

UW HEALTH JOB DESCRIPTION

Claims Manager

Job Code: 310041	FLSA Status: Exempt	Mgt. Approval: J. Rauser	Date: April 2022
Department : Legal - Risk Management		HR Approval: S. Whitlock	Date: April 2022

JOB SUMMARY

The Claims Manager manages Medical Professional and General Liability claims within UW Health standards and best practices to ensure fair claims management, integrity and quality service to those involved. With input from risk managers, outside counsel and office of corporate counsel, sets strategy for the resolution of claims and lawsuits. The Claims Manager will be responsible for: advising and supporting UW Health providers and staff throughout the claims process including depositions; investigating and evaluating potential liability and damages; establishing timely and accurate expense and indemnity reserves within designated authority; directing outside counsel in coordination with the Office of Corporate Counsel; leading Claim Committee meetings; reporting to and preparing excess insurance claim reports; systematic tracking and processing of claims; coordination and collaboration with Risk Management team members; managing MMSEA Section III Mandatory and National Practitioner Databank reporting in coordination with Office of Corporate Counsel and outside counsel; participating in excess insurance and captive claims audits; trending, analyzing, and coordinating loss runs.

In addition, the Claims Manager will utilize risk management information systems to process claims and analyze risk management information (data); advise and manage claims and litigation through successful resolution; interface with legal defense counsel and insurance company claims representatives; participate in cross-functional teams, standing work groups, councils and committees. The Claim Manager provides or assists with risk management training and educational programs; complies with risk management standards with the objective of minimizing losses to protect the assets of the organization.

The Claim Manager facilitates cross functional communication surrounding claim and litigation trends and best practices; assists departments with developing risk management practices to eliminate or mitigate risk through ongoing cross functional interaction; provides key input to department specific risks or various committees that manage, monitor and oversee risks. This includes collaboration and communication with various internal and UW Health affiliate departmental leadership and staff.

MAJOR RESPONSIBILITIES

- Review new claims with Office of Corporate Counsel regarding liability and management plan
- Secure all discovery for assigned defense counsel responsive to litigation requests
- Attend mediation and support defense counsel in case resolution
- Review defense counsel litigation reports and assist in strategic defense of the case
- Research and recommend settlement and verdict values
- Analyze and process complex or technically difficult professional and general liability claims by investigating and gathering information to determine the exposure on the claim
- Manage and direct claims and litigation process through well-developed action plans, proactively assisting in development of claims defense strategies.
- Promptly investigate, evaluate and resolve assigned claims in a timely fashion including early dispute resolution or negotiation within settlement authority.
- Negotiate the terms of settlement agreements.
- Present claims to the various Claims Review Committees for settlement authority and/or trial awareness.
- Prepare notices of loss to insurers/reinsurers.
- Maintain confidentiality of privileged information.
- Provide 3rd party deposition management & support for providers and staff.
- Committee membership/attendance to support the role.
- Trend and analyze loss data for claims committee and executive leadership.
- Provide education to providers on litigation trends, deposition skills, litigation avoidance.
- Evaluate litigation related exposures for multi-state health system to assist in the development of best practices.
- Participate in litigation professional organizations to stay up to date on state regulations, laws, etc. on medical malpractice.
- Participate in insurance risk financing for understanding of claim management requirements.

ALL DUTIES AND REQUIREMENTS MUST BE PERFORMED CONSISTENT WITH THE UW HEALTH PERFORMANCE STANDARDS.

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JOB REQUIREMENTS

Education	Minimum	Bachelor's Degree in risk management, legal studies, nursing, or closely related field
	Preferred	Masters of Science in Nursing or Juris Doctorate
Work Experience	Minimum	Three (3) years' experience managing professional and general liability claims for a hospital system, an insurance carrier, a self-insured environment or in a law firm setting or combination thereof.
	Preferred	Seven (7) years' experience managing professional and general liability claims for a hospital system, an insurance carrier, a self-insured environment or in a law firm setting or combination thereof.
Licenses & Certifications	Minimum	Ability to obtain Associate in Claims (AIC) or Certified Professional in Health Care Risk Management (CPHRM), Associate Risk Management (ARM) or other related insurance certification or licensure within two years of hire.
	Preferred	
Required Skills, Knowledge, and Abilities		
<ul style="list-style-type: none"> • Knowledge of medical terminology. • Knowledge of WI and IL state laws regarding healthcare liability and general liability claims. • General knowledge of HIPAA requirements. • Familiarity with the litigation process and discovery rules. • General understanding of at least one claims database or healthcare incident reporting database. • Ability to communicate clearly with respect, compassion and understanding and establish and maintain good working relationships. • Excellent written communication and presentation skills • Attention to detail and excellent organizational skills. • Ability to work in a team environment and independently and take initiative in non-routine matters. • Ability to work on multiple complex matters simultaneously and prioritize tasks. • Ability to manage stressful encounters related to healthcare-specific issues and a wide array of claims-related issues, both in person and by telephone. • PC literate, including Microsoft Office products • Analytical and interpretive skills • Excellent negotiation skills • Ability to meet or exceed Service Expectations 		

AGE SPECIFIC COMPETENCY (Clinical jobs only)

Identify age-specific competencies for direct and indirect patient care providers who regularly assess, manage and treat patients.

Instructions: Indicate the age groups of patients served either by direct or indirect patient care by checking the appropriate boxes below. Next,

<input type="checkbox"/>	Infants (Birth – 11 months)	<input type="checkbox"/>	Adolescent (13 – 19 years)
<input type="checkbox"/>	Toddlers (1 – 3 years)	<input type="checkbox"/>	Young Adult (20 – 40 years)
<input type="checkbox"/>	Preschool (4 – 5 years)	<input type="checkbox"/>	Middle Adult (41 – 65 years)
<input type="checkbox"/>	School Age (6 – 12 years)	<input type="checkbox"/>	Older Adult (Over 65 years)

JOB FUNCTIONS

Review the employee's job description and identify each essential function that is performed differently based on the age group of the patient.

PHYSICAL REQUIREMENTS

Indicate the appropriate physical requirements of this job in the course of a shift. *Note: reasonable accommodations may be made available for individuals with disabilities to perform the essential functions of this position.*

Physical Demand Level		Occasional Up to 33% of the time	Frequent 34%-66% of the time	Constant 67%-100% of the time
X	Sedentary: Ability to lift up to 10 pounds maximum and occasionally lifting and/or carrying such articles as dockets, ledgers and small tools. Although a sedentary job is defined as one, which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required only occasionally and other sedentary criteria are met.	Up to 10#	Negligible	Negligible

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	Light: Ability to lift up to 20 pounds maximum with frequent lifting and/or carrying of objects weighing up to 10 pounds. Even though the weight lifted may only be a negligible amount, a job is in this category when it requires walking or standing to a significant degree.	Up to 20#	Up to 10# or requires significant walking or standing, or requires pushing/pulling of arm/leg controls	Negligible or constant push/pull of items of negligible weight
	Medium: Ability to lift up to 50 pounds maximum with frequent lifting/and or carrying objects weighing up to 25 pounds.	20-50#	10-25#	Negligible-10#
	Heavy: Ability to lift up to 100 pounds maximum with frequent lifting and/or carrying objects weighing up to 50 pounds.	50-100#	25-50#	10-20#
	Very Heavy: Ability to lift over 100 pounds with frequent lifting and/or carrying objects weighing over 50 pounds.	Over 100#	Over 50#	Over 20#
List any other physical requirements or bona fide occupational qualifications:				

Note: The purpose of this document is to describe the general nature and level of work performed by personnel so classified; it is not intended to serve as an inclusive list of all responsibilities associated with this position.