Claims Manager

At DPM, we support the financial wellbeing of medical professionals and we're great at what we do! We're not your typical financial services company. We're down to earth, collaborative, and genuinely care about our clients and each other.

We're looking for a Claims Manager to join our Insurance team on a 12-month contract. If you're organised, detail oriented, and take pride in delivering an exceptional client experience, this could be the perfect opportunity for you.

What's in it for you?

- Meaningful work: Play a key role in helping our clients navigate the insurance claim process during some of life's most challenging moments
- Flexible working: Enjoy a balanced work style, incorporating a blend of office and work from home
- Additional leave: Enjoy five additional paid leave days each year
- Great location: Work from our modern office located on St Kilda Rd, right next to the ANZAC Station and tram stop
- Professional growth: Gain experience within a highly respected financial services firm, with exposure to both client and insurance operations

Your role will include:

- Managing the end-to-end claims process, ensuring a smooth and timely experience for clients
- Be a first point of contact for claimants and their representatives, ensuring they have all the information and kept informed of the claim process, provide progress updates, managing their calls with empathy, compassion while being professional; addressing queries and offering clear explanations of claim-related requirements.
- Generating and reviewing claim documentation, and assisting clients with completion
- Providing regular updates to clients, consultants, and insurers (and keeping everyone in the loop!)
- Liaising with insurance companies to ensure claims are efficiently assessed and resolved

The full position description is available on the next page

You will be successful because you:

- Have experience in retail/ personal claims management or a similar role in the medical or insurance industry
- Have strong written and verbal communication skills and a genuine client service mindset
- Have a strong sense of empathy and compassion
- Are organised, methodical, and able to juggle multiple priorities whilst maintaining accuracy
- Have strong analytical and problem-solving skills with high attention to detail
- Enjoy working in a collaborative, service focused team environment
- Are proficient in Microsoft Office (Work, Excel, Outlook) and comfortable using systems and data bases
- Understand risk insurance products and processes

What we're looking for:

Someone who takes initiative communicates clearly, and genuinely cares about providing excellent service. You'll be the type of person who thrives on keeping things moving, building strong relationships, and ensures the best outcomes for clients.

Sound like you.

We'd love to hear from you! Send us your CV and a cover letter telling us why you're excited about this role and what you'd bring to our team. To be eligible you must be an Australian Citizen, Permanent Resident or have full work rights.

Claims Manager

Division:	Operations
Department:	Advice Operations
Manager/ Team Leader:	Operations Manager - Advice
Position description review:	October 2025

Purpose

The Claims Manager is responsible for the effective and timely management of the personal insurance claim process for DPM clients.

What does success look like for this role?

- The claims process is effectively and professionally managed from end to end
- Relationships with external insurance companies are maintained
- Administration systems, processes and procedures are regularly reviewed for improvement

Responsibilities

Claims Management

- Manage/oversee DPM claims processes and ensure claims are actioned including:
    - Generate and provide claims documentation and assist client in completion of documents
    - Provide timely claim updates to clients (strict KPI's apply)
    - Provide timely claim updates to relevant consultants
    - Critically evaluate and challenge, if required, claim decisions made by insurance company
    - Provide details of premiums paid to internal employees and clients upon request
    - Review and calculate claimant's pre-disablement income
    - Review financials of all claimants yearly to ensure that their benefits are justified
    - Provide supportive customer service to claimants
    - Maintain and generate required monthly and quarterly business reports

Client Relationship Support

- Build and maintain relationships with insurance companies by:
    - Liaising with claims assessors to ensure timely completion and best possible outcome of claims

Continuous Improvement

- Contribute to the development of Standard Operating Procedures
- Review and update standard letters and workflow systems as required

- Review administration systems i.e. work practices, processes and procedures in Xplan

General

- Contribute to the review and improvement of insurance claims administration systems i.e. work practices, processes and procedures
- Undertake filing, photocopying and scanning of documents as required
- Assist and support colleagues with workflow management, where applicable

Qualifications, Skills & Experience

- 3-4 years' experience in a retail/personal claims role (preferred) or in a medical industry role
- Excellent communication skills (written and verbal)
- Excellent time management, organisational and prioritisation skills
- Strong problem solving and analytical skills with high attention to detail
- Must have a genuine client service ethic and ability to work within a service orientated team environment
- Demonstrated ability to keep accurate records and produce accurate and timely reports
- A sound understanding of the risk insurance processes and products
- Sound computer literacy and IT aptitude – Proficient in the Microsoft Office Suite i.e. Word, Excel and Outlook