

# CITY OF HAMILTON

## CORPORATE SERVICES DEPARTMENT (LEGAL SERVICES DIVISION - RISK MANAGEMENT SERVICES - LOCATION – 50 MAIN ST. E.)

### CLAIMS REPRESENTATIVE

#### SUMMARY OF DUTIES

Under the direction of the Manager, Risk Management Services or Supervisor, Claims Administration, or Corporate Risk Compliance Officer, investigates, negotiates, mitigates, and settles claims made against the City/entities, for bodily injury, automobile accident benefits, general liability, and property losses, including subrogation within authorized limits and first party property losses. Follows and develops procedures to ensure proper and efficient handling of claims, gathering of data on claims for both record keeping, loss forecasting purposes, estimating the financial value of claims (reserves), and providing fundamental risk transfer information for City documents.

#### GENERAL DUTIES

Investigate, negotiate, resolve, or deny claims made against the City/entities for bodily injury, automobile accident benefits, property losses and general liability within authorized limits as delegated by the Manager.

Pursue subrogation recoveries or similar matters involving recovery of amounts due to the City, including using the Small Claims court process.

Prepare court filings or other legal process under the direction of a lawyer/law clerk team.

Pursue recoveries from persons, insurers or other sources of compensation. Draft the necessary documents for Small Claims Court.

Negotiate with defendants and/or their insurance or legal representatives. Attend and speak at Small Claims pre-trials and trials as necessary, may be accompanied by Senior Risk Management staff for on the spot approval/direction.

Attend and photograph as required, accident or loss scenes.

Attend and secure statements from claimants and witnesses to assist in determining liability, negotiating compensation, or resolving losses.

Provide legal staff with direction for claims in litigation that are within authority level.

Set up and enter new claims into the claims management system with appropriate reserves and data in accordance with departmental procedure and completes the timely updating and amending of data and reserves for existing claims as information becomes available.

Retain the services of outside experts such as adjusters, appraisers, engineers, medical specialists, and rehabilitation firms. Review their reports and take actions as necessary.

Receive and answer inquiries from the public, staff, elected officials, other departments, lawyers, and insurance company representatives.

Document and maintain claims files and the claims management system to ensure that complete and accurate records are available for reference to support City, departmental or legal requirements.

Prepare reports, system reports and records as directed.

Provide informational updates and receive direction on significant claims and risk management issues from the Manager of Risk Management as required by authority level delegated by the Manager.

Provide fundamental risk transfer advice and information to client departments on proof of insurance documentation in compliance with contract requirements, under the guidance of the Manager of Risk Management or Corporate Risk Compliance Officer.

Conduct research under the direction of the Manager of Risk Management or Corporate Risk Compliance Officer in contribution to the task of procuring insurance coverage for the City on an annual basis.

Communicate and liaise with various other City departmental staff to provide a review of loss data and risk management services.

Apply risk management practices to identify trends, patterns, risks, and hazards. Advise and assist departmental staff in loss prevention and loss reduction techniques.

Review findings and analysis with the Manager of Risk Management, Supervisor, Claims Administration, and Corporate Risk Compliance Officer.

Review assigned departmental statistics with the Manager of Risk Management, Supervisor, Claims Administration and Corporate Risk Compliance Officer.

Complete all required forms in accordance with legislated regulations or internal procedures.

Maintain a good working knowledge of case law including statutes such as The Insurance Act of Ontario, The Highway Traffic Act, The Occupier's Liability Act, The Negligence Act, The Municipal Act, and any other statutes relevant to the types of claims handled.

Participate in professional associations to maintain and exchange beneficial information.

Conduct investigations or meetings outside of regular work hours as required.

Meet and satisfy all City and departmental audit requirements.

Perform all computer and system related activities consistent with the functional requirements of the job.

Work in accordance with the provisions of applicable Health and Safety legislation and all City of Hamilton corporate and departmental policies and procedures related to Occupational Health and Safety.

Perform other duties as assigned which are related to the position.

## **QUALIFICATIONS**

1. Progressive experience in claims processing, interviewing or investigation, administration, quality control, customer relations, database and system manipulation, confidentiality protocol, budgeting and financial tracking normally acquired by the completion of Secondary School graduation with post secondary training in insurance related courses or enrolment and/or a combination of education and insurance industry experience.
2. Demonstrated experience in the insurance industry involving the adjusting and processing of claims; significant exposure related to bodily injury claims; the understanding of medical terminology and the interpretation of medical reports; exposure to setting of bodily injury reserves; exposure to underwriting and loss analysis.

3. Experience in a computerized environment. Working knowledge of Word, Excel and database software or equivalent software programs.
4. Knowledge of various statutes including The Insurance Act of Ontario (OMPP, Bill 164, and Bill 59 including any further statutory amendments to Provincial automobile insurance legislation), Occupier's Liability Act, The Negligence Act, The Municipal Act, and any other statutes relative to the job function.
5. Demonstrated experience of the fundamentals of policy and procedure interpretation and creation.
6. Knowledge of the three main areas of risk management expertise – risk identification, risk transfer, and risk finance.
7. Knowledge of ethical standards relating to the legal and adjusting professions: extensive knowledge of insurance wordings, interpretations, and coverages for property and casualty insurance including both commercial and personal lines of insurance: risk management principles.
8. Must possess a Class "G" driver's licence and access to a vehicle for use on the job.
9. Ability to communicate well, both orally and in written form.
10. Must be able to maintain a high level of confidentiality.
11. Certified Insurance Professional (CIP), and Canadian Risk Management (CRM) designations would be considered an asset.

**THE INCUMBENT SHALL COMPLY WITH ALL HEALTH AND SAFETY POLICIES AND PRACTICES FOR THIS POSITION AND THE WORKPLACE**

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