



**NORTH DAKOTA  
CLASS DESCRIPTION**

ND Human Resource Management Services  
Phone: (701) 328-3290

Class Code(s):  
0479  
0480

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**POLICYHOLDER CLAIMS INVESTIGATOR**

**SCOPE OF WORK:**

Positions in this class series perform administrative and investigatory duties to ensure compliance with North Dakota Insurance law standards and applicable federal regulations.

**DUTIES PERFORMED AT ALL LEVELS:**

- Receive inquiries by phone, correspondence, or in person from policyholders regarding insurance companies, their agents, or insurance policies.
- Evaluate and analyze inquiries and provide policyholders with required information, explanations, and guidance in resolving insurance-related issues.
- Assist and educate policyholders to understand the provisions of their insurance policies.
- Conduct verbal and written communication with insurance companies or their agents in order to gather and clarify information to resolve insurance-related issues.
- Prepare case-related files and documents; gather, review, and clarify materials relating to insurance-related issues; complete related administrative tasks.
- Collaborate with policyholders or insurance company representatives in order to resolve claims.
- Conduct or assist with informational seminars and workshops to provide outreach and education to consumers and insurers; may provide specialized information to specific groups or consumers.
- Apply state and federal laws and regulations to insurance disputes.

**NOTE:** The duties listed are not intended to be all-inclusive. Duties assigned any individual employee are at the discretion of the appointing authority.

**POLICYHOLDER CLAIMS INVESTIGATOR I**

GRADE J

0479

**LEVEL DEFINITION:**

Work at this level involves providing consumer assistance and handling inquiries in relation to insurance-related products or Medicare plans regarding cases and issues of a less complex nature. Individuals at this level work with consumers, insurance

companies, and/or federal agencies on issues and cases which are considered less complex based on the depth and scope of analysis required or because the issues and cases are federally regulated. Work at this level may consist of performing duties under the review and approval of a higher-level authority.

ADDITIONAL DUTIES PERFORMED AT THIS LEVEL:

- None

MINIMUM QUALIFICATIONS:

Requires five years of professional-level work experience in the insurance field. A college degree may substitute for the work experience required on a year-for-year basis up to four years.

**POLICYHOLDER CLAIMS INVESTIGATOR II**  
GRADE K

0480

LEVEL DEFINITION:

This level is directly involved with resolving complex, statute-driven consumer complaints. Work is at an advanced level and differs from the previous level with regard to the complexity of cases and a greater degree of analytical skills, independence, and exercises higher-level judgement and expertise.

ADDITIONAL DUTIES PERFORMED AT THIS LEVEL:

- Serve as an education/training resource and provide guidance, technical assistance and policy interpretation to other investigators.
- Conduct complex investigations on formal insurance consumer complaints; research related complaints and statutes.
- Analyze evidence gathered during investigations, apply the appropriate statutes, and make a determination on the complaint.
- Provide information to legal division in relation to insurance regulations and potential code violations.
- May be called as a witness in administrative, civil or criminal trials.
- May participate in desk or on-site market conduct investigations.
- May work with attorneys and law enforcement officers in fraud investigations including interviews, physical searches and review of evidence.

MINIMUM QUALIFICATIONS:

Requires a bachelor's degree and five years of professional-level work experience in the insurance field with duties that included in-depth analysis and interpretation of insurance policies applied to a variety of complex circumstances affecting consumers.

Additional experience as described may substitute for the education requirement on a year-for-year basis.

Eff. Date: 10/74

Rev: 1/91 - Administrative factoring, change format

Reviewed: 9/96 - Rewritten in current format

Rev: 7/12 – Conversion to Hay System

Rev: 11/16 – Two level series developed per agency request

Rev: 8/18 – Revised minimum qualifications for first level per agency request; reviewed factor evaluation