State of California
Department of
Industrial Relations

DUTY STATEMENT

☐ **CURRENT**

☐ **PROPOSED**

CIVIL SERVICE CLASSIFICATION	WORKING TITLE
Workers' Compensation Manager	Workers' Compensation Manager

PROGRAM NAME	UNIT NAME
Division of Workers' Compensation	Medical Unit QME

ASSIGNED SPECIFIC LOCATION	POSITION NUMBER
Oakland	400 – 604-9213-033

BARGAINING UNIT	WORK WEEK GROUP	BILINGUAL POSITION	CONFLICT OF INTEREST FILER	BACKGROUND CHECK
M01	E	No	Yes	No

General Statement

Under the general direction of the Chief of Medical Services Administration, the Workers' Compensation Manager oversees all functions of the Qualified Medical Evaluator program in the Medical Unit. The incumbent will establish and monitor policies and procedures to ensure compliance with current statues and regulations and effective delivery of benefits to injured workers. Duties include, but are not limited to the following:

Candidates must be able to perform the following essential functions with or without reasonable accommodations.

Percentage of Time Spent	Duties **Essential Job Functions**
35	Manage the qualified medical evaluator program of the Division of Workers' Compensation; oversee the hiring, training, evaluation and technical supervision of all Qualified Medical Evaluator (QME) professional staff; establishes standards of review and evaluation of QME staff.
30	Supervise and support QME Supervising Workers' Compensation Consultants (SWCC); oversee the development of training and training material of all division staff on qualified medical evaluator issues; identify areas needing policy development or training to improve consistency in the QME program functions; oversee the function and development of materials for QME professional staff to process and perform complex panel reviews.
15	Oversee revisions of processes and procedures within program and assist with regulatory changes related to QMEs.
15	Participate with other managers in formulating policies of the DWC. Assist QME staff on difficult, complex or sensitive cases.
Percentage of	**Marginal Job Functions**

Time Spent	
5	Participate in division-wide training for internal and external stakeholders.

Conduct, Attendance, and Performance Expectations

The State of California adheres to a number of laws and policies that are designed to promote a safe, comfortable, and professional work environment for all employees. As a state employee, you are responsible for arriving at and leaving work at the times agreed upon by your supervisor, including returning on time after lunch and break periods. You are expected to behave courteously and responsibly at all times. Remember that the image of an organization rests upon the behavior of the employees who represent it. You and your supervisor will participate in the regular employee appraisal process throughout your career. This gives you and your supervisor an opportunity to discuss your job performance and career development.

Supervision Received

The Workers' Compensation Manager reports directly to and receives the majority of assignments from the Chief of Medical Services Administration; however, direction and assignments may also come from upper management in the Division of Workers' Compensation.

Supervision Exercised

Under Chief of Medical Services Administration the Workers Compensation Manager supervises Supervising Workers' Compensation Consultants.

Work Environment, Special Requirements/Other Information, Physical Abilities, Additional Requirements/Expectations, and Personal Contacts

Work Environment

The WCM works in an air conditioned office building with natural and artificial lighting as well temperature control. The office is equpped with standard office equipment, such as computers, scanners, copiers, and shredders. Telework, when appropriate, may be approved at the discretion of the Chief of Medical Services Administration.

Special Requirements/Other Information

The incumbent must demonstrate the ability to establish and maintain cooperative working relationships with staff at all levels both within and outside of DIR to complete work assignments related to developing policies and procedures. The incumbent must exercise the ability to independently make decisions and perform actions having broad implications on various aspects of DIR’s personnel processes. In addition, the incumbent must demonstrate the ability to use Internet, email, desktop applications and presentation software to complete assignments.

Physical Abilities

The position requires the ability for prolonged sitting and to work at a computer for extended periods of time and to move and transport office items in a safe manner.

Additional Requirements/Expectations

The incumbent must be dependable and have the ability to work cooperatively with staff at all levels

both within and outside the Department. The incumbent must have the ability to communicate effectively in order to complete work assignments. The incumbent must be willing to travel to the Oakland headquarters office.

Personal Contacts

The incumbent will have frequent interactions with members of the public and the general workers' compensation community. The Workers Compensation Consultant will work closely with other units within the Division and will handle highly sensitive personal identifiable information including, but not limited to, personal medical information of injured workers.

Employee Acknowledgment

I have read and understand the duties listed above and certify that I possess essential personal qualifications including integrity, initiative, dependability, good judgment, and ability to work cooperatively with others; and a state of health consistent with the ability to perform these assigned duties as described above with or without reasonable accommodation. If you believe a reasonable accommodation is necessary, discuss your concerns with the hiring supervisor. If unsure of a need for a reasonable accommodation, inform the hiring supervisor who will discuss your concerns with the Medical Management Unit in the Human Resources Office.

Employee Name	Employee Signature	Employee Sign Date

Supervisor Acknowledgment

I certify this duty statement represents a current and accurate description of the essential functions of this position. I have discussed the duties of this position with the employee and provided the employee with a copy of this duty statement.

Supervisor Name	Supervisor Signature	Supervisor Sign Date

HUMAN RESOURCES OFFICE APPROVAL

C&S Analyst Initials	Approval Date