

# **DIVISION OF WORKERS' COMPENSATION**

## **EMPLOYMENT OPPORTUNITY**

**POSITION:** Insurance Specialist III (CPS)

**BUREAU:** Monitoring and Audit

**PAY GRADE:** 20 (\$34,455.96 - \$76,630.68)

**LOCATIONS:** Tallahassee

**SPECIAL NOTES:**

This position requires a security background check, including fingerprinting, as a condition of employment.

**REQUIRED ENTRY-LEVEL Knowledge, Skills and Abilities (must bring to the job):**

- Ability to prepare correspondence independently using Microsoft Word computer program.
- Ability to apply fundamental math procedures to calculate penalty assessments and verify computer calculations.
- Ability to review certain document evidence and determine accuracy and validity.

- Knowledge of the principles and techniques of effective verbal and written communication.
- Ability to communicate effectively
- Ability to establish and maintain effective working relationships with others.
- Ability to plan, organize and coordinate work activities.
- Knowledge of methods of compiling, organizing and analyzing data.
- Ability to maintain a high degree of accuracy and close attention to detail.
- Ability to understand and apply applicable rules, regulations, policies and procedures.
- Ability to handle telephone calls in a prompt, courteous and effective manner.
- Ability to deal with the public in a tactful and courteous manner.

**OTHER Knowledge, Skills, and Abilities (may learn on the job):**

- Knowledge of the principles of insurance and risk management

**DESCRIPTION OF DUTIES:**

This is work investigating and monitoring the business practices of insurance carriers, employers and servicing agents to ensure compliance with Workers' Compensation law and procedures, specifically, sections 440.13, 440.15, 440.185, 440.20, and 440.021, Florida Statutes.

Conducts investigations to acquire facts needed to issue penalty assessments against employers for violations of requirements for

making timely benefit payments to injured workers and violations of document filing requirements.

Conducts investigations and monitors carrier/TPA late indemnity payments and late filings with the Division to acquire facts needed to issue penalty assessments, documents penalty claim reviews, and requests various forms required by law for claim clarification and/or correction.

Communicate by telephone or by certified demand letter for resolution when the penalized party has not paid or protested the assessment within the 20 days provided for in section 440.021, Florida Statutes.

Credit payments to the proper case and request Department refunds when the assessment is incorrectly paid, or the claimant's portion of the assessment is sent to the Department.

Contacts by telephone employees, employers, insurance carriers/TPA's, other Division of Workers' Compensation Bureaus, attorneys, and other sources for information regarding employee/employer relationships, employer and carrier liability, claims process, etc., to determine validity of evidence to issue an action to reduce or revoke a penalty or deny a claim protest.

Provides interpretation of the Workers' Compensation Law, rules, and procedures regarding penalty assessments and advises employers, carriers/TPA's of their rights and responsibilities under the Law in effect on the date of an employee's accident.

Prepares and maintains a permanent record of all actions taken and decisions issued for inclusion in any hearings before Judges of

Compensation Claims, county court judges, and statistical purposes. Assists legal office in preparing cases for hearings by preparing detailed reports of progress and investigation results, and attends hearings, providing testimony when necessary.

Performs investigations of complaints regarding violations of the Workers' Compensation Law and Division rules as assigned by the Insurance Administrator and assignments referred to the Penalty Section from other governmental agencies. Investigates and monitors Workers' Compensation carrier practices, identifying and documenting patterns and trends of violation and recommends to the Insurance Administrator action necessary to bring such practices into compliance.

Performs other related duties as required.