

OFFICE OF FINANCIAL AND INSURANCE REGULATION JOB VACANCY NOTICE

CLASS/LEVEL: Auditor Manager 13
DIVISION/SECTION: Enterprise Monitoring Division/Insurance Examinations Section
DEADLINE TO RESPOND: 11-5-08

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 INTERESTED APPLICANTS SHOULD SUBMIT A RESUME, COVER LETTER, DLEG APPLICATION, A ONE PAGE EXPLANATION ON THE DIFFERENCE BETWEEN STATUTORY AND GAAP ACCOUNTING AND A COPY OF COLLEGE TRANSCRIPTS (INTERNET BASED TRANSCRIPTS ARE NOT ACCEPTED) TO DLEG, OFFICE OF FINANCIAL AND INSURANCE REGULATION, HUMAN RESOURCES/BUDGET DIVISION/OFIR 08-70, P.O. BOX 30220, LANSING, MICHIGAN 48909 OR FAX TO (517) 335-1450 BY THE DEADLINE DATE.

|                         |                                                                                                                                                                                                                                                                            |                                                                                                                                 |
|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| COUNTY/LOCATION         | Lansing/Grand Rapids Region                                                                                                                                                                                                                                                |                                                                                                                                 |
| PAY RANGE               | \$23.64-\$34.39/hour                                                                                                                                                                                                                                                       |                                                                                                                                 |
| DESCRIPTION OF POSITION | Perform as Auditor-in-Charge (AIC) of the most complex insurance entities and assist in the examination of these entities for financial solvency and compliance with Michigan insurance laws, regulations, orders of the commissioner and statutory accounting principles. |                                                                                                                                 |
| EDUCATION               | Possession of a bachelor's degree with at least 24 semester (36 term) credits in accounting.                                                                                                                                                                               |                                                                                                                                 |
| EXPERIENCE              | Four years of professional experience auditing accounting, financial, and operations records equivalent to an Auditor, including two years equivalent to an Auditor P11 or one year equivalent to an Auditor 12 or Auditor Manager 12.                                     |                                                                                                                                 |
| SPECIAL REQUIREMENTS    |                                                                                                                                                                                                                                                                            |                                                                                                                                 |
| RESPOND TO              | Posting No.:                                                                                                                                                                                                                                                               | OFIR 08-70                                                                                                                      |
|                         | Address:                                                                                                                                                                                                                                                                   | DLEG, Office of Financial & Insurance Regulation, Human Resources/Budget Division/OFIR08-70, P. O. Box 30220, Lansing, MI 48909 |
|                         | E-Mail Address:                                                                                                                                                                                                                                                            |                                                                                                                                 |
|                         | Fax:                                                                                                                                                                                                                                                                       | (517) 335-1450                                                                                                                  |

The State of Michigan is an Equal Opportunity Employer  
 Civil Service Rule 1-7 states: All persons offered employment in the classified service are required to submit to and pass a pre-employment drug test as a condition of employment

**This is an announcement of a position vacancy and does not constitute an offer of**

**employment.**

|                                     |
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| <b>1. Position Code</b><br>AUDTMGR2 |
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**State of Michigan**  
**Department of Civil Service**  
 Capitol Commons Center, P.O. Box 30002  
 Lansing, MI 48909

Federal privacy laws and/or state confidentiality requirements protect a portion of this information.

**POSITION DESCRIPTION**

This form is to be completed by the person that occupies the position being described and reviewed by the supervisor and appointing authority to ensure its accuracy. It is important that each of the parties sign and date the form. If the position is vacant, the supervisor and appointing authority should complete the form.

This form will serve as the official classification document of record for this position. Please take the time to complete this form as accurately as you can since the information in this form is used to determine the proper classification of the position. **THE SUPERVISOR AND/OR APPOINTING AUTHORITY SHOULD COMPLETE THIS PAGE.**

|                                                                                                            |                                                                                                      |
|------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <b>2. Employee's Name (Last, First, M.I.)</b>                                                              | <b>8. Department/Agency</b><br>LABOR & ECONOMIC GROWTH                                               |
| <b>3. Employee Identification Number</b>                                                                   | <b>9. Bureau (Institution, Board, or Commission)</b><br>OFFICE OF FINANCIAL AND INSURANCE REGULATION |
| <b>4. Civil Service Classification of Position</b><br>AUDITOR MANAGER 13                                   | <b>10. Division</b><br>ENTERPRISE MONITORING DIVISION                                                |
| <b>5. Working Title of Position (What the agency titles the position)</b><br>AUDITOR-IN-CHARGE             | <b>11. Section</b><br>INSURANCE EXAMINATIONS SECTION                                                 |
| <b>6. Name and Classification of Direct Supervisor</b><br>KRISTIN HYNES, AUDITOR MANAGER 14                | <b>12. Unit</b><br>EXAMINATIONS SECTION                                                              |
| <b>7. Name and Classification of Next Higher Level Supervisor</b><br>ROBERT LAMBERJACK, AUDITOR MANAGER 15 | <b>13. Work Location (City and Address)/Hours of Work</b><br>8:00 A.M. - 5:00 P.M., MONDAY - FRIDAY  |

**14. General Summary of Function/Purpose of Position**

Perform as Auditor-in-Charge (AIC) of the most complex insurance entities and assist in the examination of these entities for financial solvency and compliance with Michigan insurance laws, regulations, orders of the commissioner and statutory accounting principles.

**For Civil Service Use Only**

15. Please describe your assigned duties, percent of time spent performing each duty, and explain what is done to complete each duty.

List your duties in the order of importance, from most important to least important. The total percentage of all duties performed must equal 100 percent.

Duty 1

General Summary of Duty 1

% of Time 30

Auditor-in-Charge (AIC)

**Individual tasks related to the duty.**

- As AIC, directs auditors in a complex on-site work environment and is responsible for evaluating auditor performance, production and behavior. Perform as AIC of the on-site examination of the most complex insurance entities, with the highest risk to determine their financial solvency and compliance with Michigan insurance laws, regulations, orders of the commissioner and statutory accounting principles. Responsible for presenting findings and recommendations to management and for submitting a completed report of examination to the regional supervisor.

Duty 2

General Summary of Duty 2

% of Time 45

Assisting Insurance Auditor

**Individual tasks related to the duty.**

- May be designated as assistant AIC responsible for managing auditors and coordinating the review and evaluation of various projects of an examination and for producing the completed report of examination. Assist in the on-site examination of insurance entities when not designated as AIC to determine their financial solvency and compliance with Michigan insurance laws, regulations, orders of the commissioner and statutory accounting principles.

Duty 3

**General Summary of Duty 3**

**% of Time** 25

Supervisory Insurance Auditor

**Individual tasks related to the duty.**

- Act on behalf of regional supervisor in his/her absence. Helps interpret policies and procedures. Aids the regional supervisor by guiding lower-level auditors and by contributing to division's maintenance of professionalism, innovativeness and responsiveness to examination techniques. Assist with scheduling and assignments. Participate in the career development and training of insurance auditors, revising examination procedures, developing seminars/conferences, teaching courses and various regulatory related projects. Advise management of pertinent problems and recommend appropriate supervision plans. Follow up on recommended corrective actions to determine if appropriate action is taken by entity management. May be assigned to review reports of examination and special projects such as updating examination procedures and training manuals.

Duty 4

**General Summary of Duty 4**

**% of Time** \_\_\_\_\_

**Individual tasks related to the duty.**

-

Duty 5

**General Summary of Duty 5**

**% of Time** \_\_\_\_\_

**Individual tasks related to the duty.**

- 

Duty 6

**General Summary of Duty 6**

**% of Time** \_\_\_\_\_

**Individual tasks related to the duty.**

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16. Describe the types of decisions you make independently in your position and tell who and/or what is affected by those decisions. Use additional sheets, if necessary.

Implement an exceptional regulatory recommendation or corrective action.

17. Describe the types of decisions that require your supervisor's review.

Formal actions taken against an examined company. Outstanding issues with an examined entity, after making a reasonable effort to research the matter. Developing a new policy.

18. What kind of physical effort do you use in your position? What environmental conditions are you physically exposed to in your position? Indicate the amount of time and intensity of each activity and condition. Refer to instructions on page 2.

Field examiners are temporarily assigned to various locations throughout Michigan for one or two weeks up to several months. Their duties and tasks are performed in temporary office facilities provided by the financial services entity being examined and include considerable sitting, occasional standing and walking, limited lifting, periodic microcomputer usage and normal office routines. Position requires daily in-state travel by automobile and out-of-state travel usually by air. Overnight travel is required.

19. List the names and classification titles of classified employees whom you immediately supervise or oversee on a full-time, on-going basis. (If more than 10, list only classification titles and the number of employees in each classification.)

| <u>NAME</u>                          | <u>CLASS TITLE</u> | <u>NAME</u> | <u>CLASS TITLE</u> |
|--------------------------------------|--------------------|-------------|--------------------|
| Assigned auditors                    |                    |             |                    |
| *Provide input on annual evaluation. |                    |             |                    |

20. My responsibility for the above-listed employees includes the following (check as many as apply):

- |                                                             |                                                                       |
|-------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> Complete and sign service ratings. | <input checked="" type="checkbox"/> Assign work.                      |
| <input type="checkbox"/> Provide formal written counseling. | <input checked="" type="checkbox"/> Approve work.                     |
| <input type="checkbox"/> Approve leave requests.            | <input checked="" type="checkbox"/> Review work.                      |
| <input type="checkbox"/> Approve time and attendance.       | <input checked="" type="checkbox"/> Provide guidance on work methods. |
| <input type="checkbox"/> Orally reprimand.                  | <input checked="" type="checkbox"/> Train employees in the work.      |

21. I certify that the above answers are my own and are accurate and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NOTE: Make a copy of this form for your records.**

**TO BE COMPLETED BY DIRECT SUPERVISOR**

**22. Do you agree with the responses from the employee for Items 1 through 20? If not, which items do you disagree with and why?**

I agree.

**23. What are the essential duties of this position?**

Perform as AIC of the on-site examination of the most complex insurance entities and assist in the examination of insurance entities. Responsible for the examination of entities identified as problems and for implementing and monitoring resolution of problem situations. Responsible for on-site training and identification of skill deficiencies of lower level auditors. Responsible for back-up supervisory duties in the absence of the regional supervisor.

**24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.**

New position.

**25. What is the function of the work area and how does this position fit into that function?**

The Examinations Section performs examinations of insurance companies and other regulated entities at their home office to verify the completeness and accuracy of data submitted to OFIS in financial statement filings, determine that appropriate methods of accounting are used, and determine compliance with Michigan insurance laws, rules and regulations. The process reveals the solvency of an insurer through examination of the entity's financial books and records. A report of examination is issued at the conclusion of each examination that details the examiners' findings and recommendations, and any adjustments to surplus.

26. In your opinion, what are the minimum education and experience qualifications needed to perform the essential functions of this position.

**EDUCATION:**

Possession of a Bachelor's degree with not less than 24 semester hours or 36 term credits in accounting.

**EXPERIENCE:**

Three to five years of insurance examination experience with at least two years as an Auditor 11 or one year of experience as an Auditor 12.

**KNOWLEDGE, SKILLS, AND ABILITIES:**

- Thorough knowledge of statutory accounting principles applicable to the insurance industry and generally accepted examination standards.
- Ability to communicate in a clear and concise manner, both verbally and in writing.
- Ability to use a personal computer and familiarity with word processing and spreadsheet software.
- Completion of courses offered by the Society of Financial Examiners is recommended and encouraged.

**CERTIFICATES, LICENSES, REGISTRATIONS:**

None are required, however, the designation of certified public accountant, accredited financial examiner or certified financial examiner is desirable.

*NOTE: Civil Service approval of this position does not constitute agreement with or acceptance of the desirable qualifications for this position.*

27. *I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

**TO BE FILLED OUT BY APPOINTING AUTHORITY**

28. Indicate any exceptions or additions to the statements of the employee(s) or supervisor.

29. *I certify that the entries on these pages are accurate and complete.*

\_\_\_\_\_  
Appointing Authority's Signature

\_\_\_\_\_  
Date