IDENTIFICATION

Department	Position Title	
Workers' Safety and Compensation Commission	Claims Representative	
Position Number(s)	Community	Division/Region(s)
97-2817, 97-9871, 9872	Yellowknife, NT	WSCC NT

PURPOSE OF THE POSITION

The Claims Representative position provides the first contact with injured workers and employers to gather information for all registered claims and encourage a safe and timely return to work. From the information obtained, the Claims Representative will entitle and pay benefits on claims of up to 3 days' time loss and exposure claims. The incumbent also gathers information on time loss, no time loss, psychological, harvester, progressive and complex claims and forwards on to the Claims Officer or the Claims Processing Supervisor for further investigation. The Claims Representative's first response will determine the future of the claim and whether the unit standards will be met in a timely fashion.

SCOPE

The Workers' Safety and Compensation Commission (WSCC) is a Crown Corporation of the Governments of the Northwest Territories and Nunavut that is directed by a Governance Council through the President & CEO. The WSCC operates with seven divisions under a team of senior managers. The WSCC headquarters operations are located in Yellowknife and regional operations in Iqaluit and Inuvik.

The WSCC promotes safe work places through education and prevention, and cares for injured workers through a system of no-fault compensation. The system is funded through the collection of assessments from employers and is governed by the *Workers' Compensation Acts* of the Northwest Territories and Nunavut.

The nature of the claims process is one of complexity where tact and diplomacy is important to ensure the stakeholder's experience is positive.

The Claims Representative reports directly to the Claims Processing Supervisor. In accordance with the *Workers' Compensation Act*, regulations, policies and unit standards, the Claims Representative is responsible for registration of all claims and is the first point of contact for establishing claims for injured workers. This initial contact will set the tone for establishing a

positive working relationship with the worker, employer and claims staff. The Claims Representative is the first contact that many injured workers have with the WSCC and it is the initial opportunity to impact an early and safe return to work plan and impact duration of time loss injuries.

Prompt attention by the Claims Representative is critical for the Claims Services Unit to meet the mandate of fair and timely compensation benefits to injured workers. The Claims Representatives gathers information on approximately 2,500 claims per year and completes over 200 daily compensation calculations for time loss claims. Any error in the calculation of benefits will adversely affect the Workers' Protection Fund.

This position has a total spending authority limit of \$1,000.00 per transaction.

RESPONSIBILITIES

1. Registers injury and incident claims to the appropriate employer account in an accurate and timely manner.

- Determines the existence of a worker/employer relationship as defined by WSCC policies and procedures.
- Investigates and verifies employer registration status at the time of the injury or incident.
- Reviews claim documents to ensure completion and avoid duplicate registration.
- Receives, registers and enters claim details on the WSCC system and maintain daily records.
- Understands the *Workers' Compensation Act* and WSCC Policy Manual as applicable

2. Researches and gathers all relevant information on all claims in accordance with the WSCC Policies.

- Triages and prioritizes claims according to type of claim and escalates when necessary.
- Codes and enters the National Occupational Classification Code and National Workplace Injury Statistics Program (NWISP) codes, and prepares the physical file.
- Participates in yearly coding challenges with other Workers' Compensation Boards
- Performs an initial review of the documents on file and determines if there is enough information for an entitlement decision to be made.
- Contacts medical professionals and interviews employers and workers by phone, fax, email or mail to verify that necessary information is complete and accurate, and to request any additional information needed for a decision to be made. These can be difficult conversations with non-compliant workers and employers.
- Provides information to claimants on the initial entitlement phase of the claim and refers all other questions to the appropriate staff member such as Entitlement, Adjudication, Case Management and Pensions.
- Maintains a Bring Forward (BF) system to ensure timely administration of files.
- Determines the status of all registered claims by analyzing the information on file to decide if an incoming claim is a time loss, no time loss, inter-jurisdictional agreement and no medical aid.

- Determines acceptability for Time loss claims of 3 days or less and documents rationale for decision.
- Determine acceptability for exposure claims and documents rationale for decision.
- Transfers Time Loss and No Time Loss Claims to Claims Officer when the claim is ready for entitlement
- Transfers Progressive, Harvester, Psychological_and Complex Claims to the Claims Processing Supervisor for entitlement decision.
- Flags complex issues and claims for follow-up by Claims Entitlement Supervisor.
- Recommends to Claims Entitlement Supervisor claims that require further investigation for fraudulent information and Third Party.

3. Completes complex calculation of benefits as outlined by relevant policies.

- Determines the employment status and category of the worker.
- Requests wage and salary information from the worker and employer.
- Reviews and calculates the daily compensation rate according to the hours of work, shift work, rotations, shift differentials, overtime and time lost in accordance with various employment agreements for Time Loss and Pension claims.
- Considers whether income tax forms or any other documentation is necessary to ensure an accurate calculation.
- Confirms marital status, number of children and residency status.
- Determines whether it is necessary to contact other sources to confirm evidence of earnings.
- Provides on-going expert support to Adjudication, Case Management and Pensions staff regarding wage calculation updates as outlined by the relevant policies.
- Provides technical advice to Information Services on new wage information for updates to a data base system.

4. Performs Administrative Tasks.

- Authorizes payments to medical suppliers and reimburses workers claimant related costs.
- Responds to general inquiries.
- Purges documents that do not require to be saved on microfiche and ensures coding, claims tracking is accurate on claim files that have been closed.
- Maintains No Medical Aid claims for archiving.
- Provides coverage for other positions within the Claims Processing Unit

WORKING CONDITIONS

Physical Demands

As typically associated with an office position.

Environmental Conditions

As typically associated with an office position.

Sensory Demands

Compassion and understanding must be communicated in a non-confrontational manner when requesting information from clients who may be agitated or traumatized due to an injury.

Mental Demands

Dealing with clients who may be angry and anxious due to injuries can create stress. There is uncertainty about what to expect. Occasionally, clients will be verbally abusive and utter threats.

KNOWLEDGE, SKILLS AND ABILITIES

- Proficient in written and oral communication skills to deal with employers, workers, health care professionals and others to gather necessary information.
- Proven analytical skills to determine the information needed on the file for the Claims Entitlement Supervisor to make an informed decision.
- Demonstrated mathematical skills to make an accurate wage calculation.
- Ability to interpret and comprehend acts, policies and procedures including various collective agreements.
- Proven research, organizational and time management skills, in order to meet the performance standards of the unit and manage a high workload volume.
- Proficient interpersonal skills in order to deal effectively with clients and internal WSCC personnel.
- Ability to work as part a multi-disciplinary team.
- Proficient computer skills including, word processing and email.
- Ability to be self-motivated and take initiative.
- Ability to work with minimal supervision.
- Proficient decision-making skills.
- Awareness of multi-cultural issues.
- Knowledge of Access To Information And Protection of Privacy Act (ATIPP)

Typically, the above qualifications would be attained by:

Completion of a 2 year Social Science Diploma with two years of administrative experience in a similar office environment and customer service skills with a demonstrated mathematical ability performing complex financial calculations.

ADDITIONAL REQUIREMENTS

Position Security	(check	one)
--------------------------	--------	------

	No criminal records check required
\boxtimes	Position of Trust – criminal records check required
	Highly sensitive position - requires verification of identity and a criminal records check

French language (check one if applicable)							
1101	chi language (check o	nie ii applicable)					
	☐ French required (must identify required level below)						
	Level required for this Designated Position is:						
	ORAL EXPRESSION AND COMPREHENSION						
	Basic (B) □	Intermediate (I) \square	Advanced (A) \square				
	READING COMPREHENSION:						
	Basic (B) □	Intermediate (I) \square	Advanced (A) \square				
	WRITING SKILLS	:					
	Basic (B) □	Intermediate (I) \square	Advanced (A) \square				
\boxtimes	French preferred						
	•						
A 1		.1 1	Pal base				
Abol	r iginal language: To o	choose a language, c	lick nere.				
	Required						
	Preferred						

CERTIFICATION

Title: Claims Representative

Position Number(s): 97-2817, 97-9871, 9872

Employee Signature	-	Supervisor Signature		
Printed Name		Printed Name		
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.		
Senior Manager	Date			
President & CEO	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 incumbents of this job. They are not intended to be an exhaustive list of all responsibilities and activities required of this position.