

WORKERS' COMPENSATION CLAIMS PROCESSING SUPERVISOR

DEFINITION

Supervises and participates in the claims processing activities of the Workers' Compensation Branch of the Risk Management and Insurance Services Division.

TYPICAL DUTIES

Supervises claims processing activities of the Workers' Compensation Branch and/or Workers' Compensation Claims Processing Specialists.

Assists in developing and administering policies and procedures, evaluating claims for payment of workers' compensation benefits, and performing a combination of the following duties:

- Supervises workers' compensation claims processing including obtaining, checking, recording, and evaluating information related to employees' work history.
- Reviews the California Labor Code provisions pertaining to workers' compensation Rules and regulations of the California Division of Industrial Accidents and Worker's Compensation Appeals Board for adherence.
- Utilizes the claims systems of third party claims administrators, insurance carriers and insurance brokers to reference claims information.
- Evaluates information and reports relative to claims payments and analyzes and makes recommendations on pending State legislation.
- Supervises and coordinates the activities of the Fraud Abatement and Reduction Effort task force, including acting as a liaison with the Los Angeles District Attorney's office and the State Department of Insurance.
- Addresses questions about workers' compensation programs, and informs employees of their rights and benefits under California workers' compensation laws.
- Compiles and analyzes claims data and makes recommendations for policy, procedural, legal, and rule changes.
- Makes recommendations for changes in District bargaining unit agreements relative to workers' compensation and act of violence leaves and benefits.
- Gathers information on accident causes, reports on hazardous or dangerous conditions and actions on District property, and coordinates with the Office of Environmental Health and Safety to abate the hazards.
- Assists in maintaining on-going oversight of the third-party claims administrator that includes, but is not limited to, questioning and resolving discrepancies, monitoring of medical treatment, and reviewing case reserves for adequacy.
- Provides courteous and expeditious customer service to administrators, employees, and the general public.
- Reviews and evaluates settlement authority requests, and makes recommendations for approval or revision.
- Reviews, evaluates, and approves vocational rehabilitation plans.
- Acts as a liaison to the Integrated Disability Management Branch as required.
- May assist in restitution and subrogation activities.
- May review medical bills, disability benefits, and payroll records to ensure compliance and accuracy of the third party administrator.
- May confer with and assist defense attorneys and may attend mandatory settlement

conferences, trials, and hearings.
Performs related duties as assigned.

DISTINGUISHING CHARACTERISTICS AMONG RELATED CLASSES

A Workers' Compensation Claims Processing Supervisor supervises and participates in the claims processing activities of the Workers' Compensation Branch.

A Workers' Compensation Claims Coordinator administers the activities of the workers' compensation or disability management programs, oversees the processing of claims for payment of workers' compensation benefits, and coordinates activities with the third party administrator and other District departments.

A Workers' Compensation Claims Processing Specialist participates in the claims processing activities of the Workers' Compensation Branch.

SUPERVISION

General supervision is received from a OCIP Coordinator. Direct supervision is exercised over Workers' Compensation Claims Processing Specialists.

CLASS QUALIFICATIONS

Knowledge of:

Pertinent and current California Labor Code provisions pertaining to workers' compensation
Rules and regulations of the California Division of Industrial Accidents and Workers'
Compensation Appeals Board
Standard claims evaluation techniques, references, and settlements
Medical and legal terminology related to workers' compensation claims processing
Various software and computer applications, including Microsoft Outlook, Word, PowerPoint,
and Excel

Ability to:

Analyze, interpret, and apply laws, rules, and regulations pertaining to workers' compensation
and occupational health and safety
Analyze individual claims and use judgment and tact in recommending or exercising
appropriate action
Write clear, comprehensive, and accurate reports and correspondence
Interpret statistics and make accurate arithmetical computations
Work effectively with District personnel and the public
Operate an office computer
Effectively communicate orally and in writing
Supervise effectively
Use computers with Microsoft operating systems and word processing, database, and spread
sheet software

ENTRANCE QUALIFICATIONS

Education:

Graduation from a recognized college or university with a bachelor's degree, preferably supplemented by courses in workers' compensation; risk management; public, business, or school administration; finance; or law. Additional qualifying experience may be substituted for the required education on a year-for-year basis provided that graduation from high school or evidence of equivalent education proficiency is met. An Associate of Risk Management (ARM), Associate in Claims (AIC), Certified Professional in Disability Management (CPDM) or Certified Professional in Worker's Compensation (CPWC) designation is preferable.

Experience:

Three years of experience as a workers' compensation claims adjuster, which must include at least two year of experience since February 2003 regarding workers' compensation claims covered by California law.

or

Three years of experience performing duties that require interpretation, explanation, and application of rules and regulations applicable to workers' compensation, which must include at least two year of experience since February 2003 regarding workers' compensation claims covered by California law.

Special:

A valid California Driver License and the availability of private transportation or the ability to utilize an alternative method of transportation
A Self-Insurance Administrator's Certificate issued by the State of California is preferable.

The class description is not a complete statement of essential functions, responsibilities, or requirements. Entrance requirements are representative of the minimum level of knowledge, skill, and /or abilities. To the extent permitted by law, management retains the discretion to add or change typical duties of a position at any time, as long as such addition or change is reasonably related to existing duties.

Revised
07-02-20
CA