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INSUR COMPL SPEC SUPV
CLASSIFIED POSITION VACANCIES 001

LOCATION: DEPARTMENT OF REVENUE
INSURANCE COMMISSION
CONSUMER SERVICE
KANAWHA

SCHEDULE: DAY SHIFT UNLIMITED ORIGINAL FULL-TIME PERM.

FTE: 1.00

DUTIES: DETAILED JOB DUTIES: SUPERVISES THE WORKERS' COMPENSATION SECTION OF CONSUMER SERVICES UNIT. ASSIGNS WORK TO COMPLAINT SPECIALISTS, APPROVES LEAVE AND TIME. ATTENDS WEEKLY MEETINGS WITH ASST. COMMISSIONER AND LEGAL DEPARTMENT TO REVIEW WC FILES. INVESTIGATES COMPLAINTS FILED AGAINST INSURANCE COMPANIES, AGENCIES, AND AGENTS INVOLVING DISPUTED CLAIMS AND ALLEGED UNFAIR INSURANCE PRACTICES. MEDIATES SETTLEMENTS BETWEEN CLAIMANT AND INSURING COMPANY BY GATHERING FACTS AND RECOMMENDING SOLUTIONS ACCORDING TO POLICY AND INSURANCE CODE. ADVISES CONSUMERS OF THEIR RIGHTS UNDER INSURANCE LAWS AND REGULATIONS. MAY ATTEND HEARINGS ON INSURANCE COMPLAINTS TO PRESENT FINDINGS OF AN INVESTIGATION. WRITES REPORTS AND NARRATIVES ON COMPLAINTS. REVIEWS INSURANCE COMPANIES RESPONSE TO COMPLAINTS TO DETERMINE IF THE COMPANIES ARE IN COMPLIANCE WITH STATE INSURANCE LAWS. ATTENDS AND/OR PARTICIPATES IN MEETINGS AND SEMINARS TO INFORM THE PUBLIC ON SPECIAL OR NEW AREAS IN THE INSURANCE INDUSTRY. CONFERS WITH US CONGRESSMEN AND SENATORS AND STATE LEGISLATORS IN RESOLVING CONSTITUENT PROBLEMS.

REQUIREMENTS: TRAINING: BACHELOR'S DEGREE FROM AN ACCREDITED FOUR-YEAR COLLEGE OR UNIVERSITY.
SUBSTITUTION: EXPERIENCE AS DESCRIBED BELOW MAY SUBSTITUTE FOR THE REQUIRED TRAINING ON A YEAR-FOR-YEAR BASIS.
EXPERIENCE: FOUR YEARS OF FULL-TIME OR EQUIVALENT PART-TIME PAID EMPLOYMENT AS AN INSURANCE AGENT, BROKER, EXAMINER, ADJUSTER, OR INVESTIGATOR WITH AN INSURANCE COMPANY OR GOVERNMENTAL INSURANCE REGULATORY AGENCY IN THE AREAS OF LIFE, ACCIDENT

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AND HEALTH, PROPERTY AND CASUALTY, OR IN A
TECHNICAL CAPACITY IN AN INSURANCE REGULATORY
AGENCY, TWO YEARS OF WHICH MUST HAVE BEEN IN AN
ADMINISTRATIVE OR SUPERVISOR CAPACITY.

SALARY: PAY GRADE 017 \$35,028.00 - \$64,812.00

DEADLINE: AUGUST 03, 2016

TO APPLY: SEND DIVISION OF PERSONNEL APPLICATION TO:
KATHRYN MULLINS
INSURANCE COMMISSION
1124 SMITH STREET
CHARLESTON, WV 25301

PLEASE INCLUDE POSTING NUMBER INS160025 ON APPLICATION