

# **BENEFITS SPECIALIST (GTCMHIC)**

## **Tompkins County**

**Department:** GTCMHIC

**Classification:** Competitive

**Approved:** 11/2020

**By:** LG, Deputy Commissioner of Human Resources

### **MINIMUM QUALIFICATIONS:**

1. Graduation from a regionally accredited or New York State registered four-year college or university with a Bachelor's Degree AND two (2) years of full-time paid (or the equivalent part-time) experience in employee fringe benefits; OR
2. Graduation from a regionally accredited or New York State registered two-year college AND four (4) years of full time paid (or the equivalent part-time) experience in employee fringe benefits; OR
3. Graduation from a high school or possession of a high school equivalency diploma AND six (6) years of full-time paid (or the equivalent part-time) experience in employee fringe benefits; OR
4. Any combination of training and experience equal to or greater than that specified in (a), (b) and (c) above.

**The GTCMHI Consortium is Committed to Equity and Inclusion. We encourage those with similar values to apply.**

### **DISTINGUISHING FEATURES OF THE CLASS:**

This position involves responsibility for performing various health insurance and wellness activities for the Consortium. An employee in this position is responsible for analyzing, planning, developing, publicizing, problem solving and administering health insurance and wellness programs for the members of the Consortium. The work requires maintaining a relationship with the member municipalities, medical and prescription benefits providers, and finance staff. The Benefits Specialist, with assistance from providers, will be the expert on benefits and advise the Board, member management and their employees on best practices for obtaining maximum utilization and benefit from programs with the least cost to the taxpayer and consumer. The employee will work under general direction of the Executive Director and is expected to exercise a high level of autonomy and good independent judgment when carrying out the duties of the position. Supervision of subordinate staff is not generally a function of this position but may provide guidance to support staff. The incumbent will perform all related duties as required.

### **TYPICAL WORK ACTIVITIES:**

- Provides excellent customer service while serving as a liaison for members as they navigate the complexities of the various benefit programs administered by the Consortium;
- Coordinates with a third-party vendor to administer the various health insurance plans;
- Coordinates and administers the various prescription drug programs on behalf of the Consortium;
- Performs data entry to the third-party vendor website to maintain subscriber information as related to the various health insurance plans for member municipalities;
- Performs data entry to add participants and data maintenance to remove participants or deactivate accounts for member municipalities during new member orientation, open enrollment and whenever necessary;
- Assists with the appeal process of the health insurance plans;
- Answers benefit questions for member management, employees, dependents, survivors, retirees, hospitals, doctors, lawyers or various providers;
- Collaborates with other personnel on changes which may affect monthly bills from health insurance carriers, follows up with carrier and/or provider on enrollment problems;
- Formulates, implements and monitors procedural policies related to health insurance;
- Analyzes health/dental benefit programs and costs/exposure and recommends programs to contain costs and reduce liability;
- May support member municipalities in negotiations by designing and costing out benefit proposals and recommending changes to existing programs;
- May support new member municipalities with plan comparisons and evaluating Consortium membership;

- May support new member municipality marketing by coordinating new member marketing meetings and the creation of supporting material;
- Acts as a consultant or resident expert for a wide variety of employee-employer health insurance problems;
- Maintains records to provide for health insurance premium payments;
- Assists with claim filing or research when questions arise on payments, changes, benefits program provisions, etc.;
- Provides information on Summary Plan Descriptions and COBRA when necessary;
- Works with all benefit carriers to monitor costs which effect experience ratings, premiums and/or contract charges, employees' claims and/or payments;
- Assists with the development of the Newsletter and or may act as Newsletter Editor;
- Completes various periodic reports and forms as requested;
- Develops Wellness programs in consultation with others and assists with communication of such programs;
- Maintains reference materials and updates, relative to benefits areas;
- Schedules and assists providers with informational sessions, enrollment meetings as requested;
- Performs follow-up with employees, medical providers and carriers, including filing supplemental forms to assure that employees receive timely and correct benefits and reimbursement for out-of-pocket expense;
- Conducts studies and analyzes a variety of reports and makes recommendations to the appropriate management staff;
- Researches and summarizes reports for the Executive Director or Consortium;
- Participates in meetings concerning insurance plans which have an impact on consortium finances;
- Assures the achievement of applicable organizational goals and objectives;
- Supervises the assembly of all documents in connection with Consortium meetings;
- Responsible for compliance with records retention program;
- Works with other consortium staff and consultants in development and implementation of programs requiring collaboration and cooperation;
- May train, direct, review, lead and supervise other personnel and activities as it relates to benefits administration and enrollment;
- Follows and ensures compliance with safety rules and general work regulations and policies;
- Perform other duties as required.

**KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL CHARACTERISTICS:**

- Working knowledge of policies, procedures, negotiated provisions and legal requirements in all benefit areas;
- Working knowledge of laws, rules and regulations pertaining to employee benefit programs;
- Working knowledge of personnel procedures to allow correct interpretation and application of benefit areas of negotiated union contracts;
- Working knowledge of office technology, procedures and equipment;
- Working knowledge of Microsoft office including Excel, Word and Publisher at an intermediate level.
- Working knowledge of public administration as it applies to local government;
- Working knowledge of English and statistical techniques;
- Good knowledge of principles, practices and techniques of personnel administration;
- Ability to communicate effectively and accurately, both orally and in writing;
- Ability to understand, and interpret complex written material, including Federal and State laws, contract language, collective bargaining agreements, etc.;
- Ability to prepare, maintain and follow up on independent correspondence, necessary forms, reports and records as required to enable correct and timely administration of benefit areas;
- Ability to relate well with a variety of municipal representatives, employees, staff, management, providers, consultants, etc.;
- Ability to operate a personal computer as required, either with or without reasonable accommodations;
- The employee's physical and mental condition shall be commensurate with the demands of the position, either with or without reasonable accommodations.

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