IOWA DEPARTMENT OF ADMINISTRATIVE SERVICES ▼
HUMAN RESOURCES ENTERPRISE

INSURANCE COMPLAINT ANALYST

DEFINITION
Evaluates citizens’ complaints regarding claim settlement and underwriting practices of insurers to properly advise the concerned parties; performs related work as required.

The Work Examples and Competencies listed 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 of contract law.
Knowledge of quasi-judicial procedures as they pertain to the conduct of hearings or the prosecution of cases before hearings.
Knowledge of investigative techniques.
Ability to analyze information and recognize trends.
Ability to acquire a knowledge of the Iowa Code as it pertains to insurance contracts and the laws governing the operation of insurers.
Ability to acquire a knowledge of unfair trade practices in the insurance field.
Ability to acquire a knowledge of the various types of insurance field.
Ability to acquire a knowledge of the various types of insurance and insurers.
Ability to analyze and interpret insurance policy language in detail to determine the extent of coverage, the specified exclusions, and the conditions affecting the payment of claims.
Ability to interpret and apply sections of the Iowa Code that pertain to the business operation of insurers,
insurance contract requirements, and the obligation of insurers to pay claims, to various types of insurance policies.

Ability to deal skillfully and tactfully with insurers with the public in gathering information necessary to determine the liability for the payment of claims.

Displays high standards of ethical conduct. Refrains from dishonest behavior.

Works and communicates with all clients and customers providing polite, quality professional service.

Displays a high level of initiative, effort, attention to detail and commitment by completing assignments efficiently with minimal supervision.

Follows policy, cooperates with supervisors and aligns behavior with the goals of the organization.

Fosters and facilitates cooperation, pride, trust, group identity and team spirit throughout the organization.

Exchanges information with individuals or groups effectively by listening and responding appropriately.

EDUCATION, EXPERIENCE, AND SPECIAL REQUIREMENTS

Graduation from an accredited school of law;

OR

graduation from an accredited college or university with a Bachelor’s degree and three years of full time experience in multi line insurance adjusting or underwriting;

OR

graduation from an accredited college or university with a Bachelor’s degree and three years of full time experience in investigating and recognizing violations of state laws or regulations and preparing cases proving such violations for presentation at administrative hearings;

OR

an equivalent combination of education and experience substituting one year of the required full time experience for each year (30 semester hours) of the required education to a maximum of four years.

Effective Date: 06/10 DDF