

# CITY OF SIMI VALLEY

## **WORKERS' COMPENSATION ADJUSTER I WORKERS' COMPENSATION ADJUSTER II**

*Class specifications are intended to present a descriptive list of the range of duties performed by employees in the class. Specifications are not intended to reflect all duties performed within the job.*

### **SUMMARY DESCRIPTION**

Under supervision (Workers' Compensation Adjuster I) or general supervision (Workers' Compensation Adjuster II), performs a variety of professional duties in support of the City's Workers' Compensation Division including reviewing, examining, investigating, and analyzing workers' compensation claims. Reviews claims documentation for compensability and subrogation issues; computes indemnity benefits and relevant payments; provides information and assistance to City personnel, injured employees, claims administrators, and medical and legal professionals; and, performs related duties as assigned.

### **DISTINGUISHING CHARACTERISTICS**

**Workers' Compensation Adjuster I** – This is the entry-level class in the Workers' Compensation Adjuster series. This class is distinguished from the Workers' Compensation Adjuster II by the performance of the more routine tasks and duties assigned to positions within the series. Since this class is typically used as a training class, employees may have only limited or no directly related work experience.

**Workers' Compensation Adjuster II** – This is the full journey level class within the Workers' Compensation Adjuster series. Employees within this class are distinguished from the Workers' Compensation Adjuster I by the performance of the full range of duties as assigned including. Employees at this level receive only occasional instruction or assistance as new or unusual situations arise, and are fully aware of the operating procedures and policies of the work unit. Positions in this class are flexibly staffed and are normally filled by advancement from the I level, or when filled from the outside, have prior experience.

### **REPRESENTATIVE DUTIES**

*The following duties are typical for this classification. Incumbents may not perform all of the listed duties and/or may be required to perform additional or different duties from those set forth below to address business needs and changing business practices.*

1. Process, review, examine, investigate, and analyze workers' compensation claims.
2. Review injury reports and coordinate field investigations for questionable claims.
3. Interact with injured employees to ensure awareness and understanding of the workers' compensation process, requirements, and entitlements.
4. Prepare and issue notices in accordance with mandated requirements and regularly review and stay abreast of applicable laws that may impact how claims are processed.
5. Establish claim reserve levels by estimating the cost of each assigned claim; monitor reserves and update amounts as necessary.

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6. Coordinate medical treatment for injured employees and provide information to treating physicians and medical providers regarding employee's medical history, health issues, and job requirements.
7. Identify subrogation potential and pursue the process of reimbursement.
8. Serve as a liaison between medical providers, employees, legal professionals, and City Departments. Verify return to work and/or inform departments of an injured employee's work restrictions and coordinate appropriate accommodations.
9. Review and interpret medical reports to ensure that the appropriate American Medical Association (AMA) guidelines have been applied when reporting disability, impairment, and apportionment.
10. Compare and reconcile claim records with City payroll records to ensure timely and accurate benefit payments; retrieve workers' compensation usage information from the financial system, review timesheets, and resolve discrepancies; calculate and adjust supplemental usage of leave time and holiday entitlements.
11. Process records for authorization in accordance with the City's best practices; ensure all medical treatment provided is in accordance with the medical treatment utilization schedule approved by the State of California.
12. Communicate with defense attorneys regarding litigated cases; make recommendations regarding proposed strategies for claim resolution.
13. Act as hearing representative on non-litigated claims; file and serve documents prepared in response to court orders for information.
14. Prepare legal documents for submission to the Workers' Compensation Appeals Board, attend Board hearings, and respond to requests for clarification, as necessary.
15. Analyze, compute, and process indemnity payments. Audit incoming invoices for accuracy and process payments.
16. Review and negotiate outstanding liens with lien claimants; review for validity.
17. Coordinate with consultants when conducting AOE/COE (Arising Out of Employment/in the Course of Employment) investigations.
18. Assist with the Request for Proposal (RFP) process for contracted services; participate in researching, interviewing, and selecting outside vendors.
19. Develop and maintain internal systems for data collection and entry, financial analysis, and report generation; create and update spreadsheets, logs, and diary as necessary.
20. Attend and participate in staff meetings and keep supervisor informed of status on all assigned cases and plan of action. Stay abreast of new trends, pending legislation, and case law related to workers' compensation.
21. Review and process all incoming mail; scan and distribute reports and correspondence.
22. Assist in supervising volunteers and clerical support staff.

23. Perform related duties as required.

### **QUALIFICATIONS**

*The following generally describes the knowledge and ability required to enter the job and/or be learned within a short period of time in order to successfully perform the assigned duties.*

#### **Knowledge of:**

Relevant Federal, State and local laws, codes and regulations governing workers' compensation. Requirements, practices, rules of evidence and procedures of the Workers' Compensation Appeals Board.  
American Medical Association (AMA) guidelines as they apply to workers' compensation.  
Medical and technical terminology used in industrial injury cases.  
Methods and techniques of data collection, research, and analysis.  
Principles and procedures of report preparation.  
Basic principles and practices of analytical, statistical and financial report preparation.  
Principles of business letter writing.  
Principles and practices of record keeping and records management.  
Principles and procedures of financial record keeping and reporting.  
Modern office procedures and methods including computer equipment and supporting applications.  
English usage, spelling, grammar, and punctuation.

#### **Ability to:**

Conduct research and analyze information.  
Negotiate issues and settlements.  
Identify issues and process claims in a timely fashion within the timeframes prescribed by law.  
Prepare accurate and concise notices for injured workers regarding their claim.  
Organize and prioritize work to meet deadlines.  
Gather, organize, compile and summarize data.  
Create and maintain a variety of ledgers, logs, records, and reports.  
Prepare a variety of clear and concise reports, documents, and memoranda.  
Promptly respond to requests and inquiries.  
Prepare and maintain accurate financial records and documents.  
Operate office equipment including computers and supporting word processing and spreadsheet applications.  
Adapt to changing technologies and learn functionality of new equipment and systems.  
Interpret and apply pertinent federal, state and local codes, laws, regulations, and AMA guidelines.  
Attend and participate in board hearings, conferences, seminars and training sessions.  
Understand and carry out oral and written instructions.  
Communicate clearly and concisely, both orally and in writing.  
Establish and maintain effective working relationships with those contacted in the course of work.

**Education and Experience Guidelines** - *Any combination of education and experience that would likely provide the required knowledge and abilities is qualifying. A typical way to obtain the knowledge and abilities would be:*

### **Workers' Compensation Adjuster I**

#### **Education/Training:**

Equivalent to the completion of the twelfth grade supplemented by college level coursework in workers' compensation, insurance, business, or a related field.

#### **Experience:**

One year of responsible experience adjusting workers' compensation claims is desirable.

**Workers' Compensation Adjuster II**

**Education/Training:**

Two years of college coursework in workers' compensation, insurance, business, or a related field. A Bachelor's degree with major course work in workers' compensation, insurance, business, or a related field is highly desirable.

**Experience:**

Two years of experience comparable to a Workers' Compensation Adjuster I with the City of Simi Valley. Experience in a self-insured, public sector environment is highly desirable.

**License or Certificate:**

Possession of a valid State of California Self-Insurance Plan Certificate within one year of hire.

**PHYSICAL DEMANDS AND WORKING ENVIRONMENT**

*The conditions herein are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential job functions.*

**Environment:** Standard office setting; exposure to computer screens.

**Physical:** Sufficient physical ability to work in an office setting; sit for prolonged periods of time; operate office equipment.

**Vision:** See in the normal visual range with or without correction; vision sufficient to read computer screens and printed documents.

**Hearing:** Hear in the normal audio range with or without correction.

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