Insurance should be reliable

We work hard to make sure you get exactly what you need to protect yourself and your loved ones without spending your life's savings.

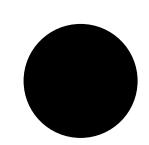
Providing better care for over a decade

Elite Insurance Brokers was started by Petros Kallidis in 2002 in Dubai, and over the years, we have worked hard to build a solid base for our clients through competitive pricing and by continuously improving and expanding our products and services. Today, our customers can purchase insurance directly from us online or by phone.

Simple tools to manage your insurance

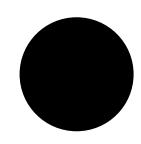
We've experienced the hassle of searching for the right insurance, so we're doing everything we can to give you a better and simpler experience. We'll give you quotes, plans you can understand, tools that save you time, and answer any questions you have. Our helpful agents will even walk you through the details whenever you need us.

Insurance specifically for you



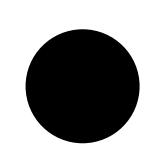
We'll do the research

We'll submit your application directly to the insurance company and handle forms so you don't have to. We'll also keep you posted throughout the process.



We find the most cost-effective plans

We're authorized to sell plans with every major insurance company and we have bulk rates that help us get you the best quotes without sacrificing quality.



We take your privacy seriously

Your private details are safe. We'll never share your information without your permission, and it won't be used to increase the cost of your plan.

Help us make insurance simple

Find a job you'll love at EIB.

Join the Team

Explore helpful resources

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Get started with a quote in minutes

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Join our team of doers



Analyze

Operations, Technical, Finance

We're using a tech-driven, data filled approach to give better care for lower costs.

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Care

Customer Service & Claims

We're providing a positive experience for our members and our team.

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Grow

Sales & Marketing

We're enabling more people to experience simple, smart, and friendly insurance.

See Job Openings >

Benefits



Health and Wellness

We care about our associates' well-being. You can choose from a variety of health plans, stay fit at one of our on-site fitness centers, or even participate in a company-sponsored athletic team.



Time Off

Time well-spent outside the office is important. That's why we've included a variety of leave programs so that our associates can maintain a healthy work/life balance.



Education and Training

We believe in lifelong learning, and offer a range of career development programs, including industry-leading training, tuition reimbursement, mentoring programs and family scholarships.



Financial Security

Make your future bright. We offer performance-based promotions, 401(k) plans, profit sharing awards, flexible spending accounts, and more

Join our Team

We foster a work environment where everyone is required to risk, learn, grow and perform.

Administration

Account Manager – Auto

Position title here	>
Customer Service	
Customer Service Executive	>
Claims Examiner	>
Finance	
Accounts Manager	>
Operations	
Operations Associate – Claims	>
Sales & Marketing	
Communications Associate	>
Sales Manager	>
Technical	
Account Manager – Medical	>

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Claims Examiner

Customer Service

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Role description

In this role, you will process and investigate our clients' claims. You will ensure timely and accurate adjudication of claims, uncover process discrepancies, and answer escalated customer and provider questions. Additionally, we will be looking to you to help us build our claims examination processes.

Qualifications

A curious mind and attention to detail.

Willingness to grow, learn and work as a member of a cross-functional team.

A minimum of 5 years experience examining medical claims with an insurance carrier or third party administrator.

Thorough knowledge of of adjustment processing, medical terminology, CPT, and revenue codes.

Strong quantitative analysis skills.

Strong Excel and initial SQL skills (or the ability to pick it up quickly).

Strong verbal and written communications, and interpersonal interactions (e.g. partnering, conflict management, consulting, etc.).

Ability to work independently and drive projects to completion.

A bachelor's degree

In depth knowledge of claims processing protocols and payment schemes.

Experience handling Personal Health Information (PHI) in a professional manner.

Experience manipulating and entering accurate data in a production driven environment.

A relevant professional designation or certification (AIC, ICD 9/10, etc)

Demonstrated capacity to balance competing priorities and continue to execute projects with excellence.

Position Details

An excellent grasp of the claims system and overall workflow.

Developed a comprehensive understanding of the claims review processes that currently exist and additional processes that are needed to improve consistency and quality of review.

Become well-acquainted with internal tools and technical processes.

Worked to drive down the pending queue of claims issues.

Prepared and presented status of pending claims issues and developed initial action plans to reduce.

Begun to form strong working relationships with internal and external stakeholders.

Become an inhouse expert on all claims related matters to answer questions on the adjudication process and individual claims.

Support the claims team by identifying issues and presenting resolutions.

Take ownership of all claims processing issues; monitoring, tracking, and statusing the health of the operation.

Manage the escalation and resolution process with external vendors to ensure appropriate turnaround times.

Contribute to team wide goals to improve claims processes and integrate additional functions into our daily operations.

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Phone Number	Email Address
City	How did you hear about this job?

Attach Cover letter

<u>Attach CV</u>

Submit Application

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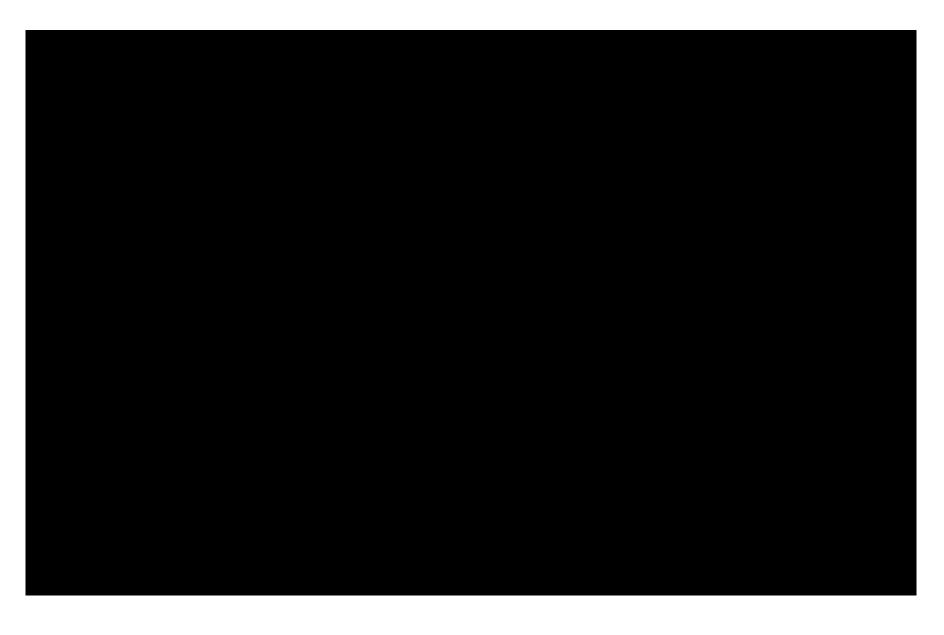
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