

INSURANCE CLAIMS REPRESENTATIVE SUPERVISOR**Nature of Work**

Under limited supervision, performs the most complex and specialized work reviewing, processing, investigating, adjusting, and authorizing settlements of insurance claims such as automobile and general liability, medical malpractice, mine subsidence, cyber and property claims. These positions verify coverage, possible negligence and proper filing of claims in accordance with appropriate laws, rules, and regulations. Provides direct supervision to Insurance Claims Representatives in the settlement of insurance claims. The scope of responsibility includes planning the operations and procedures of the unit; directing the work of employees; developing employees; evaluating unit operations; researching new procedures and improvements; and interpreting statutes, regulations, and policies. Performs related tasks as required.

Distinguishing Characteristics

These positions report to a Liability Insurance Claims Manager and oversee the day-to-day functions of the assigned unit. These positions supervise a team of professionals who review, process, investigate, adjust, and authorize settlements of insurance claims. These positions also perform the most complex and specialized work in relation to insurance claims processing.

Examples of Work

Assigns, trains and reviews the work of others.

Analyzes complex insurance policy information to determine coverage; responds to inquiries concerning claim or coverage information; assists insured and/or claimants in the submission of claim information.

Contacts and/or interviews claimants, doctors, medical specialists, or employers to get additional information and secures testimony if necessary; works with and directs independent adjusters in the handling of property, mine subsidence and other types of claims, and performs related functions.

Investigates complex claims as necessary, through use of physical evidence and examining reports. Evaluates and settles claims by applying specialized knowledge and interpersonal skills to effect fair and prompt disposal of cases and to contribute to a reduced loss ratio.

Conducts complex examinations of claims investigated by insurance adjusters, further investigating questionable claims for determining whether to authorize payments.

Recommends whether to defend or settle a claim or to perfect an appeal of an adverse verdict.

Verifies and analyzes data used in settling claims to ensure that claims are valid and that settlements are made according to industry practices and procedures.

Monitors complex cases in litigation, seeking additional information and conferring with counsel as necessary for further evaluation; reviews codes and tracks and transmits incoming lawsuits.

Conducts claim and insurance related training as required.

Works with consultants, attorneys, medical personnel and claims adjusters contracted by the counsel to review general liability and other claims and to gain information for claims management.

Knowledge, Skills and Abilities

Knowledge of laws, rules and regulations related to insurance practices including but not limited to negligence, civil rights, employment, disability, discrimination and medical malpractice.

Knowledge of various types of insurance coverages.

Knowledge of and proficient skill in use of various computer applications.

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INSURANCE CLAIMS REPRESENTATIVE SUPERVISOR (cont'd)

Knowledge, Skills and Abilities (cont'd)

Skill in researching and analyzing data.

Skill in public speaking.

Skill in the use of a computer and computer applications.

Ability to assign, review, check and train others in the performance of job related duties.

Ability to review information and provide solutions utilizing analytical and theoretical methods.

Ability to establish and maintain effective working relationships.

Ability to communicate effectively, both orally and in writing.

Minimum Qualifications

Training: Bachelor's degree from a regionally accredited college or university.

Substitution: Associate in Claims (AIC) by the Insurance Institute of America (IIA) plus two (2) years of full-time or equivalent part-time paid experience in insurance or related field may substitute for the required training, or four (4) years of full-time or equivalent part-time paid experience in insurance or related field may substitute for the required training.

Experience: Six (6) years of full-time or equivalent part-time paid experience in insurance or related field, one (1) year of which must have been in a lead worker capacity.

Special Requirements: A valid West Virginia Adjuster's license is required. A valid driver's license may be required.

Established: 11/24/2018

Effective: 11/24/2018