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## **Example of Claims Specialist Job Description**

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Our innovative and growing company is looking to fill the role of claims specialist. If you are looking for an exciting place to work, please take a look at the list of qualifications below.

## Responsibilities for claims specialist

- Identifies information and resources needed to adjudicate claim
- Handle cases that require complex coordination of benefits issues among several carriers (e.g., motor vehicle, Medicaid, Medicare due to disability, disability administrator)
- Requests complaint failure investigations
- Direct the TPA to Investigate the claims through telephone, written correspondence, and/or personal contact with claimants, attorneys, insureds, witnesses and others having pertinent information
- Evaluate, negotiate and settle both non-litigated and litigated claims within delegated authority
- Assume responsibility for complex injury claims, including soft tissue, serious fractures, fatalities, disfigurements
- Plan and conduct investigations (including but not limited to interviewing parties involved, collecting and evaluating documentation and securing evidence and protecting the chain-of-custody, determine inspection needs, order police reports, scene investigation, take witness statements, review material damage photos, order medical reports, ) to analyze coverage, determine liability, compensability, and extent of damages
- Create a dynamic and stimulating work environment for all colleagues in the unit
- Ensure that people development, productivity and quality output are on top of the agenda
- Organise the workflow of the unit in order to achieve the required level of

## Qualifications for claims specialist

- Knowledge of hospital computer software is a plus (Epic, Cerner, Meditech, Siemens)
- Proficient in use of CLAIMSTATION, MBPA and Claims Outcome Advisor
- Must have the ability to work varying shifts
- Prefer 5 years claims experience, thorough knowledge of Commercial and Personal Lines coverages and computer-based damage estimating
- Must possess certification(s) identified as acceptable in Selective's Claims
  Certification Policy or willingness to achieve certification
- Associate degree from an accredited college or university with major course work in business administration, liberal arts, public health, healthcare management, or a related field preferred