

POSITION DESCRIPTION

AGENCY/DEPT ID

DIVISION OR INSTITUTION ADMINISTRATION

UNIT OR OFFICE
MEDICAL SERVICES

COUNTY OF EMPLOYMENT
FRANKLIN

POSITION NUMBER
20064858

JOB TITLE
CLAIMS EXAMINER 2

JOB CODE
16792

<input type="checkbox"/> Reclassification	<input type="checkbox"/> New Position	<input checked="" type="checkbox"/> Update	Position Hyperlinked to <input type="checkbox"/>
		Agency Organizational Tree	
USUAL WORKING TITLE OF POSITION		POSITION NO. AND TITLE OF IMMEDIATE SUPERVISOR	
CLAIMS EXAMINER 2			
<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Intermittent	<input checked="" type="checkbox"/> Classified <input type="checkbox"/> Unclassified	Overtime: <input checked="" type="checkbox"/> Eligible <input type="checkbox"/> Exempt If FLSA Exempt, exemption type:	Bargaining Unit 09 Page 1 of 2
NORMAL WORKING HOURS (Explain unusual or rotating shift): FROM: 8:00 A.M. TO: 5:00 P.M.			
JOB DESCRIPTION AND WORKER CHARACTERISTICS			
%	Job Duties in Order of Importance	Knowledge, Skills & Abilities	
90	Under general supervision, prepares claims for exams and file reviews using personal computer applications (CAS, ECM, Case Manager, SharePoint, ICON, BWC applications) for data retrieval, verification, resolution, tracking & organization. Captures issues, tracks PCNs & updates claim / exam information (exam dates, medical intent, expiration dates, addresses, risk & representative changes, etc.) on CAS. Reviews / analyzes claim documents and images according to established Workers' Compensation laws & Industrial Commission rules, policies & procedures to determine pertinent data (filing & order dates, claim allowances, involved parties, providers, exam location, expiration dates, etc.). Schedules exams, recruits & selects providers, updates provisional spreadsheet, assists with completion of provider enrollment forms & exam fee negotiations. Processes cancellations & no shows fees. Approves travel reimbursement. Generates correspondence: notice of exam, exam referral letter & worksheets, statement of facts / specialist packet, fee bill, cancellation / reschedule letters, etc. & mails accordingly. Updates the Medical Services checklist. Re-indexes & proofreads documents to ensure an accurate hearing folder. Processes incoming mail & faxes. Uploads or verifies documents uploaded by inside / outside parties are accurate. Answers inquiries & the 1-800 line from internal & external customers regarding the medical claims process / claims status. Notifies Security Services & Customer Services (i.e. interpreters) as needed.	Knowledge of (13b*) IC/BWC policies & procedures, (14*) IC/BWC rules & regulations; Skill in (25b) personal computer, Microsoft applications, Commission Adjudication System (CAS)*, Enterprise Content Management (ECM)*, Case Manager*; Ability to (30h) apply principles to solve practical, everyday problems, (33e) gather, collate & classify information about data, people or things, (34f) handle sensitive inquiries from & contacts with officials & general public.	
List Position Numbers & Job Titles of Positions Directly Supervised:		SIGNATURE OF AGENCY REPRESENTATIVE	DATE

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MEDICAL SERVICES

COUNTY OF EMPLOYMENT
FRANKLIN

□ Reclassification

☐ New Position

☐ Update

Position Hyperlinked to ☐

Agency Organizational Tree

USUAL WORKING TITLE OF POSITION
CLAIMS EXAMINER 2

POSITION NO. AND TITLE OF IMMEDIATE SUPERVISOR

<input checked="" type="checkbox"/>	Permanent
<input type="checkbox"/>	Temporary
<input type="checkbox"/>	Intermittent

 Classified

☐ Unclassified

Overtime: ☒ Eligible ☐ Exempt

If FLSA Exempt, exemption type:

Bargaining Unit 09

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NORMAL WORKING HOURS (Explain unusual or rotating shift):

FROM: 8:00 A.M.

TO: 5:00 P.M.

JOB DESCRIPTION AND WORKER CHARACTERISTICS

%

Job Duties in Order of Importance

Knowledge, Skills & Abilities

10

Routes claims for ex parte as needed. Attends meetings. Completes miscellaneous time log. Works on special projects as assigned. Performs other related duties as required for operational efficiency. Must conduct themselves professionally at all times and in accordance with the IC's standards of customer service which require employees to act in a respectful and impartial manner while providing accurate information and timely issue resolution and abiding by the agency's Confidential Personal Information Policy.

Knowledge of 13b*, 14*; Skill in 25b, Ability to 30h, (32r) prepare meaningful, concise & accurate reports, 33e, 34f, (34J) Customer Service /Professionalism.

(*) Developed after employment

List Position Numbers & Job Titles of Positions Directly Supervised:

SIGNATURE OF AGENCY REPRESENTATIVE

DATE _____