EMPLOYEE BENEFITS CLERK

DISTINGUISHING FEATURES OF THE CLASS: This is clerical work of a moderately complex nature which requires a good knowledge of the laws, rules and regulations pertaining to health and dental insurance and related benefits programs. The work requires substantial public and employee contact and is performed under the general supervision of a higher level employee with considerable latitude for independent action. Supervision and training may be given to one or more lower level clerical employees. Does related work as required.

TYPICAL WORK ACTIVITIES:
Provides information to employees regarding all aspects of the health and dental programs, life insurance, retirement benefits, etc., and clarifies any problems as they may arise;
Distributes, reviews and processes all major medical claims for both active and retired employees;
Verifies employee’s insurance coverage under the Blue Cross, major medical or other appropriate insurance carrier as required;
Processes enrollments for health and dental programs including issuing of handbooks;
Corresponds with insurance companies to correct problems and errors with regard to billing and coverage;
Invoices and bills retirees and COBRA employees;
Calculates and processes reimbursement of Medicare payments to eligible individuals;
Processes Workers’ Compensation reports and completes requests for wage reimbursement and wage information;
Maintains records of job related accidents and illness and prepares and processes annual report to New York State Department of Labor;
Completes employment verification and wage information requests from Department of Labor regarding unemployment insurance claims, and from agencies such as Social Services, banks, credit institutions, etc.;
Maintains files of enrollment cards, medical claims, compensation reports and related data;
May prepare and process quarterly reports to New York State Department of Labor regarding total number of employees and total salaries paid;
May serve as a receptionist/telephone operator and perform general clerical duties.

FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL CHARACTERISTICS:
Good knowledge of arithmetic and the English language; good knowledge of basic principles, purpose, content and intent of health and dental insurance and related benefits programs as administered within a municipality; ability to understand and interpret laws, rules and regulations pertaining to health and insurance programs; ability to establish and maintain cooperative work relationships; ability to communicate effectively both orally and in writing.

MINIMUM QUALIFICATIONS:
Graduation from high school or possession of an equivalency diploma, and four (4) years of office clerical or business experience, at least two (2) years of which required personal interaction with other employees or department-agency clientele as a regular aspect of the job*, and at least one (1) year of which included a significant involvement with employee benefits, specifically health insurance such as processing claims and explaining benefits.

(over)
NOTES:

1. An Associate's degree or higher in Business Administration or comparable curriculum may be substituted for two (2) years of the required office clerical or business experience.

2. A Bachelor's degree or higher in Business Administration, Human Resources Management or comparable curriculum may be deemed fully qualifying.

*(Qualifying personal interaction experience includes but is not limited to such work activities as acting as receptionist, answering the telephone, directing or referring visitors, answering questions concerning the purpose or activities of a unit, discussing the availability of and retrieving information in response to specific requests, dealing with the public, interviewing applicants, claimants or other clientele, sales, market research, direct supervision over and responsibility for the work of others, etc. Strictly social interaction shall not be considered as qualifying.)*