**MEETING NOTICE FOR THE WEEK OF FEBRUARY 18, 2018**

<table>
<thead>
<tr>
<th>DATE AND TIME, AGENCY, LOCATION, CONTACT PERSON</th>
<th>SUBJECT</th>
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<tr>
<td><strong>DATE AND TIME:</strong> Thursday, February 22, 2018 10:00 a.m. to 12:00 p.m.</td>
<td>Injured Patients and Families Compensation Fund/Wisconsin Health Care Liability Insurance Plan Claims Committee Meeting</td>
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| **AGENCY:** Office of the Commissioner of Insurance | I. Minutes and Membership  
   A. Review and Approval of the November 18, 2017, Open Session Minutes  
   B. Review of Claims Committee Roster |
| **LOCATION:** American Family Insurance Company  
Building A, Room A2141  
6000 American Parkway  
Madison, WI 53783 | II. Closed Session Under s. 19.85 (1) (g), Wis. Stat., Discussion of Litigation Strategy Update  
   A. Review and Approval of the November 18, 2017, Closed Session Minutes  
   B. Current and Potential Litigation |
| **CONTACT PERSON:** DuWayne Kottwitz  
608-266-0953 | III. Return to Open Session  
   A. Report of Actions Taken in Closed Session |
| **TELECONFERENCE:** 1-888-291-0078  
Pass Code: 9148 121# | IV. Report of the Fund Administrator  
   A. Discussion and Approval of the Fund Administrator’s Report |
| | V. Report of WHCLIP Claims  
   A. Discussion and Approval of WHCLIP Claims Report |
| | VI. Report of Claim Contractor  
   A. Discussion and Approval of Claim Contractor’s Report |
| | VII. Report Old Business  
   A. Closed Claim List  
   B. Report of Outside Counsel Hires |
| | VIII. New Business  
   IX. Any Other Business as Allowed By Law  
   X. Schedule and Approve Next Meeting Date May 24, 2018  
   XI. Adjourn |