



JOB ANNOUNCEMENT

For Internal and External Candidates

CLAIMS REPORT EDITOR

Department: Member Benefits Systems (MBS)
Reports to: MBS Assistant VP
Closing Date: Open Until Filled

This is a full-time non-exempt position. Hours are generally 8:00 a.m. to 5:00 p.m. Monday through Friday.

SUMMARY OF JOB

The Claims Report Editor resolves and adjudicates medical, vision and Medicare claims by performing the following duties:

- Processes claims (pay, pend, deny) and prior approvals timely and accurately.
- Reviews claims information to determine the nature of a member's illness or injury.
- Determines and understands the coverage provided under a member's plan.
- Manages their time and workload effectively to ensure all service levels are maintained.
- Makes claim payment decisions.
- Assists team members in support of achieving department and office goals.

QUALIFICATIONS

- Knowledge of medical terminology, CPT codes and ICD10.
- Knowledge of Medicare Secondary Payer and Coordination of Benefits rules.
- Excellent keyboarding skills (keyboarding 40-50 wpm/10-key minimum 9,000 keystrokes per hour with above average accuracy). Testing results are required.
- Exceptional organizational and analytical skills with ability to prioritize work load.
- Advanced computer navigation and knowledge with experience using web based programs.
- Effective verbal and written communication skills.
- Ability to adapt quickly and willingly to change.
- Positive attitude with excellent attendance.

EXPERIENCE AND EDUCATION

- Two or more years of related experience.
- High school diploma. Or equivalent.

APPLICATION PROCEDURE

Submit resumes via email to kmaughan@emihealth.com.

Current employees must have completed their six month probationary period before applying for any position vacancy and must be "meets" or above on their last performance review.