WORKERS’ COMPENSATION REPRESENTATIVE

KIND OF WORK

First-level professional Workers' Compensation compliance review, enforcement, and consultation.

NATURE AND PURPOSE

Under general supervision, within a work team setting, performs claim file review and processing, case auditing and compliance reviews to ensure full compliance with Workers' Compensation statutes and rules; identifying and referring complex cases to intermediate and senior staff; performs related work as required.

EXAMPLES OF WORK (A position may not include all the work examples given, nor does the list include all that may be assigned.)

Invokes disciplinary actions on insurers and employers for failure to comply with workers' compensation statutes and administrative rules by examining and evaluating suspected violations, calculating amount of penalty, and issuing warnings or penalties when appropriate; examining behavior of insurers and adjusters for appropriateness in accordance with prohibited practices statutes, administrative rules, and case law and referring to senior staff, and documenting and referring to senior staff disciplinary actions and results appropriate for education outreach or consultation.

Responds and answers inquiries and correspondence from claimants, employees, employers, and others to explain the procedures and requirements necessary to comply with Workers' Compensation statutes, rules, policies, and procedures via telephone conversations, written correspondence, and interpersonal walk-in consultations.

Examines and evaluates workers' compensation claims for compliance with all provisions of workers' compensation statutes, administrative rules, policies and procedures by reviewing claim records, analyzing benefit calculations and timeliness of benefit payments, fact-finding, correspondence and interviews, and the application of law.

Refers complex and policy-level compliance problems to senior staff by identifying cases with complex or unusual issues (i.e., permanent partial disability benefits, dependency benefits, Social Security offsets, vocational rehabilitation, medical fee schedule and treatment parameters); identifying claims or cases requiring disciplinary action on insurers and adjusters; identifying warnings and penalties to be rescinded; and identifying penalties being appealed.

Develops fundamental understanding of the application of workers' compensation statutes, administrative rules, policies and procedures, and case law by studying changes in law and administrative rules; learning and using compliance policies; attending appropriate training sessions; and consulting with supervisor and senior compliance staff.
Analyze, evaluate, and approve cases or claims for Workers' Compensation benefits, awards, and related administrative actions using documents and records reviews (including medical reports, payment records, and related filings).

Executes or verifies complex mathematical calculations to determine appropriate benefit payments, applying provisions of Workers' Compensation and other statutes, administrative rules, policies and procedures.

Compiles, condenses, and enters claim file data and information on claims and cases (including in computerized activity logging system) to assure retention of case information for future retrieval and review by using both manual and electronic data processing systems.

Logs verbal and written interaction with insurers, employers, and others on compliance issues and actions associated with a claim or case by registering the issue, action, and result into the computerized claim activity logging system to assure a complete and accurate record of activity on individual claims.

Participates on compliance services team responsible for collaborative monitoring and enforcement of 50% of filed workers' compensation claims by using teaming skills, problem-solving skills, interpersonal skills, and cooperative decision-making.

**KNOWLEDGE, SKILLS AND ABILITIES REQUIRED**

Knowledge of:

State and federal laws and relevant case law relating to the administration of Workers' Compensation system of Minnesota (including social security, unemployment, etc.).

Legal terminology sufficient to understand and apply case law, judges' decisions, and related workers' compensation legal actions in the review of claims and case files.

Medical terminology, conditions, treatment methods, and treatment parameters sufficient to understand and analyze workers' compensation reports.

Principles and practices of insurance company claims processing and case management sufficient to assess appropriate behavior of insurers' and adjusters' requirements under the prohibited practices statutes.

Personal computer software applications, including WordPerfect, Lotus 123 or Excel spreadsheet applications, Novell GroupWise, Windows, and customized applications, sufficient to communicate, compute penalties, store and retrieve data and information, and organize and analyze issues.

Math sufficient to compute and solve complex benefit calculations using statutory and/or case law formulas.
Workers' Compensation Division operations, practices, policies and procedures sufficient to understand and explain the process by which cases are reviewed.

Skill in:

Communication sufficient to explain complex ideas verbally and in written formats.

Research and investigation to appropriately interpret and apply the Workers' Compensation statutes, rules, case law, and policies applicable to specific issues.

Managing large, active case loads sufficient to weekly review and examine hundreds of claims for compliance.

Using computer technology to prepare written correspondence, log claim activity, communicate with team members and other employees.

Ability to:

Establish effective working relationships within the organization, particularly as a team member collaborating to provide quality customer service.

Work tactfully and effectively with a wide range of people, including hostile and emotionally upset individuals who disagree with agency decisions.

Reason analytically and in organized manner, and apply policy interpretations to specific cases and claims.

Communicate clearly, in both verbal and written formats, sufficient to explain and discuss case problems and issues.

Use computers to draft correspondence, calculate penalties, verify benefit payments, maintain personal schedule and work tasks, electronically communicate with colleagues, and log claim activity issues, actions, and results.