PERSONNEL COORDINATOR (EMPLOYEE BENEFITS)

DISTINGUISHING FEATURES OF THE CLASS: This is supervisory and technical work of a difficult nature that involves responsibility for the oversight and coordination of policies and practices regarding the administration of health insurance and employee benefits programs, as well as risk management, as assigned. The work is distinguished from that of a Benefits Coordinator (Insurance) in the complexity of assignments, independent decision-making responsibilities, and administrative responsibilities. General direction is received from the Commissioner of Personnel and supervision is provided to clerical and technical personnel. Does related work as required.

TYPICAL WORK ACTIVITIES:
Develops and implements policies and procedures regarding health insurance and employee health benefits programs;
Identifies and prepares reports regarding new developments in health insurance and employee benefits programs and makes recommendations for changes in programs, as appropriate;
Evaluates health insurance and employee benefits costs, the efficacy of programs, changes in New York State legislation, etc. and prepares reports regarding same, including recommendations regarding relevant provisions in collective bargaining agreements, plans for future programs and benefits, employee choices regarding health insurance options, etc.;
Reviews Request for Proposals (RFPs) and acts as liaison with plan administrators/insurance carriers order to discuss provisions of plans, ensure that there has been no diminution of benefits, resolve problems, clarify information, and participates in the review and negotiation of the annual health and dental plan renewals and makes effective recommendations for change, especially with respect to reducing insurance costs;
Gathers and organizes information regarding employee benefits programs in order to ensure compliance with New York State and federal requirements and provide a management tool for decisions;
Coordinates risk management initiatives, as assigned, including but not limited to gathering and integrating data, acting as liaison with consultants, making recommendations regarding benefits plans, identifying risks, etc.;
Develops, coordinates, and completes special projects pertaining to health insurance, employee benefits programs, risk management, etc. and presents findings both orally and in writing;
Coordinates and oversees the day-to-day functions of the County's health insurance and related benefits programs;
Oversees and participates in the provision of information to employees and retirees regarding all aspects of health, dental, and vision programs;
Oversees the processing and maintenance of enrollments and insurance records;
Acts as chief liaison with insurance carriers to resolve problems with respect to billing, coverage, procedures, etc. and to ensure that required documentation for each plan is current;
Oversees and participates in the verification of insurance coverage and eligibility for employees and retirees in accordance with the terms of collective bargaining agreements;
Organizes and conducts annual open enrollment seminars for County employees;
Interacts with County departments to develop solutions regarding benefits (e.g. benefits related to employee terminations);
Develops and oversees the distribution of handbooks, newsletters and bulletins relative to health insurance programs;
Oversees and participates in a wide variety of health insurance-related activities (e.g. the calculation of premium deductions for part-time employees, the processing of statements of dependence and domestic partnership applications, verification of insurance coverage and eligibility for employees and retirees

(over)
FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES, AND PERSONAL CHARACTERISTICS:
Thorough knowledge of the County of Rockland health insurance programs; thorough knowledge of federal, New York State, and local rules and regulations that affect employee benefit plans; ability to communicate effectively, both orally and in writing; ability to understand and interpret federal, New York State, and local regulations and requirements and implement changes, as needed, pertaining to health insurance benefits; ability to establish and maintain cooperative relationships with others; ability to use computer software in the completion of assignments*; ability to prepare written reports and correspondence; ability to supervise the work of others.

MINIMUM QUALIFICATIONS:
1. A Bachelor’s degree and four (4) years of technical, supervisory, or managerial experience in a municipal (e.g., county, state, federal, or local) health insurance office; or

2. An Associate’s degree and six (6) years of technical, supervisory, or managerial experience in a municipal (e.g., county, state, federal, or local) health insurance office.

*To be demonstrated during the probationary period.

R.C.D.P. 01.03.2018
Competitive