

WORKERS' COMPENSATION REPRESENTATIVE

JOB DESCRIPTION

Classification Responsibilities: A Workers' Compensation Representative is responsible for all aspects of claims management required by state statutes and the City of Mesa's self-insured, self-administrative programs. The position's functions include: adjudicating workers' compensation claims including, but not limited to determining compensability; authorizing or denying medical treatment; handling litigation; Loss of Earning Capacity (LEC); assigning rehabilitation nurses, private investigators, and vocational specialists; and filing notices with the Industrial Commission of Arizona (ICA). This position is responsible for calculating workers' compensation indemnity such as Temporary Total Disability (TTD) or Temporary Partial Disability (TPD), and permanent awards such as Permanent Total Disability (PTD) or Permanent Partial Disability (PPD); approving medical bills for payment; and reporting expenditures through reports to administration and excess workers' compensation carriers. This class is supervised by the Safety Administrator through meetings, reports, conferences, and overall results achieved.

Distinguishing Features: This class assists injured workers, physicians, and other interested parties; explains workers' compensation regulations and related City of Mesa policies and procedures; and resolves a variety of problems. This class works independently in the management and direction of simple to the most complex workers' compensation claims and makes difficult decisions concerning medical and workers' compensation benefits. This class is supervised by the Safety Administrator through meetings, reports, conferences, and overall results achieved. This class is FLSA exempt - Administrative.

QUALIFICATIONS

Employee Values: All employees of the City of Mesa are expected to uphold and exhibit the City's shared employee values of Knowledge, Respect, and Integrity.

Minimum Qualifications Required. Any combination of training, education, and experience equivalent to graduation from an accredited college or university with an Associate's degree. Considerable (3 - 5 years) experience in workers' compensation claims processing/adjudication as a workers' compensation representative/adjuster. Good (1 - 3 years) experience working with Arizona Workers' Compensation statutes, and state and federal regulations pertaining to workers' compensation claims handling.

Special Requirements. None.

Substance Abuse Testing. None.

Preferred/Desirable Qualifications. None.

ESSENTIAL FUNCTIONS

Communication: Effectively communicate both verbally and in writing with other City employees, attorneys, nurses, vocational specialists, and other outside contacts in order to gather information necessary to adjudicate a workers' compensation claim.

Manual/Physical: Sorts, separates, and arranges, files, or distributes incoming mail, notices, claims, and letters in some prescribed manner to prepare data for input into the on-line system. Operates a variety of standard office equipment such as a photocopier, calculator, and personal computer (PC). Enters data into a terminal, PC, or other keyboard device.

Mental: Calculates time lost payments for injured workers based on workers' compensation statutes and Industrial Injury Program guidelines. Comprehends and makes inferences from written material (such as letters and reports from doctors) in order to authorize treatments, close cases, prepare awards, and accept or deny claims. Prioritizes own work daily (examples: which claims should be first, should compensation be calculated, reports to read and respond to, etc.). Continues education through involvement with groups, associations, the ICA and other workers' compensation professionals.

Knowledge/Skills/Abilities:

Knowledge of:

Arizona workers' compensation laws and procedures;
financial auditing procedures and industrial safety concepts;
claims management, knowledge of best practices;
the practices and procedures of claims evaluation, including claims investigation and claims settlement techniques; and
the medical, insurance, and legal terminology related to the causes and treatments of occupational injuries and diseases.

Skill in:

operating a calculator and personal computer;
counseling employees; and
resolving complaints and disputes.

Ability to:

perform confidential and sensitive assignments;
provide thoughtful and thorough analyses;
advise claimants of benefits and assist them in the completion of proper forms;
serve as reserve specialist determining future costs on all open claims;
summarize pertinent facts and recommend administrative action;
serve as a resource person within the Safety Services office;
work with long-term disability carriers and claimants processing proper applications;
interpret contract provisions of insurance plans and investigate and resolve procedural problems;
proficiently perform computerized word processing, comprehension, summarizing, and writing/editing;
compile accurate reports and statistical data on workers' compensation activities, and recommend appropriate methods of improvement; and
establish and maintain effective working relationships with personnel, employees, insurance carriers, and providers of benefits services.

The duties listed above are intended only as general illustrations of the various types of work that may be performed. Specific statements of duties not included does not exclude them from the position if the

work is similar, related, or a logical assignment to the position. Job descriptions are subject to change by the City as the needs of the City and requirements of the job change.

Revised 3/17

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JOB FCTN-ADM

INCREMENTS 62-200

PAY GRADE: 52

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