

STATE OF ARIZONA JOB CODE CLASSIFICATION SPECIFICATION

FLSA:	EXP	Job Code:	ACV32873
Job Class Code:	410	Salary Schedule:	AREG
EEO Category:	2	Grade:	22
Workers Comp Code:	8742		

Job Code Established:	7/19/06	Effective Date:	3/11/06
Job Code Revised:		Effective Date:	

JOB CODE SERIES: Risk Management Claims Adjuster Series

JOB CODE TITLE: RISK MANAGEMENT CLAIMS ADJUSTER SENIOR

HRIS TITLE: RISK MGT CLMS ADJTR SR

CHARACTERISTICS OF THE JOB: The Claims Adjuster Senior Level is distinguished from the Journey Level by the level of complexity and type of issues, lawsuits and claims assigned, and the requisite levels of independence and claims settlement authority necessary to settle such cases. Under general direction, this classification independently performs highly analytical tasks in response to complex claims and lawsuits against the State, including its agencies, boards, commissions, universities and county court systems. Members of this class may supervise Entry or Journey level adjusters. Claims and lawsuits may include:

Employment claims including ADA and EEOC; Highway design and maintenance. Medical malpractice. Child Protective Service issues, including foster parents' liability claims and failure to supervise. Workers Compensation claims filed by employees. Negligence claims against the State and its employees in the course and scope of their employment. Damage to state property and assets. Automobile physical damage and/or liability. Inmate civil rights. Property, fidelity and/or general liability claims, and excessive use of force.

EXAMPLES OF DUTIES: Individual positions may be responsible for some or all of the listed tasks or other related tasks. Supervises the work of Entry and/or Journey level adjusters. Receives, reviews, prepares and processes information and documentation related to Workers Compensation. Approves and authorizes appropriate medical care for claimants. Assigns, monitors, supervises, and evaluates activities of other adjusters and/or investigators partnering in the adjustment of claims. Investigates, evaluates, and analyzes tort liability, civil rights, and property claims against the State and determines appropriate resolution of claims. Evaluates, analyzes and establishes the degree of negligence of tort claims under the State's pure comparative negligence law. Negotiates settlements independently with claimants and/or his counsel. Negotiates settlements in conjunction with defense counsel on litigated claims. Identifies, investigates, and pursues subrogation recoveries from negligent third parties, their attorneys and insurance companies. Identifies loss exposures to the State and communicates with appropriate State agency personnel and Risk Management Loss Prevention. Establishes individual and accurate claim reserves. Consults with and advises agency management and key personnel of losses that may impact their operations. Provides assistance and technical advice to state agency staff and the public relative to claims reporting requirements. Maintains claim files and provides file documentation as dictated by policies and procedures. Maintains accurate, current, and complete claim information databases. Coordinates claims with the Office of the Attorney General as needed. Determines appropriate resolution of claim. Manages claims in litigation with the Attorney General's Office and outside counsel. Conducts litigation management meetings with counsel to establish a litigation plan. Reviews and evaluates reports from counsel. Conducts and/or participates in settlement conferences. Appears and Provides testimony on behalf of the State in legal proceedings as required. Coordinates investigation and settlement of claims with insurance companies. Notifies, updates, and produces status reports for reinsurance companies on claims and lawsuits in excess of self-insurance retention level.

WORK CONDITIONS:

Work is generally performed in an office setting. There may be occasional travel to accident sites, other offices and agencies including claimants' homes, attorneys' offices and courts.

KNOWLEDGE, SKILLS, & ABILITIES (KSAs):

Knowledge of: Workers Compensation laws and their administration. Various types of insurance, insurance contracts and related law. Administrative policies, practices and procedures Occupational, safety and health regulations. Research methods Insurance contracts and related law. Insurance claims processing. Alternative Dispute Resolution. Standard automobile and property material damage and claims remediation. Construction, repair and appraisals. Insurance and/or risk management information systems. Administrative policies, practices and procedures. Occupational, safety and health regulations. Knowledge of ergonomics, proper body mechanics, workflow, and work station design.

Skill/Ability to: Conduct a comprehensive investigation to determine coverage, liability, and damage evaluation. Plan, organize, interpret and analyze police reports and automobile appraisals. Prepare and/or review insurance investigation reports to reach logical conclusions and make recommendations. Investigate, secure, document, and evaluate facts surrounding claims and lawsuits. Negotiate claim settlements with claimants, attorneys, and/or third parties. Work quickly and effectively. Maintain composure in emotionally charged situations. Be flexible during negotiations. Provide excellent customer service. Maintain excellent interpersonal relations. Communicate effectively through oral, written, and electronic communications. Interpret and apply statutes, rules, and policies and procedures of State government, the State's universities, and county court systems. Learn and understand the legal rules of civil procedure in both Federal and State lawsuits. Learn on-line Risk Management Information System (RIMS)

SPECIAL SELECTION FACTORS Some positions may require possession of and ability to maintain a valid Arizona driver's license appropriate to the assignment. Other Specialty area(s) will be announced during the recruitment process.