



Litigation Specialist

We have the following job opportunity in our **Arlington, VA** office:

Description

As a member of the PRMS unit, the Litigation Specialist will investigate, evaluate, negotiate, and resolve claims as assigned. This individual will be responsible for the overall accuracy, promptness, and efficiency of technical outcomes on medical professional liability claim files which involve advanced complexity and exposure.

Responsibilities include, but are not limited to:

- Evaluating insurance contracts to make coverage decisions and effectively negotiate high value claims
- Managing vendors such as independent adjusters and attorneys as well as the overall management of loss costs (loss, ALAE and ULAE) on assigned files
- Maintaining customer service quality standards and compliance with operating guidelines and other internal procedures and processes
- Collaborating across PRMS departments, customers, attorneys, and others as requested to provide claims analysis, guidance, and direction to the department
- Identifying, analyzing, and assessing risks and trends in areas of clinical practice
- Meeting with insureds, defense counsel, plaintiffs and plaintiff's attorneys to address critical issues involved in claims, negotiate settlements, attend mediations and trials
- Adhering to all legal and regulatory requirements, thorough file reporting and processing in company computer systems and applications
- Traveling to meet with client program principles and attend client functions, as needed
- Participating in special projects and initiatives, as assigned

Requirements

- Minimum of 5 years evaluating or investigating medical malpractice related claims with major carrier or TPA
- Bachelor's degree in healthcare, legal or business-related field. Advanced degree (MBA or JD) preferred
- Technical knowledge of insurance coverage and policies, insurance law, tort law, and claims handling practices and techniques
- Highly refined skills in negotiating, analyzing, problem solving, and decision-making
- Ability to operate under pressure in high complexity, high risk situations and to respond rapidly to changing work conditions
- Adjustor's & P&C license are a plus
- IIA Continuing education courses (AIC, ARM, CPCU, ALCM) are a plus
- Must be willing to travel

Interested in applying for this role? Please visit our [Careers Page](#) to apply!

We support diversity in the workplace. We are an Equal Opportunity Employer.



About Us

Since 1977, TransRe's vision has been to deliver the capacity and expertise necessary to contribute to the sustainable growth of prosperous communities worldwide.

Our Mission

Our mission is to be the first choice provider of reinsurance to our customers, based on:

Experience	the foundation of our long term, trust-based relationship is built on long tenured leadership in every line in every region.
Accessibility	our global network of local support for all property and casualty lines of business.
Strength	the cornerstone of our ability and willingness to pay claims.
Innovation	a track record of collaboration and service delivery to support your sustainable profitable growth.
Expertise	the basis of our timely, value-added insight and offerings.
Resilience	existing to improve the resilience of communities worldwide, through our products, our people and our partnerships

Our Values

To achieve our Vision and Mission, we maintain a culture of the highest ethical standards. We treat our employees and customers fairly. We stand behind our products and services. We act with:

Integrity	work honestly, to enhance TransRe's reputation.
Respect	value all colleagues. Collaborate actively.
Performance	we reward excellence. Be accountable, manage risk and deliver TransRe's strengths.
Entrepreneurship	seize opportunities. Innovate for and with customers.
Customer Focus	anticipate their priorities. Exceed their expectations.

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