

## CLASSIFICATION SPECIFICATION

<b>FLSA:</b>	<b>NEXP</b>	<b>Job Code:</b>	<b>ACV17003</b>
<b>Job Class Code:</b>	<b>410</b>	<b>Salary Schedule:</b>	<b>AREG</b>
<b>EEO Category:</b>	<b>02</b>	<b>Grade:</b>	<b>15</b>
<b>Workers Comp Code:</b>	<b>8742</b>		

<b>Job Code Established:</b>	<b>03/23/95</b>	<b>Effective Date:</b>	
<b>Job Code Revised:</b>		<b>Effective Date:</b>	

**JOB CODE SERIES:** Workers' Compensation Insurance Series

**JOB CODE TITLE:** WORKERS' COMPENSATION INSURANCE CLAIMS SPECIALIST I

**HRIS TITLE:** WKRS COMP CLMS SPCT I

**CHARACTERISTICS OF THE CLASS:** Works under general supervision and exercises some independent judgment within established parameters, policies and procedures. Authority to initiate contact with claimant, employer, attorneys and/or medical providers; to recommend approval or rejection of claims; to approve or reject requests for change of doctor, and requests to leave the state. No unusual work conditions. Performs entry level professional work of average difficulty in the processing of Workers' Compensation Insurance claims. Review and processes claims submitted by private carriers, and claims from state service employees.

**EXAMPLES OF DUTIES:** Reviews, analyzes and monitors Workers' Compensation claims to insure timely processing. Establishes or approves average monthly wage. Authorizes compensation and medical benefits. Sets reserves. Verifies payments from other parties. Schedules independent medical exams, when needed. Reviews medical reports to determine claimant status changes. Determines amounts payable for facial disfigurement and/or loss of teeth. Approves/disapproves average monthly wage recommendations made by insurance carries or self-insured employers. Makes payments in accordance with fee schedule. Issues nunc pro tunc orders. Assists in conducting claims investigations. Performs related work as required. Reviews and codes all billings.

**WORK RESULTS/PRODUCTS:** Claims properly and timely processed, compensation and medical benefits authorized; change of doctor requests approved or rejected; petitions to re-open cases reviewed; requests for hearings and/or leave the state processed.

### **KNOWLEDGE, SKILLS AND ABILITIES:**

**Knowledge of:** workers' compensation insurance laws, rules, regulations and applicable Court of Appeals opinions; insurance and medical terminology; medical fee schedules; business English and mathematics; office procedures; automated claims management systems.

**Skill/Ability to:** communicate verbally and in writing; interact with claimants, carriers, medical providers, attorneys, employers, claimants' dependents and other interested parties; evaluate claim documentation paperwork; interpret and apply pertinent laws and regulations; process claims within established timeframes; schedule and prioritize work activities within established timeframes.