented early in the claims lifecycle to help resolve questionable claims pre-suit, accelerate favorable settlements, and significantly reduce the frequency of trial, beginning at the initial claim handling stage. By the conclusion of the program, participants will gain actionable insights into integrating these tools into their daily workflows to improve efficiency, reduce litigation exposure, and drive more favorable claim outcomes.	This presentation is directly relevant to Florida insurance adjusters by addressing the tools, workflows, and legal considerations that impact claim handling, SIU investigations, and litigation support. The course explains how authenticated video testimony, certified transcripts, and centralized case resources improve claim evaluation, credibility assessment, fraud detection, and documentation accuracy. Adjusters will learn how these technologies support earlier, more informed decision-making, facilitate lawful information sharing under Florida Statute §626.389, reduce claim duration, and strengthen collaboration with SIU and defense counsel. The content focuses on practical application, compliance, and efficiency throughout the life of a claim.	Raymond Carabotta, Co-Owner & Executive Vice President - Universal Court Reporting; Sam Hayem, Chair - Kelley Kronenberg; Carlos Torres, Chief Claims Officer - Loyalty Underwriter	
320	1323989	Subrogation and Missed Opportunities	Subrogation	Introductory	All Attendees			The aim of this course is to provide adjusters and attorneys with a comprehensive understanding of subrogation, focusing on identifying and capitalizing on opportunities often missed in the insurance claim process. We will, through detailed modules, case studies, and expert insights, give participants a solid working knowledge of subrogation practices and offer necessary skills that can significantly increase their effectiveness and confidence when handling claims that could benefit from the use of subrogation.	This course will give an overview on subrogation and its significance in insurance claims. We will cover the subrogation process, techniques for spotting subrogation potential, the best practices when dealing with subrogation claims, and when to engage specialized experts.	Subrogation opportunities are often missed in the insurance claim process. This course will help adjusters understand and evaluate subrogation potential and give insight on how to go about recovering claim costs.	David Cheers, CEO/Senior Fire Consultant - Jack Ward Fire Consultants	
330	1351642	The Fine Print and the Fraud: Navigating Fraud in Fidelity Insurance	Financial Crimes	Intermediate	All Attendees			This course equips participants with a comprehensive understanding of fidelity insurance, including coverage for employee theft, computer fraud, and funds transfer fraud. Learners will explore key policy limitations, recognize fraud risk indicators, and examine investigative processes involving insurers, forensic experts, and legal counsel. The program emphasizes best practices for fraud prevention, evidence preservation, and recovery strategies to effectively manage and mitigate financial crime losses.	This session examines the complexities of fidelity insurance claims and investigations, with a focus on employee dishonesty, theft, and fraud schemes. It highlights common coverage limitations, internal control weaknesses, and real-world case studies to illustrate how organizations can mitigate risk and maximize recovery. The discussion emphasizes best practices for prevention, detection, and response.	This course is highly relevant to Florida insurance adjusters because the state faces a significant risk of financial crimes and fraud, particularly in industries like construction, healthcare, and real estate. Fidelity claims often arise in complex scenarios involving employee dishonesty, cyber fraud, and funds transfer schemes—issues that Florida adjusters frequently encounter due to the state's large business base and high volume of financial transactions. Understanding coverage nuances, investigating collaboration, and fraud prevention strategies helps adjusters handle these claims accurately, reduce disputes, and protect insureds from substantial losses.	Natalie Lewis, Senior Vice President: Economic Damages & Valuation - I.S. Held LLC; Stefan Dandelis, Partner/Chair of Fidelity & Crime Practice Group - Kaufman Dolowich Law Firm	

340	1338531	SIU- Past-Present-Future	Investigation Techniques	Intermediate	All Attendees	This presentation, delivered by two long tenured SIU leaders, provides the history of the SIU profession, the current state and how to navigate the future of investigation. The attendees will leave with a better understanding of how the SIU process developed and be able to attain smart growth going forward.	This presentation provides a deep history of the insurance investigation process, where we are today and how to navigate the future of investigation. The program focuses on what works and what will be the positive improvements needed to move into the future. Technology is a large part of the presentation, with AI being at the forefront of fraud fighting going forward.	Having an understanding of how to fight fraud in the future is extremely important to the SIU and insurance community. Knowing the origins of the profession will also provide a strong base in which to move forward.	Francis Stuk, Senior Vice President - Delta Group; John Sargent, Senior Vice President - Delta Group
350	1319556	Defending Claims of Invisible Mold - The Daubert the Answer?	Investigation Techniques	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys, Reconstructionist/Engineers	Educate the audience about recent trends in mold litigation where lab data is overly relied upon to prove negligence and damages. Provide a realistic perspective on what science is actually able to say. Give real life examples as reinforcement of these concepts.	Restoration is a relatively young industry that is still evolving. While institutes of higher knowledge work to establish reliable standards of practice, misinformation runs rampant, and the environment is ripe for profiteers to take advantage of the grey areas. One rising trend involves over-reliance on lab data to indicate a mold problem with resulting injury. This discussion will help dispel the mysticism surrounding lab data and focus on the use of methodologies that are commonly accepted by the scientific community to determine when restoration activities are necessary.	The adjusters, and property owners, are repeatedly presented with this confusing information and may be tricked into conclusions that are not scientifically supported. We can help clarify the confusing areas and improve their ability to make the right decisions.	Albert Baeren, President - AB Indoor Environments; Alain Leucsay, Attorney - Alain Leucsay, P.A.
360	1351652	The Power of Vehicle Data in Investigating and Detering Auto Fraud	Auto Fraud	Intermediate	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials	By the end of this course, learners will be able to: recognize common auto-fraud schemes (VIN fraud, title washing, odometer rollback, staged claims, and theft), apply vehicle-history data tools to identify red flags, and outline investigation steps and industry collaboration strategies to deter, investigate, and recover losses from auto fraud.	It has never been easier to commit VIN cloning, odometer rollback, title washing and other types of auto fraud. Vehicle specific data can help SIUs detect, deter, and investigate potential fraudulent claims. This session will discuss how key vehicle history data points can help claims professionals quickly identify and investigate potential fraud and locate/recover stolen vehicles. We'll present various case studies that demonstrate the impact vehicle history data has on a claim organization's bottom line.	This presentation is highly relevant to Florida insurance adjusters seeking CE credits as it directly addresses critical fraud detection skills required in their daily work. The course's focus on VIN cloning, title washing, and odometer rollback schemes is particularly valuable for adjusters operating in Florida's high-risk auto fraud environment. The training fulfills Florida's mandatory continuing education requirements while providing practical tools for vehicle history data analysis and red flag identification that adjusters can immediately apply to claims evaluation.	Tom Scheffer, Auto Claims Director - CARFAX For Claims; Alyssa Woolwine, Strategic Account Manager CARFAX For Claims
370	1339687	Drips, Drops, and Disputes Science, Engineering, and Legal Insights into Water Damage Claims	Property Fraud	Intermediate	Any Insurance Employee	Attendees will gain insight into water damage research, case analysis, litigation defense strategies, and relevant policy provisions. The session explores how engineers and scientists evaluate water damage over time and support expert opinions, and how attorneys leverage those opinions in litigation. Key topics include damage duration, causation, policy interpretation, and how these elements inform coverage decisions and effective litigation defense.	Drips, Drops, and Disputes: Science, Engineering, and Legal Insights into Water Damage Claims examines how water damage is investigated, interpreted, and defended in legal and legal proceedings. This presentation explores the engineering research, real-world case studies, and applicable policy language to explain how cause, origin, and duration of water damage are determined. Attendees will learn how building materials respond to moisture over time, how experts support defensible opinions, and how attorneys leverage those opinions alongside policy provisions and case law to support coverage decisions and litigation defense.	This presentation is directly relevant to Florida insurance adjusters as it focuses on the investigation, analysis, and interpretation of residential water damage claims commonly encountered in Florida. The course addresses how to determine the cause, origin, and duration of water damage; evaluate building materials and moisture related deterioration; and apply policy provisions, endorsements, and exclusions specific to water losses. It also reviews Florida case law, claim handling considerations, documentation practices, and litigation trends, helping adjusters make well supported coverage decisions and effectively manage water damage claims from first notice through potential litigation.	Nolan Wetts, Forensic Engineer/Scientist - NWS, Inc; Nicole M. Fluet, Director - Galloway Law Firm
SESSION 4 JULY 21st, 2026 10:10 - NOON									
400	1351566	Anatomy of Insurance Crimes From Tip to Prosecution	Financial Crimes	Intermediate	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, State/Criminal Attorneys, State/Government Employees	This course is designed to provide a complete end-to-end understanding of how insurance fraud cases originate, develop and move through the justice system. Participants will learn how to identify red flags, how to compose actionable tips, what the investigation process is, and what is needed from the insurance companies to effectively collaborate with law enforcement. This course will discuss what is needed for a successful prosecution using real-world scenarios, investigative tools, and evidentiary requirements.	This course will review how tips originate. What information is needed for a tip to be considered good and actionable. We will review Fla Statutes and what is considered helpful information from the insurance company in a criminal investigation. The course will also go over standards of evidence in criminal cases, the red flag indicators of fraud regarding vehicles, staged crashes, medical fraud, etc. We will also review investigative techniques and how in-house counsel assists in criminal investigations with strategy and support. Real case scenarios will be discussed and pointers will be provided from the prosecution's point of view.	This class will be relevant for insurance adjusters as we will be covering Insurance Fraud Florida law, tips that are mostly generated by claims adjusters, 626 letters, how adjusters can assist in criminal investigations, what the criminal investigative process entails, and what prosecutors are looking for when filing insurance fraud cases.	Amy Casanova-Ward, Senior Attorney, Criminal Law & False Claim Unit - Florida Dept. of Financial Services; Katie May, Senior Attorney, Office of the General Counsel - Florida Dept. of Financial Services; John Paul, Senior Assistant Statewide Prosecutor - Florida Attorney General's Office of Statewide Prosecution - Cyber Fraud Enforcement Unit
410	1336410	Investigating Fraud and Preserving Fraud Defenses in Water Damage Claims	Property Fraud	Intermediate	All Attendees	To review the evidence gathering necessary to prove insurance fraud.	The course will review statutes, policy language and case law related to fraud in water damage claims and methods for gathering evidence to be used in litigation.	Adjusters are the first responders to water damage claims and this course will review the tools available to identify red flags and potential fraud and gather admissible evidence for use in litigation.	Mina Jacobs, Partner - Simon, Reed & Salazar PA; Thomas Shell, President - Tom Shell Plumbing, Inc.; Holly Johnson, Attorney/Partner - Simon, Reed & Salazar PA
420	1329058	"Water Arson" Water Loss Fraud – an Engineering and Legal Discussion	Property Fraud	Intermediate	All Attendees	This session teaches adjusters how to recognize when expert involvement is needed on water loss claims and select the appropriate expert type. It highlights common indicators of fraudulent losses, provides effective interview questions to support investigations, and outlines key information essential for accurate claim evaluation. Together, these skills strengthen investigative accuracy and improve claim outcomes.	This session offers a distinct examination of water loss fraud from both legal and technical engineering viewpoints. It explores various red flags that may indicate potential fraudulent water loss claims, as well as investigative and engineering practices for assessing such cases. Additionally, it provides a legal perspective on emerging trends and relevant laws surrounding potential water loss fraud. Through a combination of theoretical analysis and real-world case studies, this engaging class equips participants with valuable insights into both the investigative process and litigation considerations.	Florida adjusters operate in one of the most complex and fraud prone insurance environments in the country, especially when it comes to water losses. This session will provide the red flags in questionable claims, outlines investigative and engineering methods for evaluating damage, and reviews Florida specific legal trends affecting fraud cases.	Jay Kramarczyk, Vice President - ERI Global
430	1311285	Investigating and Handling Workers' Compensation Fraud Claims in Florida	Worker Compensation	Intermediate	Any Insurance Employees, Civil Litigation Attorneys, State/Government Employees	The objectives of the course are to: a) Provide an overview of the handling of fraud claims in FL, based on the statutory framework; b) Outline legal responsibilities, reporting duties, and compliance with FL anti-fraud regulatory frameworks; c) Illustrate statutory reporting requirements for successful investigations; and d) Share preventative workflows that connect to regulatory compliance and anti-fraud planning.	This course provides Florida insurance specialists with a practical, law-based guide to identifying, investigating, and handling workers' compensation fraud. Participants will learn their statutory duties under Chapter 440, Florida Statutes, how to recognize fraud indicators, conduct compliant investigations, document findings, and report suspected fraud. The presentation links daily claim-handling tasks to Florida laws and administrative rules, helping specialists protect the system, reduce losses, and ensure lawful, ethical claim management.	This course focuses on core competencies required by Florida law and regulation of adjuster licensing and education. It covers claim investigation, documentation, fraud detection, ethical duties, and legal compliance under Chapter 440, Florida Statutes and related administrative rules. These are topics that align with DFS and licensing requirements. The seminar strengthens technical knowledge, legal awareness, and professional responsibility, making it suitable for CE categories such as workers' compensation, claims handling, ethics, and Florida law update.	Marie Masson, WC Attorney & Civil Mediator - Maze Resolutions, LLC
440	1326483	Creating leverage in Bad Faith claims with coverage Dec Actions	Legal Matters - Other	Intermediate	All Attendees	This session explores how coverage declaratory judgment actions can be strategically used to create meaningful leverage in bad faith insurance claims. Attendees will learn how insurers' coverage positions, reservation of rights, and declaratory actions can expose vulnerabilities that strengthen a policyholder's bad faith case. The discussion will focus on aligning coverage disputes with claim-handling misconduct, using timing and procedural strategy to increase pressure, and developing discovery that connects coverage defenses to bad faith liability.	This session explores how coverage declaratory judgment actions can be strategically used to create meaningful leverage in bad faith insurance claims. Attendees will learn how insurers' coverage positions, reservation of rights, and declaratory actions can expose vulnerabilities that strengthen a policyholder's bad faith case. The discussion will focus on aligning coverage disputes with claim-handling misconduct, using timing and procedural strategy to increase pressure, and developing discovery that connects coverage defenses to bad faith liability.	This session explores how coverage declaratory judgment actions can be strategically used to create meaningful leverage in bad faith insurance claims. Attendees will learn how insurers' coverage positions, reservation of rights, and declaratory actions can expose vulnerabilities that strengthen a policyholder's bad faith case. The discussion will focus on aligning coverage disputes with claim-handling misconduct, using timing and procedural strategy to increase pressure, and developing discovery that connects coverage defenses to bad faith liability.	Bill McFarlane, Senior Partner - McFarlane Law, Frank Luis, Director General Insurance Company - Regional Claims Manager-Florida Claim Division
450	1316053	Small Damage, Big Claims: Uncovering Investigative Techniques for Minor Impact Soft Tissue (MIST) Claims	Investigation Techniques	Intermediate	All Attendees	To be able to recognize indicators that suggest a MIST claim may require further investigation. Determine when to escalate a claim and select appropriate investigative options. Understand investigative tools and how they support coverage, liability, and injury evaluation. Identify potential organized fraud activity and patterns connected to MIST claims, and apply best practices for resolving MIST claims with confidence.	Minor Impact Soft Tissue (MIST) claims present ongoing challenges for claims professionals, often involving minimal vehicle damage paired with significant injury allegations. This session equips adjusters and SIU personnel with practical strategies to identify, investigate, and resolve questionable MIST claims. Attendees will learn to recognize red flags, determine when escalation is appropriate, and select investigative options that provide the greatest value based on claim facts. The session explores investigative tools: EDR downloads, scene analysis, surveillance, and background intelligence, and examines how organized fraud rings leverage MIST claims. Participants will leave with actionable techniques to support defensible, confident claim outcomes.	This presentation is directly relevant to Florida insurance adjusters who handle Minor Impact Soft Tissue (MIST), automobile bodily injury, Personal Injury Protection (PIP), and liability claims. Florida continues to experience a high volume of Minor Impact Soft Tissue (MIST) claims, including claims involving staged accidents, exaggerated injuries, and organized fraud rings. These claims present unique challenges and require adjusters to apply careful investigation, documentation, and evaluation to comply with guidelines and expectations. The course reinforces an adjuster's responsibility to conduct a prompt, thorough, and fair investigation of claims by teaching how to identify red flags, evaluate injury causation in low-impact losses, and select appropriate investigative tools such as EDR data, scene analysis, and background intelligence. The presentation also addresses how organized fraud rings leverage MIST claims. By focusing on real-world claim scenarios, investigative decision-making, this session supports adjusters in meeting professional standards, reducing improper claim payments, and protecting consumers and insurers alike.	Tom Ceres, Vice President-National Sales - CoverItBridge Group; Buddy Tawn, Director - Corporate Claims - FCC Insurance Group
460	1333804	Digital Image Forensics	Investigation Techniques - Other	Intermediate	All Attendees	The submission of digital photos as proof of ownership, loss or injury is part of the insurance claims process; the reliance on these photos in claims decision making continues to accelerate. The advancement of image alteration technologies and the emergence of Artificial Intelligence (AI) also present challenges in the validation of digital images.	This presentation will provide methods, tools and insights that the attendee can immediately apply to their investigations which will enable them to identify images, documents and video which were altered through the use of editing software, or created using Artificial Intelligence (AI) applications.	The advancement of image alteration technologies and the emergence of Artificial Intelligence (AI) present challenges in the validation of digital images. Developing skills to combat these kinds of fraud are critical to the insurance or law enforcement professional.	Arthur Grady, Management Support Associate Manager - Allstate Insurance Company
470	1327625	Litigation Funding and Social Inflation - Trends and Issues to Consider	Legal Matters - Property	Introductory	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, Civil Litigation Attorneys, State/Criminal Attorneys, State/Government Employees	Discuss the history and effects of litigation funding. Discuss trends in social inflation; Discuss how Litigation Funding dovetails with social inflation; Discuss Regulation introduced in Florida and other states. Discuss effects on claims and litigation.	For participants to have a better understanding of the prevalence and effects of litigation funding in claims handling. Comparing similarities and differences with Assignments of Benefits and other litigation abuses.	Provide a better understanding of additional issues to aid in the investigation and resolution of claims. Also identify potential referrals to the Criminal Investigation Division (CID).	Jose Pagan, Director of Regulatory Affairs - Florida Surplus Line Services Office; Greg Thomas, Director of Professional Development - FAU
SESSION 5 JULY 21st 2026 1:10 - 3:00									

500	1351566	High-Tech Hustles: Crypto, AI, and the Future of Fraud	Financial Crimes	Intermediate	All Attendees		Emerging technology issues in fraud, particularly in cryptocurrency and AI, have become increasingly relevant as these technologies evolve and become more integrated into mainstream finance, business, and daily life. As both cryptocurrencies and AI technologies continue to advance, so do the fraud tactics that target them. Come learn from the attorneys working at DFS and at Statewide in the Cyber Fraud Enforcement Unit on how to combat this emerging threat!	This class will focus on real world insight provided by Senior Prosecutor John Paul, who works at Statewide, in the Attorney General's Office, in the Cyber Fraud Enforcement Unit and Senior Attorneys Amy Casanova-Ward and Katie May who work with the Criminal Investigations Division at the FL Dept. of Financial Services. The class will cover: technology issues in fraud, fake insurance sold online, creation of fake documents and investment scams, spoofing of phone numbers, AI used in fraud crimes, cryptocurrency and Domain Name Seizure Warrants. The class will also include relevant FL case law and statutes.	This class is relevant to Florida Insurance Adjusters because it goes over insurance fraud occurring in social media, by phone and by documents. The class will also include relevant FL case law and statutes. It will provide pointers on how to build their cases and what is needed when providing information under E26 to prosecutors working cyber crimes and cryptocurrency cases.	Amy Casanova-Ward, Senior Attorney, Criminal Law & False Claim Unit - Florida Dept. of Financial Services; Katie May, Senior Attorney, Office of the General Counsel - Florida Dept. of Financial Services; John Paul, Senior Assistant Statewide Prosecutor - Florida Attorney General's Office of Statewide Prosecution - Cyber Fraud Enforcement Unit
510	1351582	Using Human Factors to Understand Incidents, Evaluate Credibility, and Uncover Fraud	Investigation Techniques	Intermediate	All Attendees		This course equips insurance professionals with Human Factors principles to evaluate incident credibility and uncover potential fraud. Participants will learn how human perception, attention, expectations, and communication limitations influence real-world behavior, and how these insights can be applied to assess claims accuracy, challenge implausible narratives, and strengthen investigative and litigation strategies.	Fraud investigations often depend on understanding what people could realistically perceive, expect, and do during an incident. This presentation introduces Human Factors as a practical, science-based approach to evaluating credibility and detecting fraud. Attendees will explore how perception limits, expectations, attention, distraction, and warning effectiveness impact behavior—and how these factors can expose inconsistencies in claims. Using real-world case examples, the session demonstrates how Human Factors analysis helps distinguish plausible human behavior from exaggerated or fabricated accounts, strengthening investigations, defenses, and litigation outcomes.	Florida adjusters routinely handle premises liability, auto, workers' compensation, and injury claims where credibility is central and fraud exposure is high. This presentation gives adjusters a defensible framework for evaluating what claims, drivers, or policyholders could realistically see, notice, and respond to in common Florida loss environments. Human Factors principles help adjusters ask better questions, document stronger claim files, identify red flags early, and support coverage decisions that can withstand regulatory, legal, and litigation scrutiny.	Phillip Jasper, Principal: Human Factor Group - I.S. Held LLC
520	1349549	Missing Vehicles, Hidden Clues: A Smarter Approach to Theft & Fraud	Theft Investigations	Intermediate	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, State/Criminal Attorneys		Participants will learn to identify, investigate, and mitigate modern auto-theft and insurance-fraud schemes by recognizing red flags, analyzing documentary evidence, leveraging investigative tools and applying policy-specific strategies. By the end of the course, attendees will be able to assess theft claims more accurately, detect fraudulent activity earlier, and reduce exposure for their organization.	This 100-minute training provides a comprehensive overview of current theft and fraud trends affecting the insurance and law-enforcement community. The course begins with an examination of today's most prevalent theft schemes—including VIN-altered vehicles, owner give-ups, organized criminal rings, paper-only cars, false theft claims, and rideshare-related coverage issues. Participants will then learn how to "follow the paper trail" by evaluating financial indicators, underwriting records, driver and criminal history, title documents, and law-enforcement reports to uncover inconsistencies.	This course is highly applicable to Florida insurance adjusters because it addresses the exact theft and fraud patterns currently impacting claims throughout the state. Florida consistently ranks among the top states for vehicle-related fraud, organized criminal activity, title scams, and rideshare-related insurance issues. Adjusters in Florida face unique challenges, including high rates of staged thefts, VIN manipulation tied to cross-border trafficking, and the frequent misuse of commercial and rideshare coverage.	Brandon Eldridge, Special Agent - National Insurance Crime Bureau; Jeffrey Gulsby, SIU Manager - National General Insurance Company
530	1323645	Expert Investigations of Residential Water Damage Claims and Legal Analysis of Findings: Cause, Duration, and Defensibility	Property Fraud	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys, Reconstructionist/Engineers		To provide claims handlers with the knowledge necessary to understand the lifecycle of water loss claim investigations, with a focus on factors that impact the defensibility of the investigation and support the effective defense of claim decisions in litigation.	This course provides the foundational principles and reasoning necessary for conducting a defensible expert water loss investigation. Case studies of real-world claims build upon these principles and expand to a broad range of loss scenarios. Topics include altered conditions, inaccurate or misrepresented leak events, and incorrect assumptions that can be fatal in litigation. The case studies demonstrate how sound investigative techniques can overcome these challenges and how investigation methodology can either support or undermine the legal defensibility of a claims decision. Each case study offers practical, real-world recommendations illustrating how investigative actions affect the claim's defensibility in litigation.	This course will help adjusters understand the lifecycle of water loss claim investigations. Adjusters will learn how to evaluate and reconsider damage appearance, as well as what to look for in an expert's assessment to ensure the defensibility of the investigation and support the effective defense of claim decisions in litigation.	Michael Bass, Senior Building Scientist - American Building Science, LLC; Jessica Prats, Attorney - Cogburn Law Firm, P.A.
540	1337729	Battery & Electric Vehicle (EV) Fires - Where's the Juice?	Arson, Vehicles, Structure Fires	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys		This course will help identify the core elements that are crucial to the successful resolution of electric vehicle fire claims. Challenge fire experts' methodology by highlighting the differences between electric vehicles and conventional vehicle investigation. Describe numerous practical tips to effectively manage the many difficult issues that electric vehicle fire claims frequently present.	This program will utilize visually compelling fire claims to illustrate effective electric vehicle forensic fire investigation techniques. Studies will assist in distinguishing between intentionally set fires & legitimate accidental fires. Photographic evidence, video & 3D modeling demonstrations of compartment and component fire will buttress the presentation. The professional's responsibilities include the demanding challenge of evaluating technical abilities of experts. They aren't expected to be experts, but are expected to use good judgment and work with evaluating experts. This is designed to provide thoughtful understanding among professionals, provide tools, to cost-effectively utilize experts in the context of investigating a fire case.	This program will utilize visually compelling fire claims to illustrate effective electric vehicle forensic fire investigation techniques. Studies will assist in distinguishing between intentionally set fires & legitimate accidental fires. Photographic evidence, video & 3D modeling demonstrations of compartment and component fire will buttress the presentation. The professional's responsibilities include the demanding challenge of evaluating technical abilities of experts. They aren't expected to be experts, but are expected to use good judgment and work with evaluating experts. This is designed to provide thoughtful understanding among professionals, provide tools, to cost-effectively utilize experts in the context of investigating a fire case.	Ulises Castellon, Chief Executive Officer - Fire Cause Analysis
550	1330247	Claiming the Roof: Fraud Edition	Hurricane/Catastrophe Fraud	Intermediate	All Attendees		Identify common roofing fraud schemes impacting Florida insurance claims. Recognize inspection red flags suggesting manufactured or exaggerated roof damage. Distinguish storm-related roof damage from non-covered cases using engineering and meteorological experts and weather data to rule out dates of loss. Apply best practices for documentation, escalation, and referral of suspected fraud.	This course provides insurance professionals with practical tools to identify, investigate, and document potential fraud in roofing insurance claims. Using a combined legal, engineering, and meteorological perspective, participants will examine how fraudulent roofing claims arise, how they are detected during inspections, and how engineering and meteorological findings support coverage determinations, claim denials, and litigation defense under Florida law. Emphasis is placed on real-world claim handling practices, statutory compliance, and defensible documentation.	Help adjusters identify and document potential fraud in Florida insurance claims.	Aaron Duba, Forensic Engineer - Haag Global; Fred Campagna, Director of Forensic Meteorology - Haag Global; Nikki Hawkins, Partner/Chief Property Division - Hamilton Miller & Birtsel
560	700756	Strengthening Insurance Integrity: Fraud Prevention, AI Governance, and the Evolving Regulatory Landscape	Artificial Intelligence	Intermediate	Any Insurance Employees		This session explores key public policy actions targeting insurance fraud alongside emerging AI and privacy regulations that are redefining insurer obligations. Attendees will gain a high level understanding of current trends and the challenges ahead.	This presentation examines evolving insurance regulation, focusing on fraud prevention and emerging AI oversight. It reviews major federal and state policy trends, enforcement activity, consumer protection reforms, and case studies illustrating modern fraud risks. It also outlines the expanding use of AI in underwriting, claims, and analytics, along with new federal and state requirements for transparency, governance, and bias mitigation. The session highlights growing privacy and data governance obligations and emphasizes that insurers must continually adapt to rapid regulatory, technological, and market changes reshaping compliance and risk management.	This presentation examines evolving insurance regulation, focusing on fraud prevention and emerging AI oversight. It reviews major federal and state policy trends, enforcement activity, consumer protection reforms, and case studies illustrating modern fraud risks. It also outlines the expanding use of AI in underwriting, claims, and analytics, along with new federal and state requirements for transparency, governance, and bias mitigation. The session highlights growing privacy and data governance obligations and emphasizes that insurers must continually adapt to rapid regulatory, technological, and market changes reshaping compliance and risk management.	Fred Karfinsky, Shareholder and Chair, Global Insurance Regulatory & Transactions Practice - Greenberg Traurig, P.A.
570	1325612	A Comprehensive Approach to Fighting WC Fraud	Worker Compensation	Intermediate	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, State/Criminal Attorneys, State/Government Employees		Highlight areas of Claims and Premium Fraud in WC: how to spot them; how to investigate and successfully prosecute crossover cases. Bring together claims fraud fighters and premium fraud fighters to work in conjunction and make the most of investigations without duplication, wasted efforts and missed opportunities.	Provide tools to identify areas where Claims Fraud and Premium Fraud intersect, overlap and intertwine. Give tips to utilize investigative tools most effectively, share information and streamline investigations for best overall outcomes. Claims and Premium experts come together to demonstrate how to best work these intermingled areas of WC Fraud.	Florida insurance adjusters are constantly provided with information during Claims handling that pertain specifically and often point to premium fraud that is occurring, and vice versa. Missed opportunities to cross over the aisle and share information, maximize investigations and perfect criminal cases are rampant. Adjusters will learn what specifically to look for in their claims, how to share that information and maximize investigative efforts.	Eric Jones, AVP Premium Audit/SIU - Summit; Melissa Snider, SIU Supervisor - Summit; Gene Donnelly, Assistant Vice President, SIU - Zenith Insurance Company
SESSION 6 JULY 21st, 2026 3:40 - 5:30										
600	1350712	Investigating Vehicle Theft, Fraud, and Fires: Leveraging Data to Expose Deception	Investigation Techniques	Introductory	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys		This course will equip insurance professionals with a practical framework for identifying and evaluating suspicious vehicle theft, collision, and fire claims using objective vehicle data and forensic indicators. Attendees will learn how modern vehicle systems, including event data recorders, infotainment platforms, and telematics, can be used to corroborate or challenge reported loss narratives and support defensible claim decisions.	Advances in vehicle technology have introduced new opportunities for both legitimate claims validation and insurance fraud. This presentation examines how forensic engineers and SIU professionals analyze vehicle thefts, staged collisions, and suspect fire losses using event data recorders, infotainment systems, telematics, and physical evidence. Through real-world case examples, attendees will learn how objective vehicle data can reveal inconsistencies in reported events, identify fraud indicators, and support timely, evidence-based claim handling decisions.	This presentation is directly relevant to Florida insurance adjusters handling auto physical damage, theft, collision, and fire claim. It provides practical guidance on identifying red flags, preserving vehicle evidence, and understanding how digital vehicle data can confirm or contradict insured statements. The course supports adjusters in making informed coverage determinations, coordinating effectively with SIU and forensic experts, and documenting claim decisions in a manner consistent with Florida regulatory and claims-handling standards.	Dylan Rochon, Director of Mechanical, Vehicle & Explosion Investigations - SDI Global
610	1321061	Private Investigations and the Claims Professional	Investigation Techniques	Introductory	All Attendees, Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, Civil Litigation Attorneys		Learn about investigative tools and services to assist you with your claims. Learn about public resources, tips and tricks you can use from your desk to locate individuals. Show and tell of surveillance gadgets, drone and image deliverables. Case review	This presentation will be interesting and engaging. It will provide insight into modern available techniques to investigate claims and to locate parties. Drone usage for property claims will be demonstrated.	It will provide insight into modern available techniques to investigate claims and to locate parties. Drone usage for property claims will be demonstrated.	Danu Blakley, Vice President - On Track Investigations, Inc.; T. Johnston Blakley, President - On Track Investigations, Inc.; Natasha Sanchez, Detective - Department of Financial Services
620	1351697	Electronic Data Recording as Evidence	Leveraging Technology	Intermediate	All Attendees		Carriers face consistent challenges when managing crash data: EDR pulls are expensive and frequently ordered too late to materially impact outcomes. Vehicles are repaired, moved, sold, or destroyed before decisions made. Missing or inconsistent records increase litigation spoliation risk. Institutional expertise is declining as senior adjusters retire. Adjusters lack a fast, objective, and defensible way to decide what to do next. The result: high loss adjustment expense, long cycle times, inconsistent outcomes, avoidable legal exposure.	The Solution: Early, Defensible Decisioning. Quickly determining whether EDR should and can be pursued. Reducing unnecessary EDR orders and late-stage rework. Preserving critical evidence before its compromise. Standing up defensible claim decisions as expense declines. Lowering claim costs while improving defensibility. The objective is not more EDR. The objective is to own the early.	Course provides attendees with guidance of when Data Recorder evidence can and should be collected and how to utilize evidence to make fact based objective claim decisions.	Dallas Barnes, Consultant - Alpine Intel; Joe Crogrove, Senior Auto Account Executive - Alpine Intel
630	1348144	Life Care Plans - How Low Impact Becomes Policy Limits	Legal Matters - Medical	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys, State/Government Employees		Equip participants to critically evaluate and effectively challenge life care plans in litigation by understanding their historical development, common limitations, and potential for inflating claim value. Through analysis of Florida's tort reform framework and the Daubert standard, attendees will learn strategies to defend against disproportionate future medical recommendations.	This course will analyze the history and expanding use of life care plans in litigation and their ability to transform low impact injury claims to disproportionate high value claims. By focusing on the limitations of life care planners, Florida's tort reform, and the application of the Daubert standard, attendees will learn practical tools to assess future medical care recommendations and case value more effectively. A mock deposition will demonstrate real world techniques presented to demonstrate common weakness found in life care plan recommendations.	This course will assist adjusters to better evaluate and challenge life care plans that can inflate the value of injury claims. By understanding common weaknesses in life care planning, the on-going legal battle over Florida's tort reform on medical damages, and the application of the Daubert standard, adjusters gain practical tools to assess future medical recommendations and case value more effectively. A mock deposition will demonstrate real world techniques for identifying exaggerations and strengthening claim evaluation strategies.	Sean Greenwalt, Shareholder - Marshall Dennehy PC; Alec Lloret, Associate Attorney - Marshall Dennehy PC; Carla Candelario, Associate Attorney - Marshall Dennehy PC

640	1333641	702 and You: An Introduction to the Daubert Standard Under Florida Law	Legal Matters-Property	Introductory	All Attendees	Ensure adjusters and lawyers know how expert opinions are determined to be admissible under Florida Law. Provide a refresher for experienced attorneys and adjusters, and a basis for understanding for newer attorneys and adjusters. Give all parties the chance to see how the evidence is preserved and authenticated from deposition to hearing. Also demonstrate how this is applicable to the Public and Field Adjusters.	Introduce the audience, including adjusters and lawyers, to "702", the standard of evidence to determine a credible expert opinion under Florida Law. We will walk them through how we got this standard, the three prongs that apply, and then show it works in practice by way of a truncated mock deposition into a hearing regarding a Daubert motion. We then break down the preservation, preparation, and how important methodology is. We wrap up by discussing how the standard applies to witnesses who may attempt to make causation arguments, like Public Adjusters, Field adjusters, etc.	The class is relevant as it allows them to understand how opinions in cases are weighed, who can share their opinions in a case, helping them understand who can make a causation argument and who cannot make a causation argument.	Jason Hopkins, Associate Attorney - Banker Lopez Gassler P.A.; Brendan McKay, Shareholder - Banker Lopez Gassler P.A.; Elanna Lochan, Associate Attorney - Banker Lopez Gassler P.A.; Daniel Posada, Associate Attorney - Banker Lopez Gassler P.A.	
650	1328578	Charging Ahead: Adjusting Claims in the Micromobility Era	Leveraging Technology	Introductory	All Attendees	This course will equip attendees with a practical understanding of how emerging electric transportation devices impact claim handling. Participants will examine statutory evolution, key case law, and liability considerations involving micromobility devices, and will learn best practices for investigation, evaluation, and adjustment of claims. Through legal analysis and real-world examples, attendees will gain tools to navigate PIP and liability exposures arising from electric scooters, e-bikes, and similar devices in today's evolving mobility landscape.	We will discuss the evolution of the statutory construct surrounding electric transportation devices, including electric scooters, electric bicycles and other electric devices. We will also dissect the case law pertaining to these devices, and discuss best practices for how to adjust claims involving these devices.	This presentation addresses how Florida's evolving statutory definitions, case law, and municipal regulations surrounding micromobility devices directly impact PIP and liability claim adjustment. Florida adjusters will gain clarity on coverage triggers, comparative negligence issues, present investigation strategies, and claim evaluation considerations unique to e-scooters, e-bikes, and similar devices—allowing them to more accurately determine exposure, reduce disputes, and ensure compliance with Florida's insurance framework.	Mark Rose, Partner - Roig Lawyers; Abbi Car, Partner - Roig Lawyers	
660	1330299	DeepFakes, AI, and Deception: How Artificial Intelligence Has Become Both a Weapon and a Tool in Modern Insurance Fraud Investigations	Artificial Intelligence	Intermediate	All Attendees	Participants will gain a comprehensive understanding of how artificial intelligence, particularly generative AI and deepfakes, has reshaped insurance fraud. Through real-world case studies, forensic demonstrations, and legal analysis, attendees will learn to identify, authenticate, and challenge AI-altered evidence, apply AI tools defensively in investigations, and ensure compliance with Florida statutes, ethical standards, and evidentiary rules governing digital deception in first party and third party claims.	This course explores how artificial intelligence, including generative AI and deepfakes, has transformed modern insurance fraud investigations. Participants will examine real-world examples of AI-generated deception, learn forensic techniques to detect manipulated documents and images, and review authentication standards under Florida law. The program also highlights how AI can be leveraged defensively to enhance fraud detection, strengthen evidentiary reliability, and promote ethical investigative practices in both first-party and third-party claims.	This course directly supports Florida insurance adjusters by enhancing their ability to detect, investigate, and prevent fraud in claims handling. With the rapid rise of AI-generated forgeries, adjusters must understand how deepfakes, manipulated invoices, and falsified documents can impact claim validity and compliance with Florida Statutes §§676 and §17. Participants will learn how to identify red flags, preserve digital evidence, and apply lawful, ethical investigative practices consistent with Florida's regulatory and documentation standards.	Tana Salehi, Managing Shareholder - Salehi, Boyer, Lavigne, Lombana; Ana Chesbire, Owner, Investigations Manager - SIU Solutions, LLC	
670	1316489	The Double-Edged File: How Underwriting Records Can Help or Hinder a Claims Investigation	Property Fraud	Intermediate	Any Insurance Employees, SIU & Private Investigators, Law Enforcement Officials, Civil Litigation Attorneys, State/Criminal Attorneys, State/Government Employees	To bring awareness to the importance of the underwriting file in a claim investigation. Whether fraud has been suspected or not, the contents of the underwriting file can be critical in providing evidence in a claim fraud investigation and subsequent civil litigation defense or criminal investigation and prosecution.	This panel presentation is designed for Special Investigations Unit (SIU) professionals, claims adjusters, underwriters, and fraud analysts as well as insurance defense counsel. It explores the dual role of underwriting records in property claim fraud investigations—how they can be a powerful tool or a hidden liability.	The underwriting file is invaluable in providing evidence which may exemplify fraud in the application or fraud in the claim by identifying misrepresentations in the application and/or preexisting damages, which would be particularly significant to those adjusters making claim determinations. In some cases, referring the policy back to underwriting for avoidance consideration.	Teresa Vernon, SIU Principal - Citizen Property Insurance Corp.; Melissa Trahan, Special Investigator - Citizens Property Insurance Corp.	
SESSION 7 JULY 23rd, 2026 8:00 - 9:50										
700	1349880	Luxury Under the Lens: Unmasking Fraud in Fine Art, Fashion & Jewelry Claims	Property Fraud	Intermediate	All Attendees	Identify Common Fraud Indicators. Understand the subtle and surprising ways fraud manifests in high-value claims involving fine art, handbags, and jewelry. Explore Appraisal Tools and Technique. Gain insight into the specialized tools and methodologies appraisers use to evaluate authenticity and value in luxury goods and artwork. Apply Knowledge Through Real-World Examples. Analyze actual claim scenarios to recognize patterns, red flags, and best practices for handling complex high-net-worth losses.	Members of J.S. Held's High-Net-Worth Contents Team will lead an in tandem entertaining and informational presentation on the myriad and surprising ways fraud shows up in fine art, handbags, and jewelry claims. Fraud will be a key focus as adjusters learn the nuances of fine art, luxury goods, and jewelry losses. They will gain a deeper understanding of the tools appraisers utilize when evaluating these valuable objects. Various claim examples will be discussed to illustrate these concepts. To accompany the presentation will slides showing photographs, examples, and interesting graphics.	Florida's luxury market and high-net-worth communities make claims involving fine art, designer handbags, and jewelry increasingly common. Combined with the state's exposure to hurricanes and other catastrophes, adjusters often face large-scale property losses where luxury items are included—sometimes fraudulently. Understanding fraud indicators, authentication techniques, and appraisal nuances equips Florida adjusters to identify inflated or counterfeit claims, reduce litigation risk, and ensure accurate settlements in one of the nation's most complex insurance environments.	Erin Holtenback, Senior Fine Art Appraiser - J.S. Held LLC; Angelique Bredford, Gemologist - J.S. Held LLC	
710	1347022	Three is Company: Third Party Claims, Including Bodily Injury & Body Shop Claims	Legal Matters-Property	Intermediate	All Attendees	To highlight the industry shift toward third party claims, specifically bodily injury and body shop claims, the ongoing trends, indicators of fraud, and how insurers and attorneys can better investigate and handle these claims.	This course will address the new and ongoing trends that have arisen in third party claims, including the trends in medical treatment, the rise in staged accidents & losses, other indicators of fraud, and how to investigate and defend against same. This course will also continue the discussion on how Florida's tort reform and amended Rules of Civil Procedure have changed the defense of third party claims	Adjusters will find relevant: the updates on fraudulent trends, strategic and innovative ways to investigate these trends, insurer duties in the third-party context (including the duty to defend), and avoiding bad faith with interpleaders (which is a new action enacted by Florida's tort reform).	Kelsey Hayden, Partner - Goldstein Law Group; Nicole Harigis, Partner - Goldstein Law Group; Bernadette Bussan, SIU Major Case Investigator - Allstate Insurance Company	
720	1351527	Striking the Facts: Forensic Strategies for Lightning and Surge Losses	Hurricane/Catastrophe Fraud	Introductory	SIU & Private Investigators, Civil Litigation Attorneys	This course equips participants with the technical knowledge and investigative strategies needed to evaluate lightning and surge-related damage claims objectively.	This course will explain how lightning and electrical surge claims often present complex challenges for insurance professionals, attorneys, and adjusters. It will provide an understanding of why these claims are frequently complex to evaluate and how inflated or fraudulent submissions can significantly increase loss exposure for insurers. Participants will gain insight into identifying questionable claim elements, reducing unnecessary payouts, and minimizing the potential for disputes.	This 100-minute presentation, Striking the Facts: Forensic Strategies for Lightning and Surge Losses is directly relevant to Florida insurance adjusters as it addresses critical competencies required under Florida insurance regulations. The course equips adjusters with practical skills to identify questionable or inflated elements within lightning and electrical surge claims, recognize red flags in reported damage patterns, and apply forensic methodologies to determine the true cause, extent, and reasonable cost of repair.	Shams Moghadam, Electrical Engineer, P.E. - Rimkus	
730	1351526	Identifying and Addressing Soft Fraud in Water Claims	Property Fraud	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys	This course aims to provide a comprehensive understanding of soft fraud in property claims, identifying the indicators of soft fraud, exploring the legal remedies and strategies available for minimizing or eliminating its impacts. It combines technical insights with legal perspectives to promote effective and compliant practices, as well as to inform carriers and counsel on effective discovery, ELO and deposition techniques.	This course aims to provide a comprehensive understanding of soft fraud in property claims, identifying the indicators of soft fraud, explores the legal remedies and strategies available for minimizing or eliminating its impacts. It combines technical insights with legal perspectives to promote effective and compliant practices, as well as to inform carriers and counsel on effective discovery, ELO and deposition techniques.	This course aims to provide a comprehensive understanding of soft fraud in property claims, identifying the indicators of soft fraud, explores the legal remedies and strategies available for minimizing or eliminating its impacts. It combines technical insights with legal perspectives to promote effective and compliant practices, as well as to inform carriers and counsel on effective discovery, ELO and deposition techniques.	Sidney Needelman, Partner, Chair of the Insurance Defense Department - Zumpano Castro, PLLC; Stephen Machin, Partner - Zumpano Castro, PLLC; Sebastian Franco, Associate - DDA Forensics; Jonathan Diego, Managing Partner - DDA Forensics	
740	1332143	Introduction to Slip and Fall Analysis	Casualty Fraud	Introductory	All Attendees	To introduce attendees to slip and fall cases from a legal and expert engineering perspective. We will highlight not just the law and science, but also address why slip and fall claims are so subject to fraud and how to identify and address same.	Our presentation will introduce attendees to the lay of the land with respect to slip and fall claims and describe the prevalence of same within the area of insurance fraud. We will describe why this occurs, and we will then address the law that governs the area. Our presentation is a joint presentation between Walton Lantaff, a law firm, and ERI Global, an expert firm. It will provide both legal and engineering/expert analysis in a cogent and practical manner.	It trains insurance adjusters on how to spot and handle slip and fall fraud cases, a very common type of fraud.	Ian Ronderos, Senior Partner - Walton Lantaff Schroeder & Carson; Laura Weinfield, Partner - Walton Lantaff Schroeder & Carson; Jason Shelton, District Principal Engineer - ERI Global	
750	373458	Building Your Defensive Line	Investigation Techniques	Intermediate	Any Insurance Employees, SIU & Private Investigators	This course focuses on the success stories of Claims Adjusters, Defense Counsel and Investigative Agencies working together to think outside the box in combating inflated and fraudulent claims.	This class is presented by defense counsel and investigative agencies and focuses on innovative approaches to handling complex fraud cases. It explores how thinking outside the box helped capture critical evidence on claimants, leading to successful defense verdicts at trial and the negotiation of mitigated settlements.	This class will show adjusters and SIU how working with their defense counsel and investigators will lead to successful wins. This class shows the value of interacting with them as opposed to turning the case over with an authority level and then waiting for the results.	David Tanner, President/Special Investigator - YourSIU; Eric Nelsetuen, Partner - Bickford & Chidsey	
760	257301	Case Study- The Davis Fire Loss Dispute	Investigation Techniques	Intermediate	All Attendees	Equip claims professionals with the skills to identify red flags and fraud indicators in fire loss claims, document findings neutrally, and build litigation-ready files. Using the Davis Fire Loss Dispute case study, participants will learn to separate covered vs. non covered damages, evaluate scope inflation, and prepare defensible reports for appraisal, SIU, and trial.	This presentation examines the Davis Fire Loss Dispute through a litigation ready, fraud awareness. Participants follow the case from first notice to expert inspection, identifying red flags, documentation gaps, and fraud indicators that shaped the investigation. Using neutral, evidence based methodology, the case study demonstrates how to separate covered from non covered damages, evaluate scope inflation, and build a defensible file for SIU review, appraisal, or litigation. The session reinforces best practices in expert reporting, carrier communication, and claim strategy.	This fire loss dispute case study is directly relevant to Florida insurance adjusters because it reinforces core competencies required under Florida law, including good faith claim handling, accurate cause of loss evaluation, and proper documentation of red flags and fraud indicators. Florida adjusters routinely manage claims involving public adjusters, attorneys, CDNs, scope disputes, and SIU considerations, all of which are central to this case. The presentation strengthens adjusters' ability to build litigation ready files, evaluate scope inflation, navigate coverage vs. non coverage issues, and comply with Florida's statutory duties during complex property investigations.	Keir Lee, CEO & Founder - Bureau of Claims Science Investigations	
770	1345114	Lithium-Ion Batteries-A Street Level Understanding	Arson, Vehicles, Structure Fires	Intermediate	All Attendees	This course provides adjusters, investigators, and engineers with a clear understanding of rapidly expanding battery technologies. Attendees will learn the advantages and limitations of modern batteries and how they're used in major applications such as electric vehicles and battery energy storage systems. The session explains how battery failures occur, common indicators of malfunction, and the methods used to investigate these events, giving participants a complete and practical overview of this evolving field.	This presentation uses clear, descriptive slides and targeted video examples to raise the audience's understanding of a rapidly evolving and increasingly relevant technology. The material is designed to be accessible to adjusters with limited technical experience while still providing depth for investigators and engineers. By combining practical explanations with real-world context, the session helps attendees recognize how these technologies function, where failures originate, and why they matter in today's insurance landscape. The goal is to deliver a reliable, informative presentation that supports better evaluations, investigations, and decision-making.	Lithium-ion battery claims are rising exponentially as more devices and systems rely on this technology daily. The technology is rapidly evolving, making next-generation batteries even more complex to understand and evaluate when a claim occurs. The direct benefits for attendees include: Enhanced Communication & Confidence: Adjusters will gain the technical literacy to speak confidently and accurately with superiors, attorneys, experts, and policyholders, streamlining the claims process. Effective Expert Management: By understanding the fundamentals of battery failure investigation, professionals can better manage and critically evaluate their chosen forensic experts' findings, ensuring accurate claim decisions. Improved Risk Assessment: The session will cover how proper use, failure points, and specific environmental factors (like Florida's heat and humidity) influence risk, aiding in more precise underwriting and loss prevention strategies. Ultimately, this session provides Florida insurance professionals with the critical knowledge needed to proactively manage this emerging risk landscape, and navigate complex claims efficiently and effectively.	Michael Lilien, Senior Principal Forensic Electrical Engineer - ERI Global	

780	1348415	When the Math Ain't Mathin' - How to Prove Estimate Manipulation	Investigation Techniques	Intermediate	Any Insurance Employees, SIU & Private Investigators, State/Government Employees			Distinguish opinion-based disputes from data-supported proof of estimate manipulation. Identify where manipulation lives inside estimating software and workflows. Use Xactimate Audit and Ownership reports to reconstruct estimate authorship and timing. Correlate estimate activity with inspections, invoices, and documentation. Detect disguised delegation and compromised appraiser independence. Apply a repeatable, defensible methodology to real-world claims and litigation.	Estimate manipulation in property claims rarely presents as overt fraud. Instead, it hides inside timelines, authorship gaps, and software workflows that don't reconcile with the story being told. This course teaches claims professionals, SIU investigators, and defense counsel how to move beyond "gut feel" and prove manipulation using native Xactimate data, audit reports, ownership histories, and third-party workflow systems. Through real litigated case studies, attendees will learn how to identify credibility failures, expose hidden delegation, and build evidence courts can rely on.	This course is highly relevant to Florida public adjusters because property claim estimates in Florida are increasingly scrutinized in appraisal, litigation, and regulatory settings based not just on the final number, but on how the estimate was created. Using real, litigated examples, the course explains how native Xactimate data, audit reports, and third-party workflow systems are used to examine authorship, timing, delegation, and documentation - issues that frequently drive challenges to Florida claims and appraisal awards. The course equips ethical public adjusters with practical insight into how estimates are evaluated after the fact, helping them build defensible estimates, manage consultant involvement, and reduce credibility, licensing, and litigation risk in Florida's highly adversarial claims environment.	Matthew Monson, Managing General Partner - The Monson Law Firm	
790 A	1313329	4 Hour Adjuster Law & Ethics Update with Emphasis on Fraud Topics	Other - Law & Ethics	Intermediate	Any Insurance Employees, SIU & Private Investigators			To refresh, update and increase adjusters' technical knowledge of insurance and legal principles through education pertaining to laws, regulations, court rulings and best practices pertaining to insurance coverage and potential issues, with an emphasis on fraud topics.	Course designed to fulfill 5-620 adjuster requirements for Adjuster Law & Ethics Update (4 Hour CE Course) while also providing education on insurance fraud-related topics.	This course will satisfy the 4-hour Law & Ethics Update requirements.	Tammy Denbo, Managing Partner - Denbo Law Group, PLLC; Wendy Denbo Rogers, Managing Partner - Denbo Law Group, PLLC	
SESSION 8 JULY 23rd, 2026 10:10 - NOON												
790 B	1313329	4 Hour Adjuster Law & Ethics Update with Emphasis on Fraud Topics	Other - Law & Ethics	Intermediate	Any Insurance Employees, SIU & Private Investigators			To refresh, update and increase adjusters' technical knowledge of insurance and legal principles through education pertaining to laws, regulations, court rulings and best practices pertaining to insurance coverage and potential issues, with an emphasis on fraud topics.	Course designed to fulfill 5-620 adjuster requirements for Adjuster Law & Ethics Update (4 Hour CE Course) while also providing education on insurance fraud-related topics.	This course will satisfy the 4-hour Law & Ethics Update requirements.	Tammy Denbo, Managing Partner - Denbo Law Group, PLLC; Wendy Denbo Rogers, Managing Partner - Denbo Law Group, PLLC	
800	1332784	Soft Fraud, Hard Evidence: Building a Litigation Ready Paper Trail	Property Fraud	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys, Reconstructors/Engineers			This course will provide participants with methods to identify and counter soft fraud in Florida property insurance claims. Attendees will learn to build litigation-ready claim files, evaluate mitigation and billing abuses, distinguish covered loss from failure to comply with post-loss duties and neglect, and develop hard evidence for handling claims suits through litigation, while reducing indemnity exposure. Use Xactimate Audit and Ownership reports to reconstruct estimate authorship and timing. Correlate estimate activity with inspections, invoices, and documentation. Detect disguised delegation and compromised appraiser independence. Apply a repeatable, defensible methodology to real-world claims and litigation.	This presentation will cover the evolving landscape of soft fraud in Florida property insurance claims and the tools and strategies used to defend it. Attendees will learn how claim inflation, mitigation abuse, and billing manipulation develop over time, why these issues often survive initial claim handling, and how they unravel under litigation scrutiny. The course emphasizes building litigation-ready claim files through disciplined inspections, contemporaneous documentation, and evidentiary rigor, equipping professionals to defend coverage decisions, support fraud referrals, and reduce indemnity exposure.	It will provide adjusters, attorneys, and insurance professionals with tools for identifying soft fraud in property claims and gathering and using evidence to combat fraud and reduce claim exposure.	Hazel Turner, Partner - Alastra, Turner & Haggerty, PLLC; Robert Lastris, Senior Litigation Specialist - American Integrity Insurance; Lynn Edwards, President/Founder - Edwards Claims Consultants, Inc	
810	1348888	From Charges to Truth: Leveraging Medical Billing Experts to Detect Fraud and Reduce Exposure	Legal Matters - Medical	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys			By the end of this presentation, attendees will be able to strategically integrate medical billing expertise into their investigations and litigation processes, strengthen the defensibility of their claims decisions, and reduce settlement exposure by uncovering accurate and supportable medical data.	This course will describe common medical billing abuse and fraud schemes, red flags within treatment and charge patterns, and the methodologies experts use to determine the true reasonable value of medical services. Through real case examples, presenters will address when and why to retain a medical billing expert and how expert analysis can significantly impact claim valuation.	This 100-minute presentation, From Charges to Truth: Leveraging Medical Billing Experts to Detect Fraud and Reduce Exposure, is directly relevant to Florida insurance adjusters as it addresses critical competencies required under Florida insurance regulations. The course equips adjusters with practical skills to identify medical billing abuse and fraud schemes, recognize red flags in treatment and charge patterns, and apply expert methodologies to determine the true reasonable value of medical services. These capabilities are essential for compliance with Florida's anti-fraud statutes, improving claim valuation accuracy, and reducing settlement exposure. By integrating medical billing expertise into investigations and litigation strategies, adjusters will strengthen the defensibility of claims decisions and uphold ethical standards, aligning with continuing education objectives in fraud prevention and claims best practices. Key benefits for Florida Adjusters: Enhance Fraud Detection: Gain tools to identify billing irregularities and prevent fraudulent payouts. Improve Claim Accuracy: Learn expert-driven methods to calculate reasonable medical costs. Reduce Settlement Exposure: Apply strategies that minimize inflated damages and protect insurer resources. Strengthen Compliance: Align practices with Florida statutes and regulatory requirements. Boost Litigation Support: Understand when and how to leverage experts for defensible claims decisions.	Mary Jorgensen, Legal Nurse Consultant - Rimkus; Jessica Schmor, Nurse Consultant - Rimkus	
820	1341122	The Truth on the Roof - Fighting Fraud with Insight & Innovation	Property Fraud	Intermediate	All Attendees			Identify Red Flags of Roofing Fraud Participants will learn to recognize indicators of manufactured hail and wind damage, misrepresented dates of loss, and fraudulent documentation—using forensic criteria such as damage distribution, collateral evidence, and material response. Leverage Modern Technology to Detect and Prevent Roofing Fraud Participants will explore how drones, photogrammetry, infrared thermography, and aerial imagery are used by engineers and consultants to document conditions, differentiate causation, and strengthen anti-fraud workflows.	Roofing claims are a prime target for fraud—whether it's manufactured hail or wind damage, misrepresented dates of loss, or inflated invoices. This 100-minute session arms insurance, legal, and SIU professionals with the tools to fight back. Learn how forensic engineers separate real storm damage from imitations, uncover misattributed causation, and verify dates of loss using data, historical imagery, and advanced technologies like drones, photogrammetry, and infrared thermography. We'll explore red flags, standards, and practical investigative techniques to detect fraud before it drains your bottom line. This session will help you spot the schemes—and stop them cold.	Florida's storm-prone climate makes roofing fraud a major challenge—think manufactured hail, misrepresented dates of loss, and inflated invoices. This session equips adjusters with practical tools to combat these schemes. Spot Red Flags: Learn forensic indicators to distinguish real storm damage from fraud. Use Modern Tech: See how drones, infrared thermography, and aerial imagery strengthen investigations. Protect Bottom Line: Apply checklists and proven techniques to reduce fraud and litigation risk. Essential for anyone handling Florida's high-volume roofing claims.	Dan Parker, Roofing Consultant - J.S. Held LLC; Michelle Feduccia, Regional Lead-Forensics Architecture & Engineering - J.S. Held LLC	
830	1348671	From Claim to Closure: Florida BI Settlement Strategy	Medical - Other	Intermediate	All Attendees			This course provides a practical overview of evaluating and resolving bodily injury claims in Florida, with a focus on settlement strategies both pre and post suit. Participants will learn how to identify fraud and recognize red flags, effectively utilize global settlement conferences and alternate dispute resolution, and navigate Florida-specific legal and ethical obligations, including time limit demands and duties to insureds and carriers.	BI claims in Florida present unique challenges due to evolving tort law, increased medical costs, and the prevalence of fraudulent claims. Insurance carriers, investigators, and defense counsel must navigate competing interests, ethical obligations, and bad faith exposure while making timely and strategic settlement decisions. This course is relevant to professionals involved in claims handling, litigation, fraud investigation, and risk management, as it offers real-world insights into identifying fraud indicators, evaluating settlement opportunities, and protecting insureds and carriers. By focusing on Florida-specific practices, the program equips attendees with tools they can immediately apply to improve claim outcomes and reduce exposure.	This presentation is directly relevant to Florida insurance adjusters responsible for evaluating, managing, and resolving bodily injury claims. The course provides practical guidance on early claim evaluation, identifying fraud indicators, and making informed settlement decisions in compliance with Florida law. Adjusters will gain insight into Florida-specific issues such as time limit demands, bad faith exposure, ethical obligations to insureds and carriers, and the strategic use of global settlement conferences, mediation, and other alternative dispute resolution tools. By focusing on real-world scenarios and Florida-specific practices, the program equips adjusters with actionable strategies to improve claim outcomes, reduce unnecessary exposure, and fulfill their professional and regulatory responsibilities.	Lauren Galiszewski, Practice Partner - Kelley Kronenberg; Barron Becker, Practice Partner - Kelley Kronenberg; Christian Anderson, Practice Partner - Kelley Kronenberg; Nicolas Young, Partner - Kelley Kronenberg	
840	2573086	Event Data Recorders, What you need to know.	Accident Reconstruction	Introductory	SIU & Private Investigators, Civil Litigation Attorneys, State/Criminal Attorneys			After attending this course, attendees should have a basic understanding of what an Event Data Recorder (EDR) is, what kind of data it records, when it records, what information they should be getting when investing in a vehicle download and some common things to look for in the EDR report to help determine if the data represents the crash being investigated.	Since 2018, 99% of the passenger vehicles sold in the United States have at least one Event Data Recorder (EDR) installed by the manufacturer. Insurance Companies, Attorneys and others have been paying hundreds, and even thousands of dollars to download EDR data from crashed vehicles only to get a report they have no idea how to read or are improperly accepting the data as accurate without any analysis. This course will teach you what to expect and what to look for in order to make informed decisions about your EDR report.	Attendees will have a better understanding of EDR data, when they can expect to find data, what kind of data they should be getting, how to recognize issues or problems which may make the data unusable and we'll talk a bit about where the data comes from within the vehicle. Insurance adjusters will be able to use this information to make informed decisions about their cases regarding EDR or other crash data. Attendees will also learn about other sources of crash data that may indicate insurance fraud.	Brian West, President/Lead Reconstructionist - West Crash Forensic Consulting Group, LLC; Angel Medina, Lead EDR Technician - West Crash Forensics	
850	1306968	First Party Bad Faith	Legal Matters - Other	Intermediate	Any Insurance Employees, SIU & Private Investigators, Civil Litigation Attorneys			Educate the insurance professional about changes in the statutes applicable to first party bad faith claims.	Overview of changes in first party bad faith claim statutes with strategic application of how those changes impact claim handling and strategies from Claimant's counsel.	Educate the insurance professional about changes in the statutes applicable to first party bad faith claims.	Jennifer Worden-Brooks, Partner - Segundo Law Group; Emily Silver, Partner - Segundo Law Group; Daniel Martinez, Partner - Segundo Law Group	
860	782922	Defending The Corporate Representative Deposition	Legal Matters - Other	Intermediate	All Attendees			This course equips insurance and government professionals with practical strategies to manage and defend corporate representative depositions. Attendees will learn how the right witness selection, preparation, and deposition defense can reduce exposure, control testimony, and protect the organization. The program focuses on real-world techniques to minimize risk, streamline discovery, and ensure corporate testimony is accurate, consistent, and defensible.	Corporate representative depositions can significantly impact claim outcomes and litigation exposure. This presentation provides a step-by-step roadmap for navigating the process, from selecting the appropriate representative and responding to the notice of deposition to preparing the witness and defending the testimony. Designed for insurance and government professionals, the course highlights common pitfalls, best practices, and strategies to limit risk, preserve privilege, and maintain control during deposition testimony.	This presentation is highly relevant to Florida insurance adjusters, as corporate representative depositions can directly impact claims outcomes and exposure. Attendees will learn practical strategies for preparing witnesses, understanding the scope of depositions, and protecting organizational interests. The course provides actionable guidance to manage risk, preserve evidence, and ensure defensible claims handling, helping adjusters navigate deposition scenarios with confidence and maintain compliance with Florida insurance regulations.	Julio Acosta, Managing Partner - Acosta & Associates, P.A.	

870	1351694	Flames of Deceit	Arson, Vehicles, Structure Fires	Intermediate	All Attendees			Upon completion of this program, participants will be able to identify common fire fraud indicators in residential and vehicle claims; evaluate fire origin-and-cause evidence within legal and ethical constraints; distinguish civil and criminal standards of proof; apply good-faith investigative and documentation practices; and determine when referrals to law enforcement are appropriate. Participants will gain a process-driven framework for conducting fire fraud investigations that withstand litigation, regulatory review, and ethical scrutiny.	This program provides a practical and legally defensible examination of fire fraud investigations involving residential and vehicle insurance claims. Designed for claims professionals, SIU investigators, attorneys, and law enforcement, the presentation addresses fire science fundamentals, common fraud schemes, investigative red flags, and lawful evidence-gathering practices. Emphasis is placed on good-faith claim handling, documentation standards, expert reliability, and the coordination of civil and criminal investigations. Through real-world examples and case analysis, participants will learn how fire fraud cases succeed or fail based on investigative process, ethical compliance, and evidentiary support rather than suspicion alone.	This presentation is directly relevant to insurance adjusters because fire loss claims present heightened financial, legal, and regulatory risk. Adjusters are often the first to identify potential fraud indicators, preserve evidence, and set the tone for a defensible investigation. The program provides practical guidance on recognizing fire fraud red flags, coordinating with SIU and experts, documenting claims activity, and maintaining good-faith handling throughout the investigation. Emphasis is placed on avoiding premature conclusions, reducing bad faith exposure, and ensuring that claim decisions are supported by evidence, policy language, and proper investigative process.	Jennifer Fernandes, Vice President of Operations - Article 30; Jon Sma, CEO - Article 30; John Diggs, COO - Article 30
880	1341786	Emerging Fraud: Evolving Trends and Investigative Tradecraft Past to Present	Investigation Techniques	Intermediate	All Attendees			To provide claims professionals, SIU personnel, investigators, and law enforcement with a practical understanding of emerging fraud trends and the evolution of investigative tradecraft. Participants will learn to identify fraud indicators, apply modern research and investigative tools, conduct legally and ethically sound investigations, and utilize gathered information to reduce exposure and support defensible claim and case outcomes.	This course provides a timely and practical examination of how fraud schemes have evolved and how investigative tradecraft must adapt to address emerging threats. Participants will gain insight into modern fraud trends—including AI-driven deception, organized fraud rings, and staged loss activity—while reinforcing foundational investigative principles that remain effective today. By integrating traditional investigative methods with current digital tools, research techniques, and legally sound evidence-gathering practices, this course equips claims professionals, investigators, and law enforcement with actionable strategies to identify red flags, reduce exposure, and support defensible claim outcomes in an increasingly complex fraud landscape.	This course is directly relevant to Florida insurance adjusters as it addresses emerging fraud schemes commonly encountered in the state, including staged accidents, property/casualty fraud rings, workers' compensation abuse, and AI-driven document manipulation. It provides practical strategies for identifying red flags, conducting legally and ethically compliant investigations, and documenting evidence to support defensible claim decisions. By combining traditional investigative tradecraft with modern fraud detection tools, the course helps adjusters reduce exposure, prevent improper payments, and meet Florida's statutory obligations for reporting suspected fraud.	Jason Hall, Owner/Operator - Iconic Investigations LLC