

ILLINOIS DEPARTMENT OF CENTRAL MANAGEMENT SERVICES
CLASS SPECIFICATION

LIABILITY CLAIMS ADJUSTER I

POSITION CODE: 23371

Effective: 5-16-85

DISTINGUISHING FEATURES OF WORK:

Under direct supervision, reviews, evaluates, negotiates and ensures the timely processing of workers' compensation claims and less detailed time-loss claims against the State of Illinois; ensures claims are in compliance with applicable laws and regulations; exercises authority to decide claims of a designated dollar amount; may review and evaluate general liability claims when work loads demand. A characteristic of this level is the absence of independent on-site investigations of fraudulent claims.

ILLUSTRATIVE EXAMPLES OF WORK:

1. Reviews, evaluates and negotiates the settlement of workers' compensation claims and less detailed time-loss (loss of working time due to disability) claims against the State of Illinois, ensuring the timely processing of compensable claims; reviews doctor reports, hospital reports, summaries of the disability and of other submitted documentation.
2. Compiles facts and data leading to the deposition of claims; determines the degree of compensability; ensures claims are in compliance with applicable laws and regulations.
3. Makes subjective decisions in approving or disapproving payment of medical bills and disability payments; proposes and/or recommends settlement, as appropriate; refers workers' compensation claims in excess of a designated dollar amount to the supervisor for approval or disapproval.
4. Conducts on-site investigations pertaining to the verification of statements, interviewing of witnesses and authorizing procurement of necessary exhibits such as slides and movies which are in compliance with applicable laws and regulations to aid in the processing of workers' compensation claims.
5. For prevention of loss of state funds due to payment of disability claims (loss control) and for safety of state employees, teaches better techniques of preventing injury on the job, and advises discontinuance of dangerous or unsafe practices, identifies the types of injuries and advises proper safety procedures for reductions of this type of injury.
6. Maintains case related information, such as, notes on witnesses statements and telephone conversations; prepares written evaluations on facts accumulated for the settlement of a claim; prepares daily, monthly and quarterly activity reports on workers' compensation on general liability claims that have been examined.

LIABILITY CLAIMS ADJUSTER I (Continued)

7. Performs other duties as required or assigned which are reasonably within the scope of the duties enumerated above.

DESIRABLE REQUIREMENTS:

Education and Experience

Requires knowledge, skill and mental development equivalent to the completion of four years of college, preferably with coursework in insurance, basic accounting, premedical, sociology and/or business administration. Related experience, preferably in insurance claims adjusting, in legal assistance, in casework or in benefit management, may be substituted for college on a year-for-year basis.

Requires one year of professional experience in claims adjustment or the completion of an approved Liability Claims Adjuster Trainee Program.

Knowledges, Skills and Abilities

Requires working knowledge of all applicable state/federal statutes and regulations.

Requires working knowledge of all workers' compensation claims.

Requires elementary knowledge of workers' compensation time-loss claims.

Requires elementary knowledge of office procedures and files.

Requires elementary knowledge of medical terminology, body systems and/or impairments, and their disabling effects.

Requires working knowledge of fact finding sources which assure the most correct claims information.

Requires ability to use the computer system as a working tool in gathering information for record keeping.

Requires ability to balance casework loads and to determine how quickly compensable claims must be processed.

Requires ability to review, evaluate and dispose of claims involving the State of Illinois.

Requires ability to evaluate all claims information, less detailed time-loss claims and occasionally general liability claims in order to make sound and consistent determinations.

Requires ability to exercise judgment in interpreting medical facts presented by a physician and to apply these facts in determining an individual's capacity to engage in gainful occupation.

Requires ability to read, assimilate and recall facts, figures and descriptive inclusions and the willingness to search for and obtain information.

Requires ability to communicate effectively.

Requires ability to maintain satisfactory working relationships with coworkers, the general public and other agency personnel.