Job Title: Risk Management Specialist



Position Description

To perform this job successfully, an individual must be able to perform the essential job functions consistently and to the satisfaction of the employer. Reasonable accommodations may be made for qualified disabled individuals. This job description is not an exhaustive list, as employees may be required to perform duties not specifically designated within this document, at the employer's discretion. The Escambia County School District reserves the right to modify or interpret this job description as needed.

FLSA Status: Nonexempt

Reports to: Appropriate Supervisor or Designee

Supervises: Appropriate Staff as required

Pay Grade: Educational Support – 19

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JOB SUMMARY

The purpose of this position is to perform paraprofessional and technical level tasks in various phases of a risk management program.

ESSENTIAL JOB FUNCTIONS

- Reviews Workers' Compensation Notice of Injury forms; investigates the validity of the claim for accuracy and compensability; processes and adjusts the medical only claims in accordance with the Florida Workers' Compensation Fee Schedule.
- Establishes claims within the computer system.
- Processes all-line claims including workers' compensation, auto-liability, general liability, and property claims.
- Prepares and sends initial contact letters and packets.
- Justifies the reduction in medical service charges to providers and other appropriate sources as required.
- Monitors and directs the servicing agent in the processing of medical and indemnity benefits in accordance with laws and regulations.
- Compiles a monthly report on lost work day injuries and workers' compensation lost time which includes the department's lost time, wages, and rates of active injuries.
- Composes various correspondences to medical providers, physicians, etc., requesting medical status on workers' compensation claims.
- Compiles, and files with the State of Florida, the Annual Self Insured Payroll Report by Workers' Compensation Classification Code.
- Participates in the establishment and maintenance of a variety of insurance policies, reviews the policies for accuracy of coverage, and monitors the renewal dates and ensures continued insurance coverage.
- Serves as an insurance representative answering questions from District employees regarding workers' compensation, property claims, student accidents, visitor accidents, and light-duty assignments.
- Serves as liaison with the various medical providers and worker's compensation servicing agent.
- Serves as the liaison for the District between the adjustor and the attorney properly informing the attorney of the necessary facts.

- Serves as liaison with investigative services at the direction of the Risk Manager or Claims Adjustor, coordinates surveillance of suspect claimants.
- Acts as liaison for the District with outside legal representation, rehabilitation specialists, investigators, and representatives from the State Division of Workers' Compensation.
- Monitors the District's Workers' Compensation Trust Fund and the Reserve Loss Fund.
- Monitors payments from the District's servicing agent, challenges the agent on incorrect charges, requests corrections, and follows up to ensure corrections are made in a timely manner.
- Assists in the preparation of the annual budget, projects expenditures for the District's Workers' Compensation Trust Fund, legal and casualty claims, and the Reserve Loss Fund for the fiscal year based on claims paid during the year, existing claims, and expected claims.
- Monitors revenue expenditures through reports and computer database. Confers with data processing in the development of programs to support necessary file maintenance and report formatting.
- Attends court hearings on workers' compensation claims before the Judge of Compensation as needed.
- Provides recommendation to the Risk Manager on alternatives to assist in successfully achieving performance goals and objectives.
- Submits all State required forms to the Division of Workers' Compensation.
- Maintains open and effective communication with all levels of employment for the dissemination of information and effective departmental operations.
- Displays confidentiality in dealing with sensitive issues.
- Works with the State Attorney's office and/or courts to obtain restitution for damages to District property.
- Manages all aspects of property claims and handles all subrogation communications and claims activity with claimants.
- Performs other duties as assigned.

MINIMUM REQUIREMENTS

- Associate Degree or equivalent college level course credit, but experience and/or other training may be substituted for the education requirement. Bachelor's Degree with major coursework in business or closely related field preferred.
- Three (3) to five (5) years of responsible experience in human resources work and/or insurance claims processing which may include workers' compensation, property loss claims, vehicle claims, and other accident claims.
- An equivalent combination of education, training, and experience which provides the required knowledge, skills, and abilities to perform the essential functions of the job.
- May require the possession of or ability to obtain certification of eligibility to process workers' compensation claims by the State of Florida, Division of Workers' Compensation.
- Recommend the ability to obtain a Worker's Compensation Adjusters License from the State of Florida (preferably an all-lines license).

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KNOWLEDGE, SKILLS, AND ABILITIES

- Requires the ability to display knowledge of Government laws and regulations regarding the handling and settling of insurance and worker's compensation claims.
- Requires the ability to display knowledge of principles and practices of insurance, risk management, and programs relating to general and financial liability protection.
- Requires the ability to display knowledge of methods of financial, technical, and legal requirements for developing, implementing, and administering a self-insured program.
- Requires the ability to display knowledge of accounting principles, practices, and procedures and the application of such knowledge to accounting transactions.
- Requires the ability to display knowledge of communication skills and techniques for data collection and preparation of written or oral reports.
- Requires the ability to display knowledge of methods of claims procedures and administration.
- Requires the ability to display knowledge of computer applications related to the work.
- Requires the ability to interpret, apply, and explain applicable laws, rules, and regulations governing workers' compensation, subrogation, and casualty and liability claims.
- Requires the ability to analyze financial transactions and making appropriate adjustments to original journal entries.
- Requires the ability to prepare and complete accounting reports, vouchers, and statements.
- Requires the ability to analyze insurance policy provisions to determine the extent of coverage, exclusions, and conditions.
- Requires the ability to analyze, classify, and rate risks, exposure, and loss expectancies.
- Requires the ability to develop and maintain good working relationships with other employees, insurance representatives, legal staff, state agencies, and the general public.

PHYSICAL DEMANDS

While performing the essential functions of this job the employee is frequently required to stand and walk, use hands to finger, handle, or feel, reach with hands or arms, climb or balance, or bend at the waist, and is occasionally required to lift and/or move up to 10 pounds. The work also requires the following physical abilities in order to perform the essential job functions: fingering, hearing, mental acuity, reaching, repetitive motion, speaking, talking, and visual acuity.

WORKING CONDITIONS

Employees in this position work in a safe and secure work environment that may periodically have unpredicted requirements or demands.

Date of Board Approval: June 20, 2017, effective July 1, 2017

Date of Revision: December 17, 2019, effective January 1, 2020

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