State of California
Department of
Industrial Relations
EST. 1927

DUTY STATEMENT

☐ **CURRENT**

☒ **PROPOSED**

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

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

ASSIGNED SPECIFIC LOCATION	POSITION NUMBER
Oakland	400 – 604-9491-387

BARGAINING UNIT	WORK WEEK GROUP	BILINGUAL POSITION	CONFLICT OF INTEREST FILER	BACKGROUND CHECK
R01	2	No	No	No

General Statement

Working under the general direction and supervision of a Supervising Workers' Compensation Consultant, the Workers' Compensation Assistant (WCA) will learn and perform analytical and technical tasks of average difficulty related to the Qualified Medical Evaluator (QME) program. The incumbent reviews and processes QME panel requests in accordance with Labor Code statutes and regulations. The WCA communicates verbally and in writing and maintains effective relations with individuals within the workers' compensation community. 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**
40	The incumbent is responsible for analyzing, researching, and evaluating Qualified Medical Evaluators (QME) panel requests submitted by injured workers, claims administrators, and other members of the Workers' Compensation community. Objectively interprets and applies laws, rules, regulations and policies governing the QME panel request process. Consults with supervisor and/or Workers' Compensation Consultants, as appropriate, to recommend approval or rejection of panel requests. Processes decisions using case management systems to generate panel or rejection letter and communicates outcomes via written correspondence.
35	Provides general information and assistance to the public over the telephone. The nature of the calls include, but are not limited to, those requiring explanation and/or clarification of QME processes, the Labor Code, Medical Unit mandates, regulations, and time frame guidelines. Educates and assists injured workers, insurance carriers, attorneys, and other members of the workers' compensation community in an effort to correct incomplete or erroneously filed QME panel requests and to improve the quality of future submissions.
20	Performs other job-related tasks assigned to fulfill the operational needs of the Department of Industrial Relations and the Division of Workers' Compensation Medical Unit. These duties include, but are not limited to, assisting Workers' Compensation Consultants, processing panel requests and incoming correspondence, filing and scanning documents, and performing other QME and panel maintenance responsibilities such as inventory, boxing, shredding, and organizing folders, documents, and correspondence to/from Qualified Medical Evaluators.

Percentage of Time Spent	**Marginal Job Functions**
5	Assists with training on essential job functions and mentoring for subsequent WCA hires. Provides back-up coverage support and performs other job-related duties as assigned.

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 to 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. During your probationary period and/or once you become a permanent state employee, your work will be evaluated by your immediate supervisor. You and your supervisor will participate in the regular employee appraisal process throughout your career. This appraisal process affords you and your supervisor an opportunity to discuss your job performance and career development.

Supervision Received

The Workers Compensation Assistant reports directly to and receives the majority of assignments from the Supervising Workers' Compensation Consultant; however, direction and assignments may also come from others in management or Workers' Compensation Consultants.

Supervision Exercised

N/A

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

Work Environment

The incumbent will work 40 hours per week in a temperature controlled high-rise building with elevator access. The office setting has natural and artificial lighting, cubicles in close proximity to others, and is equipped with standard office equipment.

Special Requirements/Other Information

N/A

Physical Abilities

The incumbent must be able to transport office supplies such as reams of paper, folders weighing up

to 10 pounds, and batches of documents weighing up to 20 pounds.

Additional Requirements/Expectations

The incumbent will be required to work independently and also as part of a team.

Personal Contacts

The incumbent has frequent contacts with other staff within the Medical Unit. In addition, there is frequent verbal contact concerning panel requests with injured workers, attorneys, claims administrators, and other members of the Workers' Compensation community requiring professionalism, sensitivity and tact.

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