



Bargaining Unit (Job) Profile

JOB TITLE SENIOR INJURY ADJUSTER		SALARY GROUP 11
JOB CODE 248871	CLASSIFICATION DATE January 14, 2013	
SUPERSEDES JOB/CODES		
DIVISION Claims	JOB STATUS Bargaining Unit	

PURPOSE

To perform adjusting at the full working level, managing a caseload of medium risk represented and litigated claims, involving moderate complexity and sensitivity of a medical and legal nature. Handles cases through all stages of investigation, evaluation, case development, and settlement.

JOB REQUIREMENTS

Knowledge/Technical Skills

- of the relevant acts, regulations, legislation and jurisprudence pertaining to medium risk injury claims
- of the principles, theories, standards, practices and techniques pertaining to the adjustment and litigation of medium risk injury claims
- of the relevant department and corporate policies, procedures, guidelines and other reference materials pertaining to adjustment and litigation of medium risk injury claims
- of the etiology of traumatically induced disability, theory of differential diagnosis, and science-based outcomes (developing knowledge)
- of case development as it pertains to medium risk injury claims
- of medical and legal terminology
- of court proceedings, supreme court rules, and the preparation of evidence and file material for the litigation of medium risk injury claims
- of the relevant department and corporate databases and systems to access and research information and conduct analysis
- of corporate programs, products and services
- of the insurance industry

Analytical/Problem Solving Skills

- to plan and conduct investigation of medium risk injury claims
- to interpret, analyze and conduct research on expert reports, judgements, legal opinions, regulations, legislation and other related references
- to adapt/develop strategies for the unique variables of each case
- to use judgement in evaluation of entitlements, coverage, liability and quantum

Communication/Interpersonal Skills

- to establish effective working relationships with staff, specialists, professionals, and other stakeholders in medium risk injury claims
- to interact and negotiate settlement of medium risk injury claims with plaintiff counsel
- to collaborate with and direct defense counsel in developing/adapting strategies for settlement of medium risk injury claims
- to conduct credible, professional defense presentations of moderate complexity in all legal forums, but most typically mediation



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Organizational Skills

- to plan file work, set priorities and utilize time effectively
- to manage a multi-file caseload of medium risk injury claims
- to maintain research information as it pertains to medium risk injury claims
- to maintain file documentation

Physical/Concentration Ability

- to maintain vigilance and attentiveness during legal proceedings and settlement discussions
- to handle multiple demands, interruptions and time pressures
- to maintain mental and visual concentration while reviewing moderately complex claims files and analyzing technical reports
- to carry file materials to meetings and for occasional travel to lawyers offices and legal proceedings

Leadership Skills

- to instruct claims investigators, and liaise with professionals and specialists in regard to the investigation and settlement of medium risk injury claims

Work Environment

- involves occasional travel to law firms and legal forums

The above requirements would typically be acquired through an undergraduate degree in business or general sciences and a professional designation in progress (i.e. CIP or CRM)), plus several years' experience in injury claims adjusting or an equivalent combination of education and experience.

Licensing/Accreditation-Due to the specific nature of the work, the following license must be held:

- valid BC Driver's license
- professional designation in progress (i.e. CIP, CRM)

TYPICAL RESPONSIBILITIES

Responsibilities are similar to those of the Injury Adjuster, but are differentiated primarily by the represented and litigated nature of the assigned medium risk files, and by the experience and latitude exercised in managing those cases.

Portfolio

Manages a caseload of medium risk represented and litigated injury files that do not meet the criteria for high risk injury claims.



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Investigation & Evaluation

Investigates claims, which may involve instructing claims investigators and liaising with professionals and specialists for the purpose of gathering case information. Interprets, analyzes and conducts research on expert reports, case law, legal opinions, jurisprudence and other relevant information. Evaluates entitlements, coverage, liability and quantum.

Case Development

Directs defense counsel, exercising latitude to adapt/develop strategies for the unique variables of each case. Works within established work plan, practices, and the framework of Supreme Court rules, acts, regulations, legislation and policy. Develops evidence and file materials as necessary for those cases that proceed to litigation.

Settlement

Conducts credible, professional defence presentations of moderate complexity in all legal forums, but most typically in mediation. Negotiates settlement of claims within reserve and settlement financial limits. Emphasis is on initiating file resolution; avoids engaging the litigation process unless necessary.

File Documentation

Maintains detailed and up-to-date file documentation for caseload. Completes appropriate forms and maintains information on claims computer systems.

Performs other related duties that do not affect the nature of the job.



Bargaining Unit (Job) Profile

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SUPERSEDES JOB/CODES		
DIVISION Claims	JOB STATUS Bargaining Unit	

PURPOSE

To perform adjusting at the developing level, managing a caseload of unrepresented injury claims, involving some complexity of a medical nature. Handles cases through all stages of investigation, evaluation, file development and settlement. Assigned cases that escalate in risk and/or become represented are referred to a more senior adjuster.

JOB REQUIREMENTS

Knowledge/Technical Skills

- of the relevant acts, regulations, and legislation pertaining to unrepresented injury claims
- of principles, standards, practices and techniques pertaining to the adjustment of unrepresented injury claims
- of the relevant department and corporate policies, procedures, guidelines and other reference materials pertaining to adjustment and litigation of unrepresented injury claims
- of claims file development as it pertains to low unrepresented injury claims
- of basic medical terminology
- of the relevant department and corporate databases and systems to access and research information and conduct analysis
- of corporate programs, products and services
- of the insurance industry

Analytical/Problem Solving Skills

- to plan and conduct investigation of unrepresented injury claims
- to interpret, analyze and conduct research on information pertaining to unrepresented injury claims
- to work with some latitude to interpret and apply framework to the unique variables of each claim
- to evaluate entitlements, coverage, liability and quantum

Communication/Interpersonal Skills

- to establish rapport and credibility with customers, involving ability to listen, demonstrate empathy, and provide clear explanations, while striving to build trust
- to establish effective working relationships with staff and other stakeholders in unrepresented injury claims
- to negotiate settlement of unrepresented injury claims directly with customers

Organizational Skills

- to plan file work, set priorities and utilize time effectively
- to manage a multi-file caseload of unrepresented injury claims
- to maintain research information as it pertains to unrepresented injury claims
- to maintain file documentation



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Physical/Concentration Ability

- to maintain vigilance and attentiveness during settlement discussions
- to handle multiple demands, interruptions and time pressures
- to maintain mental and visual concentration while reviewing claim files involving some complexity
- to routinely rotate through phone queue during which a headset is worn and there is limited freedom to move about

Leadership Skills

- to instruct claims investigators for the purpose of gathering file information

Work Environment

- to work in a typical office environment
- to handle adverse customer face to face occasionally

Must meet the provincially legislated requirements of the Criminal Records Review Act (CRRA).

The above requirements would typically be acquired through an undergraduate degree in business or general sciences preferably, or a diploma in a related discipline (e.g. insurance & risk management) and a professional designation in progress (i.e. CIP or CRM), plus several years' experience in injury claims adjusting or an equivalent combination of education and experience.

Licensing/Accreditation-Due to the specific nature of the work, the following license must be held:

- Professional designation in progress (i.e. CIP, CRM)

TYPICAL RESPONSIBILITIES

Portfolio

Manages a caseload of unrepresented injury files.

Customer Service

Establishes rapport and credibility with customers, striving to build trust and mitigate potential for representation. Explains claims processes and entitlement and obtains medical, wage loss, and collateral information as necessary.

Investigation & Evaluation

Investigates claims, which may involve instructing claims investigators for the purpose of gathering file information. Interprets, analyzes and conducts research on information pertaining to unrepresented injury claims. Evaluates entitlements, coverage, liability and quantum.



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File Development

Works within established work plan, practices, basic strategies, acts, regulations, legislation and policy with some latitude to interpret and apply framework to the unique variables of each claim.

Settlement

Negotiates settlement directly with customers within reserve and settlement financial limits. Emphasis is on achieving settlement without escalation to representation.

Accident Benefits

Administers accident benefits pertaining to unrepresented injury claims.

Subrogation & Recovery

Collects monies owed to the corporation arising from claims or insurance coverage. Contacts other insurance organizations for subrogation.

File Documentation

Manages all file documentation.

Performs other related duties that do not affect the nature of the job.