CLASS DESCRIPTION Class Code 2040 Management-District

CLAIMS COORDINATOR

DEFINITION

Manages, coordinates, and oversees the claims processing and claims management activities of a workers' compensation, disability management (return to work or reasonable accommodation), or liability unit in the Division of Risk Management and Insurance Services; recommends and administers policies and procedures; oversees the processing of requests for reasonable accommodation or return to work, claims for payment of workers' compensation or liability benefits; and coordinates activities with the third party administrator and other District departments.

TYPICAL DUTIES

Plans, organizes, and supervises the day-to-day activities and oversees the performance of employees in a unit within the Division of Risk Management and Insurance Services.

Coordinates and audits Third Party Administrator's (TPA) files, practices, and claims administration; and assists in maintaining on-going oversight.

Oversees the coordination and communication of information related to employee, student or third party injury incidents, accident prevention, reasonable accommodation, and return to work efforts and remedial measures with District offices, TPA, and other agencies.

Coordinates and assists the Office of the Inspector General (OIG) and notifies OIG of investigative needs.

Develops and implements District-wide workers' compensation, disability management, and liability management training programs.

Establishes criteria used in the evaluation and settlement of workers' compensation and liability claims, and oversees implementation to ensure best practice guidelines are met.

Reviews and evaluates claims processing and payment activity, and reports, settlement authorization requests; and recommends the settlement of claims within defined levels.

Provides technical support for administrators, employees, and employee organization representatives regarding workers' compensation, disability management, liability and District policies, procedures, and programs.

Develops in-service workshops, seminars, and other training strategies for District personnel related to workers' compensation, return to work, reasonable accommodation procedures, and liability claim policies.

Reviews statutory and regulatory changes and court decisions in order to make recommendations for appropriate administrative response.

Compiles and analyzes claims data, and make recommendations for policy, procedural, legal, and rule changes.

Evaluates information on accident causes, reports on hazardous or dangerous conditions on District property, and notifies the Office of Environmental Health and Safety (OEHS) of situations for possible remedial action.

Attends meetings, hearings, mandatory settlement conferences, and trials.

Trains and evaluates workers' compensation, disability management, and liability staff.

Acts as a liaison to other units as required.

Assists in restitution/subrogation activities.

May review and approve vocational rehabilitation plans and expenditures for routine accommodations.

Performs related duties as assigned.

DISTINGUISHING CHARACTERISTICS AMONG RELATED CLASSES

A Claims Coordinator manages the activities and employees of a workers' compensation, disability management, or liability program.

The Director of Integrated Disability Management plans, implements, and administers a wide range of disability management programs for the District.

The Director of Insurance directs, plans, implements, and administers a wide range of insurance and claims activities for the District.

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

SUPERVISION

General direction is received from the Director of Insurance or the Director of Integrated Disability Management. General supervision is exercised over lower level risk management personnel.

CLASS QUALIFICATIONS

Knowledge of:

Principles and practices, legal statutes, civil procedures, administrative regulations, and evaluation techniques relating to workers' compensation, disability management, claims adjusting, investigation, self insurance, third party administered programs, and administrative procedures.

California statues pertaining to workers' compensation, Insurance Code, Government Code, Education Code, and the Code of Civil procedure

Rules and regulations of the California Division of Industrial Accidents, Workers'
Compensation Appeals Board, Office of Self-Insured Plans, and federal, State, and municipal courts

Standard claims evaluation techniques

Medical and technical terminology related to workers' compensation, disability management, and liability claims

Operations and functions of a public agency

Principles of supervision, training, employee evaluations, and employee relations

Vocational rehabilitation, return to work, reasonable accommodation, and related practices

Federal and state laws related to family leaves and disability issues

Ability to:

Analyze, interpret, and apply laws, rules, regulations, policies and procedures pertaining to workers' compensation, disability management, liability, and health and safety

Analyze individual claims and use judgment and tact in recommending or exercising appropriate action

Research, interpret, and apply specific rules, laws, bargaining unit agreements, and policies Prepare informational material, bulletins, reference guides related to assigned programs

Facilitate and negotiate resolution of complex problems or claims

Interpret statistics and make accurate arithmetical computations

Establish and maintain cooperative working relations with District personnel, contractors, attorneys, and the public

Communicate effectively, both orally and in writing

Operate a computer and related peripheral equipment

Manage, supervise, and train employees effectively

ENTRANCE QUALIFICATIONS

Education:

Graduation from a recognized college or university with a bachelor's degree, preferably with a major in risk management, business administration, public administration, vocational rehabilitation, or a related field. Qualifying experience beyond that required in a professional level staff position may be substituted for the required education on a year-for-year basis.

Experience:

Three years of experience, preferably with a public agency, in any combination of the following areas:

Developing, implementing, or coordinating a workers' compensation program with responsibility for more than 1000 workers' compensation claims per year, which must include at least one year of experience performing duties regarding workers' compensation covered by California law.

or

Developing, implementing, or coordinating a liability program with responsibility for more than 500 liability claims per year, which must include at least one year of experience performing duties regarding liability claims covered by California law.

or

Developing, implementing, or coordinating a return to work or reasonable accommodation program with responsibility for more than 100 cases per year, which must include at least one year of experience performing duties regarding return to work or reasonable accommodations covered by California Law.

Possession of certification as an Associate of Risk Management (ARM), Associate in Risk Management- Public Entities (ARM-P), Associate in Claims (AIC), State of California Self Insured Administrator Certificate, and/or Certified Professional in Disability Management (CPDM) is preferable.

Special:

A valid California Driver License. Use of an automobile.

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.

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