

Job Description

Company:	HDI Global Specialty SE – UK Branch (HSUB)
Division:	Claims
Job Title:	Claims Manager – Delegated Authority
Date:	January 2021

I. Position

Location:	UK Branch (HSUB) - London
Reporting to:	Head of Specialty Lines Claims
No. of direct reports	4

II. Job Purpose

1. Accountable & responsible for managing HSUB's portfolio of Delegated Authority claims, including A&H, via referral and claims handling arrangement with TPAs, ensuring that the best outcomes for our policyholders and business are achieved consistently and that all policyholders are treated fairly throughout the lifecycle of the claim.
2. Managing, motivating and developing high-performing resource, both internally and at TPAs, to produce a claims proposition for HSUB's DA/A&H classes of business that proactively delivers a first-class claims experience to policyholders, brokers and internal stakeholders in adherence with all guidelines, claims philosophy and procedures.
3. To be divisional subject matter expert for all claims written under Delegated Authority (including A&H), providing specialist knowledge as required with regard to all classes of business considered under these divisions.
4. To actively monitor accounts/agency claims for relevant classes of business to ensure early and prudent best estimate reserves are in place & entered into systems, valid claims are settled promptly with a tight control of costs throughout lifecycle. Additionally, manage internal reserving process from claims perspective, providing claims insights in order to develop/retain profitable business.
5. To support Claims Leadership Team to deliver the strategic objectives for the function. This includes managing business change, whilst executing the Claims Business Plan/Claims Transformation Plan initiatives.

III. Job Responsibilities

- To manage all claims arising from responsible line(s) of business from FNOL to settlement, with due consideration of subrogation/contribution where appropriate and tight costs control, along with people management of internal resource (within divisional team) to service these claims and manage TPAs to required standards.

- To be the senior point of reference and subject matter expert for responsible claims in the HGS UK Branch, taking technical referrals from team. Further, to ensure that consistent superior levels of claims service are delivered whilst promoting standardized best practice & effective procedures for relevant lines of business.

- With support from TPA Performance Manager, fully control and have oversight of TPAs to ensure that quality claims service, regulatory compliance & tight cost control is consistently provided by all TPAs to HGS' requirements including but not limited to: monitoring claims lifecycle KPIs, costs, referral volumes & criteria adherence, CAT response, ensuring TPA audit recommendations executed.

- To produce & maintain uptodate HSUB DA Claims Framework for all outsourced claims handling arrangements and TPA management to include: TPA selection criteria, TPA claims handling best practice (as an extension of HSUB claims team), regular communication, referrals and costs control; then embed Framework within DA claims team practice consistently.

- Responsible for selecting most effective TPA for each account written by DA or A&H underwriters, assigning claims authority, along with referral criteria and allocating most appropriate in-house claims referral point & account supervisor per Agency.

- With support from the TPA Performance Manager and other relevant stakeholders, annually review the HSUB TPA Panel.

- Accountable for in-house Delegated Authority Claims team's performance to maintain 'green' KPIs including, but not limited to: claims correspondence turnaround times within 3 days, accurate reserving, tight claims lifecycle times, prompt payment and no static claims.

- Accountable for ensuring all DA claims data is correct and uptodate for responsible lines of business in all relevant systems, regardless of how and where claims data is processed.

People & Culture

- Manage and strengthen effective relationships with internal and external stakeholders, influencing to encourage better business decisions.
- Collaborate continuously with underwriters and attend client meetings to help underwriters gain and retain profitable business.
- Work with Head of Specialty Lines Claims to develop a broker engagement strategy best suited to the US & UK Delegated Authority markets.
- Promote & deliver a culture of open communication, collaboration and continuous improvement; mentoring and sharing technical expertise with colleagues to deliver a superior service
- Act as ambassador of company, raising our profile in the market and actively strengthening our claims reputation

Business Transformation & Process Improvement

- Working with Claims Performance & Operations Team to identify and enhance the quality and value of processes for your area of work
- To actively participate in business change to transform current claims proposition towards our vision for a future claims service model of HGS Claims - UK

III. Job Responsibilities

Performance Development & Management

- Provide the people within your team with the opportunities, training and experience to expand their/your knowledge and improve their skills
 - Ensure the performance of the team remains at an excellent standard, including that:
 - Performance objectives and personal development plans are set appropriately
 - Feedback is given regularly, not just at reviews
 - Performance review forms are submitted to the required standard
 - Underperformance is actively managed contemporaneously
-

Risk and Controls

- Adhere, and be responsible for team's and TPAs' adherence, to all appropriate regulations and laws, along with Branch and Group guidelines, processes and procedures (particularly BaFin & FCA)
 - Perform regular Peer Reviews for all direct reports to ensure team adherence to regulation, guidelines, practices & procedures
 - Adhere, and responsible for team's adherence, to and maintain process controls to ensure the quality of the output for your area/team within the function. Suggest improvements as appropriate.
 - Assist in the establishment, adherence and enhancement of best practice standards, interfaces and processes falling within the HGS – UK Claims remit
-

Reporting

- Regularly access and monitor claims data to ensure quality of claims financials & provide insights to various internal stakeholders verbally and produce monthly and ad hoc claims reports
 - Manipulate data & provide analysis of claims to highlight trends, performance issues, leakage, costs spend, litigation and fraud and assist in the development of processes for improvement for responsible lines, responding to business requests
-

IV. Job Competencies, Skills and Experience

Core:

E.g. effective communications, client focus, collaboration, initiative, working relationships.

Communicating and Influencing

Positively impacts the actions and decisions of stakeholders of all level, ensuring that they are involved throughout. Negotiates confidently without damaging relationships whilst building support and buy-in for ideas. Actively listens and adapts communication style depending on audience, both face-to-face and via virtual media

Problem Solving

Uncovers information to identify causal links. Uses a variety of tools/techniques to break down complex issues and spots trends, patterns and interdependencies between issues. Asses risks and is pragmatic when developing solutions.

Delivery and Accountability

Is accountable for own delivery (and team's where relevant) to support the overall Branch priorities and objectives. Prioritises deliverables and identifies and resolves roadblocks that might affect delivery.

Innovation and Continuous Improvement

Creates and tests out new idea and improvements, which add value to the business operations or service offering. Actively seeks out ways to learn and self-improve

Customer Focus

Shows commitment to putting the customer first. Develops a deep understanding of the true nature and complexities of the customer business and uses the understanding to implement ideas and technical expertise. Takes action to ensure that customer feedback is acted upon and operational and technical challenges are over come so that customer service excellence is not affected.

Teamworker

Collaborative & communicative - a key player in building and maintaining a positive team culture and cross-functional relationships. Engages partners and brings together diverse stakeholders to deliver objectives.

Effective Management

Communicates business strategy, visions & values and translates this into priorities to achieve team objectives. Is self-aware, role models and demonstrates desired behaviours so that others follow suit. Empowers others to perform by providing an appropriate balance of challenge and support.

Specialist:

Systems, problem solving, negotiation, influencing, sales

- Up to date understanding and practice of the technical/legal requirements of the role
- Excellent knowledge of all specific I.T. applications used in the role (CLASS/ECF2, MS Office, Large Loss Claims System)
- Strong analytical skills and the ability to interpret financial information sensibly to ensure accurate and consistent information is being provided at all times
- Be able to influence opinion to achieve desired outcomes
- The ability to make sound judgments under pressure

Other personal attributes required:	<ul style="list-style-type: none"> • Passionate about claims resolution and client experience; service-orientated • Ability to translate strategic thinking into tangible plans • High-performing individual – results and outcome driven • Ability to coach, manage and mentor less senior staff • Effective communicator, both verbal and written, face-to-face and via virtual media • Capability to adapt and be flexible to change and evolving customer requirements and working practices • Energy & determination to succeed in a fast-paced environment of business transformation • Desire for continuous improvement of self, team members & claims service to be 'best version' • Self-motivated
-------------------------------------	---

V. Qualifications

Education: Academic.	<ul style="list-style-type: none"> • Degree/CII or similar professional qualification (desirable)
Experience: Vocational or on-the-job	<ul style="list-style-type: none"> • Proven (10+ years) Experience of Claims Market Experience within responsible classes of business • Account management and people management experience
Professional: Industry-specific	<ul style="list-style-type: none"> • A firm understanding of the key principles and practices of the London Market • Must understand the claims process and its complexities and variations from first advice to final settlement • Knowledge of the different broking procedures and claims reporting • Up to date appreciation of the technical, legal and regulatory requirements of the role • Proven Vendor/Expert Management • Budget and costs control • Be willing to travel

VI. Senior Manager and Certification Regime

Conduct Rules	<ol style="list-style-type: none"> 1. You must act with integrity. 2. You must act with due care, skill and diligence. 3. You must be open and cooperative with the FCA, the PRA and other regulators. 4. You must pay due regard to the interests of customers and treat them fairly. 5. You must observe proper standards of market conduct.
---------------	---

All applications should be made via email, including your CV, to James Side (James.Side@hdi-specialty.com) by January 20th.