

## **RISK MANAGER**

### **DISTINGUISHING FEATURES OF THE CLASS:**

This is a professional level position responsible for implementing and monitoring procedural policies to reduce insurance costs and losses. The incumbent in this position will need to have an excellent understanding and ability to apply the technical aspects of claim handling in all areas including liability, workers' compensation, General Municipal Law 207-a and 207-c. The Risk Manager will also need to be able to administer self-insured programs while adhering to budgetary restrictions and ensures that all interpretations relating to eligibility and claims processing are made in conformance with guidelines applicable to legal requirements and restrictions. Work is performed under the general direction of a higher level employee with a considerable leeway allowed in carrying out work assignments.

### **TYPICAL WORK ACTIVITIES:**

The following is indicative of the level and types of activities performed by incumbents in this title. It is not meant to be all-inclusive and does not preclude a supervisor from assigning activities not listed which could reasonably be expected to be performed by an employee in this title.

1. Administers and processes all workers' compensation claims in accordance with the requirements of the New York State Workers Compensation Law, including all requirements for reporting, notification and record keeping;
2. Reviews and processes all claims made pursuant to New York State General Municipal Law section 207-a (firefighters) and 207-c (police officers) and any applicable collective bargaining agreements;
3. Reviews all reports of injury to make initial recommendations and review medical bills for appropriate New York State fee schedule;
4. Recommends the kinds and amounts of insurance to be maintained as self-insurance and those to be retained with outside insurance firms; negotiates types and amounts of insurance coverage within budgetary restrictions;
5. Performs claim investigations to determine coverage, compensability, and reserve projection;
6. Oversees the claims processing and record keeping functions of all group insurance programs;
7. Notifies insurance carriers of changes in programs or property and equipment affecting insurance coverage;
8. May arrange for private field investigation of claimants;
9. Contacts claimant and medical provider to obtain reports on all indemnity claims;
10. Completes and files all forms (ex: C-240, C-11, C8.1) and process all indemnity payments timely;
11. Request any necessary medical examinations of the claimant to determine the nature and extent of any disabilities, injuries or illnesses and will schedule any fit for duty exams that are requested;
12. Provides monthly updates on lost time claims with employees currently out of work and a monthly listing of all pending payments;
13. Notifies liability carrier(s) of all claims, whether third-party or otherwise, for coverage of exposure;
14. Maintains a separate file for each claim, and compiles all medicals for job injuries related to retirement filing for Police and Fire;
15. Notifies employees of Section 71 rules regarding lost time from work;
16. Ensures brokers are marketing the health insurance and providing the City with the best options at the time of renewal;
17. Reports to Public Goods Pool yearly to determine surcharge totals for payment into the Pool;
18. Works with the Administration, Department Heads, and employees to improve Safety programs and ensure all required training is implemented.

## RISK MANAGER (Cont'd)

### FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL CHARACTERISTICS:

Thorough knowledge of the risk management and risk financing techniques for all lines of insurance; thorough knowledge of the principles and practices of administration; thorough knowledge of laws, rules and regulations pertaining to insurance, such as General Municipal Insurance Law, Worker's Compensation Law and business law; thorough knowledge of current developments, literature and sources of information in the insurance field; good knowledge of the advantages and disadvantages of all types of insurance coverage including self-insurance; good knowledge of accounting principles and practices; ability to analyze insurance needs based upon past claims and projected future claims; ability to read and interpret insurance policies; ability to deal effectively with a wide variety of people; ability to analyze statistical and factual data and to arrive at sound conclusions; ability to prepare and understand technical and statistical reports; personal characteristics necessary to perform the duties of the position; physical condition commensurate with the demands of the position.

### MINIMUM QUALIFICATIONS:

- EITHER: (A) Graduation from a regionally accredited or New York State registered college or university with a Bachelor's degree in Business/Public Administration, Accounting, Finance or a related field and six (6) years of paid experience in a public agency that involved claims, workers comp, and General Municipal Law 207-a and 207-c;
- OR: (B) Graduation from a regionally accredited or New York State registered college or university with an Associate's degree in Business/Public Administration, Accounting, Finance or related field and eight (8) years of paid experience in a public agency that involved claims, worker's comp, and General Municipal Law 207-a and 207-c;
- OR: (C) Graduation from high school or possession of a high school equivalency diploma and ten (10) years of paid experience in a public agency that involved claims, worker's comp, and General Municipal Law 207-a and 207-c;
- OR: (D) An equivalent combination of the education, training and experience between the limits of (A) and (C) above.

### SPECIAL REQUIREMENT

Possession of a valid Driver's License at time of application and to maintain the position.

Possession of a valid New York State Adjuster's License at time of application and to maintain the position.

ADOPTED: 01/08/18