IDENTIFICATION

Position Number	Position Title	
97 –9876	Entitlement Officer/Adjudicator	
Department	Division/Region	Location
Nunavut Operations	Claims Services	Iqaluit

PURPOSE OF THE POSITION

The Claims Services division maintains a comprehensive claims system through the on-going management of injured workers claims.

The Entitlement Officer/Adjudicator has absolute authority for the initial decision(s) on all progressive and all time loss claims. The Entitlement Officer/Adjudicator analyzes and investigates every claim and either accepts or denies claims. This position assigns time loss major claims and progressive injury claims to the Case Manager. Claims up to 6 weeks are adjudicated by the Entitlement Officer/Adjudicator.

SCOPE

Located in Iqaluit and reporting to the Manager, Claims Services, the Entitlement Officer/Adjudictor must produce timely, efficient and accurate delivery of initial decisions on all progressive and time loss claims. Each claim is different and the incumbent analyzes and investigates these claims individually, determines if further witnesses are needed and determines, based on the outcome of this extensive investigation whether or not an accident has occurred. Once satisfied with the investigation, the Entitlement Officer/Adjudicator either accepts or denies claims. The Entitlement Officer/Adjudicator prepares a decision paper addressed to the worker for the Manager's review. The Entitlement Officer/Adjudicator assigns files to the Case Manager. The incumbent of this position adjudicates claims up to 6 weeks.

The Entitlement Officer/Adjudicator has absolute authority for the ongoing eligibility to benefits of all time loss claims up to 6 weeks in duration. Decisions are made in a timely, accurate and

efficient manner to ensure the best course of action is taken to return the worker to the work force. The Adjudicator's decisions are largely based on existing Act and policies. However, there are unique instances that require independent judgment of facts, policy and legislation in order to render a fair and equitable decision that is acceptable to both the injured worker and the WCB. Unjust decisions could cause hardship to the injured worker and embarrassment to the WCB.

The Adjudicator interacts with injured workers, the medical community, internal WCB staff, employers and outside consultants. The incumbent also responds to questions that the Workers Advisor may have on ongoing files. The incumbent interviews as many witnesses as required to make a sound decision.

The incumbent makes informed decisions when considering acceptance or denial of initial claims. It is the WCB's goal to process first payment within 25 days. Despite an unpredictable workload in a busy office environment, the Entitlement Officer/Adjudicator needs to make quick, precise and fair decisions. Poor judgment would create negative media attention. Unjust decisions could cause hardship to the injured worker and embarrassment to the WCB.

Due to the large geographical area, awareness of cross-cultural issues is a mandatory requirement for this job.

The Entitlement has a total officer limit of \$175,000 which includes disability benefits and medical aid with transaction limits of \$10,000.

RESPONSIBILITIES

(Describe major responsibilities and target accomplishments expected of the position. For management positions, indicate the subordinate position(s) through which responsibilities are accomplished.)

Determines eligibility/ineligibility for entitlement on all progressive, all Time Loss and reopened claims.

- Investigates whether or not an accident has occurred, the circumstances, the compatibility of the injury to the accident, to the employment duties etc. Interview witnesses as required.
- Denies entitlement on those claims not eligible for compensation once the investigation is complete.
- Assigns accepted claims to the Case Manager and adjudicates files of all time loss claims up to 6 weeks in duration.
- Determines the appropriateness of initial medical services rendered by health professionals to the injury.

• Establishes contact with claimants, their families, employers, health care professionals, union representatives, claimant/employer advocates and other interested parties to ensure claim acceptance and to identify problem areas to assist the efficient on-going administration of the claim.

Adjudicates, manages and expedites time-loss moderate claims (6 weeks or less in duration):

Determines on-going eligibility and appropriateness of medical services rendered by health professionals to ensure the "best" course of action is taken to return the worker to the workforce. (e.g. Based on past practise, consultation with other medical professionals or the WCB Medical Advisor, the Adjudicator may decide to deny a course of treatment such as proposed surgery.) by:

- Determines the appropriateness of medical services.
- Analyzes/researches WCB Act and policies to ensure fair compensation.
- Ensures the provision of medical treatment and benefits.
- Issues compensation payment to injured workers.
- Authorizes payment of medical accounts.
- Authorizes the replacement of dentures, clothing, glasses, e.g. as required.
- Facilitates the process of returning the injured worker to the workforce.
- Establishes and maintains contact with workers and their families, employers, health professionals, union representative, worker/employer advocates and other interested parties to review the claim progress, resolve problem areas and ensure the on-going administration of the claim.
- Answers questions that the claimant or the Workers Advisor may have with respect to the interpretation of WCB policy and procedures as they relate to this particular claim.

Administration:

- Prepares decision letters and other correspondence.
- Establishes a computer and hard copy file on each claim.
- Documents claim file e.g. Conversations, note-to-file and rationale for decision(s).

KNOWLEDGE, SKILLS AND ABILITIES

(Describe the level of knowledge, experience and abilities that are required for satisfactory job performance.)

- Analytical/evaluative/investigative skills are required on a daily basis in order to make a fair decision.
- Facilitation skills are needed to interact with claimants, witnesses, employers to ensure that the focus of the discussion remains around the injury of the worker.
- Research skills to perform interjurisdictional comparisions on claims are required in complex situations. (e.g. legal precedents, other jurisdiction manuals and medical journals).
- Interpersonal skills are required on a daily basis:
 - Questioning and interviewing skills
 - Attentive listening skills.
 - Tact and diplomacy.
 - Conflict resolution skills.
- Written communication skills to ensure that decision letter to claimants are prepared in clear language.
- Experience in a computerized work environment.
- Ability to make a decision based on the interpretation of Act and Regulations.
- The above skills are typically acquired through a related diploma plus 2-3 years of caseload management experience including working with people to assess various situations.

WORKING CONDITIONS

(List the unavoidable, externally imposed conditions under which the work must be performed and which create hardship for the incumbent. Express frequency and duration of occurrence of physical demands, environmental conditions, and demands on one's senses and mental demands.)

Physical Demands

(Indicate the nature of physical effort leading to physical fatigue.) As normally aquired in an office environment.

Environmental Conditions

(Indicate the nature of adverse environmental conditions to which the incumbent is exposed.) As normally acquired in an office environment.

Sensory Demands

(Indicate the nature of demands on the incumbent's senses to make judgments through touch, smell, sight and hearing and judge speed and accuracy).

4 to 6 hours daily, substantial level of intensity. Incumbent is required to use senses of hearing to listen to workers, employers, witnesses, medical staff while investigating a claim.

Mental Demands

(Indicate conditions that may lead to mental or emotional fatigue. See User Guide for examples)

Dealing with potentially angry and involuntary claimants due to injuries can create stress. Occasionally hazardous claimant confrontations may lead to death threats from the claimant inside and outside the organization. Unpredictable claim loads and pressures of different claimants needs impact daily.

CERTIFICATION

Position Number: 97-9839

Printed Name	Supervisor Title		
	<u> </u>		
Employee Signature	Supervisor Signature		
Date	Date		
Date	Date		
I certify that I have read and understand the responsibilities assigned to this position.	I certify that this job description is an accurate description of the responsibilities assigned to the position.		
President Signature			
Date			
I approve the delegation of the responsibilities outlined herein within the context of the attached organizational structure.			

"The above statements are intended to describe the general nature and level of work being performed by the incumbent of this job. They are not intended to be an exhaustive list of all responsibilities and activities required of this position."