

Iowa Department of Administrative Services – Human Resources Enterprise
Job Classification Description

Insurance Complaint Analyst

Definition

Evaluates and responds to citizens' complaints and inquiries regarding insurance, unfair insurance trade practices including policy coverage interpretation, claim settlement and underwriting practices of insurers, and to properly advise the concerned parties; performs related work as required.

The work examples and competencies listed below are for illustrative purposes only and not intended to be the primary basis for position classification decisions.

Work Examples

Obtains information on claims rejected for payment by property, casualty, or life, accident, and health insurers by interviewing policyholders and claimants to determine the validity of the complaints.

Analyzes insurance policies of complainants by evaluating and interpreting the contract to determine the extent of coverage, the exclusions specified, and the conditions affecting the payment of claims; analyzes the facts of the case by reviewing and evaluating the incidents pertinent to the claims to determine whether the policy coverage extends to such incidents.

Requests the claims and underwriting files of insurers and reviews them to determine if they have made a "good faith" investigation of the claims and to determine if they have met the obligations set forth in the policy before rejecting the claim.

Analyzes the evidence by reviewing and evaluating the reasons for the claims' rejection to determine the basis for rejection; suggests or orders that the claim be paid within reasonable time by citing sections of the Iowa Code or policy provisions that pertain to the insurer's obligation if it is decided that the insurer is liable.

Evaluates complaints directed against insurers concerning unfair insurance trade practices as defined by Iowa law by reviewing laws enacted against such practices to determine if there is a basis for action on such complaints.

Drafts proposed orders, witness statements, and affidavits for use in administrative proceedings.

Competencies Required

Knowledge:

- Customer and Personal Service – Principles and processes for providing customer and personal services. This includes customer needs assessment, meeting quality standards for services, and evaluation of customer satisfaction.
- Law and Government – Laws, legal codes, court procedures, precedents, government regulations, executive orders, agency rules, and the democratic political process.
- English Language – The structure and content of the English language, including the meaning and spelling of words, rules of composition, and grammar.

- Clerical Procedures – Word processing, managing files and records, designing forms, and other office procedures and terminology.

Abilities:

- Law and Government – Understand and adhere to applicable laws, legal codes, administrative rules, and regulations.
- Clerical – Maintain complex clerical records.
- Written Expression – Communicate information and ideas in writing so others will understand.
- Written Comprehension – Read and understand information and ideas presented in writing.
- Speech Clarity – Speak clearly so others can understand.
- Speech Recognition – Identify and understand the speech of another person.
- Deductive Reasoning – Apply general rules to specific problems to produce answers that make sense.
- Inductive Reasoning – Combine pieces of information to form general rules or conclusions.
- Information Ordering – Arrange things or actions in a certain order or pattern according to a specific rule or set of rules (e.g., patterns of numbers, letters, words, pictures, mathematical operations).
- Problem Sensitivity – Tell when something is wrong or is likely to go wrong. It does not involve solving the problem, only recognizing there is a problem.

Skills:

- Active Listening – Giving full attention to what other people are saying, taking time to understand the points being made, asking questions as appropriate, and not interrupting at inappropriate times.
- Critical Thinking – Using logic and reasoning to identify the strengths and weaknesses of alternative solutions, conclusions or approaches to problems.
- Reading Comprehension – Understanding written sentences and paragraphs in work related documents.
- Speaking – Talking to others to convey information effectively.
- Writing – Communicating effectively in writing as appropriate for the needs of the audience.
- Negotiation – Bringing others together and trying to reconcile differences.
- Active Learning – Understanding the implications of new information for both current and future problem-solving and decision-making.
- Judgment and Decision Making – Considering the relative costs and benefits of potential actions to choose the most appropriate one.
- Service Orientation – Actively looking for ways to help people.
- Complex Problem Solving – Identifying complex problems and reviewing related information to develop and evaluate options and implement solutions.

Minimum Qualification Requirements

Applicants must meet at least one of the following minimum requirements to qualify for positions in this job classification:

- 1) Graduation from an accredited school of law.
- 2) All of the following (a and b):
 - a. Graduation from an accredited college or university with a Bachelor's degree; and
 - b. A total of three years full-time work experience in at least one of the following areas:
 - i. Multi-line insurance adjusting or underwriting; or
 - ii. Investigating and recognizing violations of state laws or regulations and preparing cases proving such violations for presentation at administrative hearings; or
 - iii. Conducting research, analysis, interpreting, implementing or monitoring insurance regulations and insurance products and providing consultation and customer assistance and technical assistance to stakeholders; or
 - iv. Business management and administration including: budget administration and analysis, regulatory and legal compliance, quality assurance, and customer service administration.
- 3) A total of seven years of education and/or full-time experience (as described in number two), where thirty semester hours of accredited college or university coursework in any field equals one year of full-time experience.
- 4) Current continuous experience in the state executive branch that includes 18 months of full-time work in insurance regulation.

Effective date: 04/23 KC