



## **CLAIM SERVICES ASSOCIATE – Winnipeg**

### **ABOUT ELLEMENT**

Ellement Consulting Group (Ellement) is a privately-owned actuarial consulting firm that has been providing actuarial, administration, software programming, and consulting solutions for pension, benefits, and investment programs for individuals, corporations, unions, associations, and governments for programs based in Canada since 1996.

Our mission is to design, implement, and manage employee benefit programs for individuals and institutions to provide economic security at a reasonable and affordable cost.

We currently have a great opportunity for a Claim Services Associate to join our **Winnipeg** team.

### **POSITION SUMMARY**

Reporting to the Director, Administration (Edmonton). The Claim Services Associate responds to inquiries from members of Trust Fund and Corporate clients, and service providers relating to all aspects of health benefit plans administered by the company.

As the front-line contact for members of Trust Fund and Corporate clients and service providers, the Claim Services Associate is expected to provide exceptional levels of customer service.

Individuals initiating contact with Claim Services require accurate, complete, and timely information. Therefore, the Agent interacts not only with callers and people coming into the office with inquiries, but also with other internal service areas.

### **KEY ACCOUNTABILITIES AND RESPONSIBILITIES**

- Respond to emails from members of Trust Funds, health service providers, representatives of local union offices and Trustees of health Trust Funds relating to health benefit plans.
- Inquire on eligibility for benefits, details and interpretation of client-specific benefit plans, coverage of services and products under specific benefit plans, and claims payment issues.
- Answer basic questions concerning how to apply for Weekly Disability benefits or submit request for Freezing of Hours for Trust Fund clients.
- Use on-line system to investigate details and determine response, providing accurate and comprehensive information to callers in an efficient manner, recommending appropriate courses of action, and advising callers of alternatives.
- Investigate inquiries that cannot be responded to immediately (i.e., potential coverage of new or non-routine procedures and therapies under specific benefit plans) by researching information to determine appropriate responses.
- Identify problems or errors and recommend or implements solutions.

- Ensure the person making inquiry is contacted within the next business day with a response or update on the status if the issue is unresolved.
- Complete computerized call log for each inquiry received, recording name of caller, nature of inquiry, summary of response, requirement for follow up, etc. Log complaints and recommends level of response according to pre-established guidelines.
- Compile information as requested for members and health service providers prior to mail out (i.e., manuals, claim forms, registration forms, eligibility packages) and submit request to Reception via an Activity in DEBS
- Contact Local Union offices for member address updates.
- Contact members regarding stale dated cheques.
- Complete claim inquiries as directed within set service standards.
- Contact 3rd party drug claim adjudicator on behalf of members/employees to confirm if a prescription drug claim has been processed or should be processed.
- Complete work history reports for Trust Fund clients as requested.
- Any other duties needed to help drive to our Vision, fulfill our Mission, and abide by our Organization's Values

#### **REQUIRED SKILLS AND EXPERIENCE**

- Post-secondary diploma in a related field, such as business administration or equivalent training acquired from a combination of relevant work experience and education.
- Must have demonstrated ability to stay organized and multi-task
- Working knowledge of group benefits, insurance policies and claim processes.
- Attention to detail and commitment to accuracy of work.
- Proven customer service experience
- Excellent communication, negotiation, and interpersonal skills
- Ability to work independently and with a team
- Strong organizational and time-management skills
- Computer literacy and proficiency with Microsoft Office
- Successful completion of criminal record check is required.

At Ellement, we believe in investing in our business and operating it as effectively as we can. One of the best ways we know is by hiring great people. We also know that by investing in our employees and encouraging ongoing education, upgrading, and training, we're building an environment where staff feel supported, involved, and engaged. We offer a challenging, team-oriented work environment, competitive compensation, and benefits package, and ongoing support for your professional and personal growth.

If interested, please apply directly to [Claim Services Associate at Ellement Consulting Group | Jobs at Ellement Consulting Group \(gohire.io\)](#)

We thank all candidates who apply, however, only those selected for a personal interview will be contacted.