



## **JOB ANNOUNCEMENT**

**For Internal and External Candidates**

### **CLAIMS MANAGER**

**Department:** Member Benefit Systems  
**Reports To:** Chief Operations Officer  
**Closing Date:** Open Until Filled

Become a part of EMI Health's growing organization. EMI Health is an employee benefits firm providing insurance products to companies and individuals in Utah, Arizona and Texas. We provide our employees with an outstanding benefit package that includes paid medical and dental coverage for employees, paid time off, holiday pay, vision, life, disability, HSA and retirement savings plans. In addition, we provide our employees with a fully equipped onsite fitness center and subsidize mass transit passes. We are a tobacco free workplace, hiring non-tobacco users only.

EMI Health is an EEO employer as defined by the EEOC.

**SUMMARY OF JOB:** Under the direction of the COO, the Claims Manager is responsible for managing the daily activities of the Claims Department according to department and company policies and procedures. This is a full-time, exempt position. Hours are generally 8:00 a.m. to 5:00 p.m. Monday through Friday.

#### **PRIMARY RESPONSIBILITIES:**

- Manages medical, dental and vision claims department composed of Claims Processors and Claims Editors.
- Prioritizes department tasks and delegates work assignments to accomplish department goals.
- Oversees claim inventory and production to ensure that staff meets production standards and all federal and state processing guidelines.
- Oversees quality assessment of staff output to ensure that staff meets quality standards.
- Screens, hires and ensures that new personnel are properly trained.
- Oversees the Claims Appeals inventory and review process.
- Handles conflict resolution within the department.
- Resolves escalated issues, questions, and research items received from other departments.
- Develops and provides reports, makes recommendations and works alongside management.
- Evaluates processes for improvement and supports all departmental initiatives in improving overall efficiency.

#### **EDUCATION, EXPERIENCE AND QUALIFICATIONS:**

- Associates degree (Bachelors preferred) or minimum of five years related experience in a similar position; or equivalent combination of training and experience.
- Working knowledge of claims payment systems.
- Thorough understanding of CPT, HCPCS, and ICD9/ICD10 coding procedures and guidelines.
- Knowledge of terminology specific to medical, dental, and vision benefits.

- Knowledge of State and Federal regulations related to the health insurance industry. (COB, Medicare, COBRA, ACA, HIPAA, etc.)

**APPLICATION PROCEDURE:**

Internal candidates submit an Application for Position Vacancy to Ann Green-Barton. External candidates submit cover letter and resume to [agreen-barton@emihealth.com](mailto:agreen-barton@emihealth.com).

***Current employees must have completed their six month probationary period before applying for any position vacancy and must be “Meets Plus” or above on their last performance review.***