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Claims Analyst - Facultative

Arch Reinsurance Ltd. (Bermuda) provides specialty property, casualty and life reinsurance products through reinsurance intermediaries worldwide. These programs range from Property Catastrophe and Property Excess of Loss reinsurance to Professional Liability and Marine Treaties. Our Bermuda-based operation has a strong, proven management team, a commitment to underwriting discipline, and financial strength that is rated A (Excellent) by A.M. Best and A+ by S&P.

The Claims Analyst is responsible for handling the day-to-day excess claims activity, primarily for facultative lines of business, and supporting other members of the Claims Team as required.

Duties & Responsibilities:

- Analyze initial claim notifications, including coverage verification and associated checks, or updates on existing claims and process them into the Company's systems in accordance with policies and procedures, including calculating reinstatement premium and monitoring aggregation of claims on programs with multiple losses to the same underwriting year
- Identify additional information and documentation that may be required in support of claim and request the same from brokers/ceding companies as required, including participating in market calls and providing updates to internal stakeholders
- Process payments in accordance with Company's policies and procedures
- Ensure Company's electronic claims files are maintained
- Review & verify broker statements
- Quarterly review and resolution of claims balances in aged receivable reports
- Liaise with Underwriters, Finance, Brokers &/or Adjusters as required
- Other tasks as required

Minimum Qualifications, Skills & Experience:

- A minimum of 5 years relevant reinsurance claims handling experience; preference will be given to those with facultative / casualty claims handling experience
- Ability to analyze reports, interpret reinsurance contract language, analyze coverage under insurance and reinsurance contracts, establish case reserves
- Strong organizational and mathematical skills
- Ability to multi-task
- Proficient in using Microsoft Office products with advanced Excel skills
- Ability to provide clear written reports and analysis of claims and coverage issues
- Ability to process claims into the system in a timely manner and with attention to detail
- Proven ability to communicate effectively with individuals at all levels and in all areas of the organization, as well as with outside contacts
- A strong work ethic and the ability to take initiative meet deadlines and work with minimal supervision

To apply please send your résumé to bdajobs@expertisegroup.com. All applications are handled in a confidential manner and in accordance with Expertise's Privacy Policy, available on our website.

Closing Date: February 23, 2022

