DESCRIPTION: Under Administrative direction; plans, organizes, directs and controls the unit's activities; supervises the operation of Insurance Fraud investigations; schedules and assigns Insurance Fraud Investigators; assists in developing and administering agency policies to ensure statewide compliance with Insurance Fraud laws; performs other related duties as assigned.

DISTINGUISHING CHARACTERISTICS: (A position is assigned to this class based on the scope and level of work performed as outlined below.)

Positions in this class supervise other investigatory professionals equivalent to the Insurance Fraud Investigator class and applies independent judgment and discretion to determine: a) assigning and directing the work of investigators, determining whether or not to pursue investigations of reported insurance fraud, determining what further course of action to pursue once the investigations are complete, and d) establishing relationships and/or partnerships with local police departments the FBI, Attorney General's office, County Attorney's, the U.S. Postal service, or other law enforcement entities for the purposes of coordinating criminal investigations, prosecution, or representing the Department of Insurance as the Insurance Fraud expert. This class also holds law enforcement and arrest powers, and is viewed as the Insurance Fraud expert.

EXAMPLES OF WORK: (A position may not be assigned all the duties listed, nor do the listed examples include all duties that may be assigned.)

Plans, organizes, assigns and directs the work activities of subordinate staff to facilitate the attainment of the unit's work goals and to ensure the consistent application of technical policies, procedures, and guidelines.

Confers with and counsels subordinate staff to exchange information on and/or explain work policies, procedures, and guidelines and to identify the characteristics and impact of and formulate possible solutions to work-related problems.

Reviews and compares work performance and/or products of subordinate staff with established standards to determine employee production levels and training needs and to determine actions such as promotions, disciplinary actions, status changes, separations, and grievance dispositions.

Trains subordinate staff in the principles, practices, policies, and/or procedures of their job to maintain and/or improve the production levels of employees in accordance with established work performance standards.

Reviews and investigates reports that an act of insurance fraud has been committed or is currently being committed to determine if fraud has occurred and to gather, assemble, and preserve factual statements, affidavits, and physical evidence for use in civil or criminal actions.

Writes reports and comprehensive information reflecting all investigative techniques applied in a clear, concise, and detailed manner.

Testifies on factual evidence before administrative and judicial bodies on matters relative to insurance fraud.

Reviews cases of Insurance Fraud Investigator to ensure the investigation are complete and thorough.

Confers with other department divisions and company representatives regarding insurance fraud prevention practices to determine the actions necessary to ensure appropriate anti-fraud practices are compliant with state law.

Confers with the Crime Commission and the Nebraska Law Enforcement Training Center to ensure compliance with all Law Enforcement mandates.

Reviews and selects potential new hires, conducts law enforcement centered background investigations of potential candidates.

Conducts investigations of officer misconduct and determines applicable discipline. Complies with mandatory reporting to the Crime Commission.

KNOWLEDGE, SKILLS, AND ABILITIES REQUIRED: (These are needed at entry level to perform the work assigned.)

Knowledge of: rules of evidence, laws of arrest, search and seizure, and basic court procedure; criminal investigation techniques and procedures; principles of identification, preservation of evidence relating to financial fraud, embezzlement, extortion, bribery, larceny, and conspiracy; insurance principles; insurance company operations including underwriting, claims, policyholder service, sale, and advertising; statistical techniques used in industry practice; ability to interpret federal laws, state statutes and regulations; and computer operations to include spreadsheets and word processing.

Skill in: analyzing complex investigative problems and determining solutions; dealing with the public and the parties involved in the investigation.

Ability to: analyze data and summarize into reports; organize the work of others; supervise staff; communicate with representatives of the insurance industry and consumer groups; train and supervise subordinate employees; communicate effectively with diverse populations including insurance company representatives and other law enforcement representatives; give presentations to specialized audiences; operate a computer; and assign other employees' work.

MINIMUM QUALIFICATIONS: (Applicants will be screened for possession of these qualifications. Applicants who need accommodation in the selection process should request this in advance.)

Coursework/training in criminal justice, law enforcement, police science, criminology, or related field, experience conducting criminal investigations, and experience leading or supervising others in criminal investigations.

SPECIAL NOTES:

Incumbents must become law enforcement certified within one year as a condition of continued employment.

State agencies are responsible to evaluate each of their positions to determine their individual overtime eligibility status as required by the Fair Labor Standards Act (FLSA).