



Australian Government

FNSSUP502 Supervise insurer liaison

Release: 1

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Modification History

Release	Comments
Release 1	This version first released with FNS Financial Services Training Package Version 1.0.

Application

This unit describes the skills and knowledge required to implement and supervise liaison with insurance bodies. It encompasses establishing insurer liaison, supervising the claim procedures, managing complex claims and managing risk.

It applies to individuals who use analytical skills and systematic approaches to liaise with insurance bodies and oversee specific organisational processes.

Work functions in the occupational areas where this unit may be used are subject to regulatory requirements. Refer to the FNS Implementation Guide Companion Volume or the relevant regulator for specific guidance on requirements.

Unit Sector

Superannuation

Elements and Performance Criteria

ELEMENT	PERFORMANCE CRITERIA
<i>Elements describe the essential outcomes.</i>	<i>Performance criteria describe the performance needed to demonstrate achievement of the element.</i>
1. Establish insurer liaison	1.1 Identify organisational procedures for insurance arrangements 1.2 Determine insurance performance measures 1.3 Establish contact with insurer and maintain regular liaison 1.4 Determine insurance premiums payment details 1.5 Establish procedures for processing claims 1.6 Obtain paperwork required to undertake activities 1.7 Provide insurer with information to maintain accurate member records

ELEMENT	PERFORMANCE CRITERIA
2. Manage risk	2.1 Assess risk of member profile with insurer 2.2 Undertake procedures to reduce risk in line with organisational procedures 2.3 Assess claims documentation and generate reports for trustee 2.4 Implement trustee decisions on claims and risk management procedures
3. Supervise claim procedures	3.1 Monitor performance requirements for insurer 3.2 Provide insurer with information as required to process claim 3.3 Refer disputed claims to complaints procedure
4. Manage complex claims	4.1 Gather documentation for complex claims and prepare for insurer 4.2 Check claim applications against conditions identified in trust deed 4.3 Incorporate claim beneficiaries into claims processing procedure 4.4 Compile claim correspondence in accordance with conditions identified in trust deed, relevant legislation and organisational procedures 4.5 Forward claim correspondence to insurer

Foundation Skills

This section describes language, literacy, numeracy and employment skills incorporated in the performance criteria that are required for competent performance.

Skill	Performance Criteria	Description
Reading	1.1, 1.4, 2.1, 2.3, 4.1, 4.2	- Researches and consolidates complex information and data from a range of sources - Thoroughly analyses information and data against defined criteria, conditions and requirements
Writing	1.2, 1.3-1.5, 1.7, 3.2, 4.1, 4.4, 4.5	- Accurately and logically records and manages information using correct organisational formats and systems - Prepares documentation using clear language, concepts and terminology appropriate for the audience and

		purpose
Oral Communication	1.3, 3.2	Uses collaborative techniques including active listening and questioning to negotiate outcomes, and to convey and clarify information in verbal exchanges
Numeracy	1.4, 1.7, 2.1, 2.3, 3.4	Applies mathematical problem-solving techniques to analyse and assess numeric and financial data, and to process claims
Navigate the world of work	1.1, 2.2, 3.3, 4.2, 4.3, 4.4	- Takes full responsibility for following policies, procedures and legislative requirements, and identifies organisational implications of new legislation or regulation - Identifies and resolves key business issues, processes and practices that may have legal implications - Seeks to improve policies and procedures to better meet organisational goals
Interact with others	1.3, 1.7, 3.1, 4.5	- Implements strategies for a diverse range of colleagues and clients to build rapport and foster strong relationships - Collaborates with others, sharing information and avoiding behaviours that are not conducive to a productive environment
Get the work done	1.1-1.7, 2.1, 2.3, 2.4, 3.1, 3.2, 4.1, 4.3-4.5	- Accepts responsibility for planning and sequencing complex tasks and workload, negotiating key aspects with others and taking into account capabilities, efficiencies and effectiveness - Makes critical decisions quickly and intuitively in complex situations, taking into consideration a range of variables including the outcomes of previous decisions - Accepts responsibility for addressing less predictable problems and applying problem-solving processes to determine a solution - Uses a range of digitally based technologies to enter, access or update information to achieve required outcomes

Unit Mapping Information

Code and title current version	Code and title previous version	Comments	Equivalence status
FNSSUP502 Supervise insurer	FNSSUP502A Supervise insurer	Updated to meet Standards for	No equivalent unit

Code and title current version	Code and title previous version	Comments	Equivalence status
liaison	liaison	Training Packages. Edits, deletions and reordering of performance criteria to reflect industry practice.	

Links

Companion Volume implementation guides are found in VETNet -

<https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=c7200cc8-0566-4f04-b76f-e89fd6f102fe>

Assessment Requirements for FNSSUP502 Supervise insurer liaison

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Performance Evidence

Evidence of the ability to:

- use risk profiling techniques
- implement trustee instructions
- develop and maintain documentation systems for insurance claims
- identify, source and interpret required information to process benefits for lump sum payments, death claims and disablement claims.

Note: If a specific volume or frequency is not stated, then evidence must be provided at least once

Knowledge Evidence

To complete the unit requirements safely and effectively, the individual must:

- describe the key features of organisational policy, objectives and guidelines relating to insurance arrangements and performance measures
- describe procedures for:
 - calculating and processing benefits
 - assessing insurance claims, and calculating and processing benefit payments
- outline documentation requirements for processing death and disability payments
- explain how regulations and legislation apply to payments
- describe the key steps in the internal, Superannuation Complaints Tribunal (SCT) and other external complaints processes
- identify compliance responsibilities for claims processing
- outline the key steps in tendering processes
- describe the organisation's risk management strategies.

Assessment Conditions

Assessment must be conducted in a safe environment where evidence gathered demonstrates consistent performance of typical activities experienced in the superannuation field of work and include access to:

- common office equipment, technology, software and consumables
- organisational financial records
- organisational policy and procedures.

Assessors must satisfy NVR/AQTF assessor requirements

Links

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