



Career Opportunities

Claims Arbitrator - Medical

CMN Global Inc. (www.cmn-global.com), a Europ Assistance Group company (www.europ-assistance.com), is a global firm with over 7,000 employees. CMN has been in Markham area for over 10 years, and serves international health insurance companies by managing medical treatment provided in the US and Canada.

CMN provides medical case management, claims processing and manages its own PPO network to discount US medical claims and has grown from 40 employees in 2005 to over 200 currently. Providing excellent service and communication to our clients is crucial to our customers' success.

CMN invests in their staff; see a list of some of the benefits that we provide our staff:

- Comprehensive group benefits plan
- Group RRSP
- Recently implemented wellness plan
- Free parking

With the growth that CMN is experiencing, there is a requirement for a **Claims Arbitrator - Medical** to work with our international clients. Please visit us at www.cmn-global.com to see how we help patients, reduce health costs and maintain a strong employee culture.

Duties:

- Manage a daily running inventory of negotiable claims.
- Review and prioritize negotiable claims based on processing criteria, timelines, interdepartmental demands, member benefits and regulatory criteria.
- Evaluate and research claims for reasonableness of total billed charges based on industry standards.
- Contact provider(s) to discuss reimbursement of charges while obtaining signed approvals or Letters of Agreement.
- Ensure that unpaid claims are reviewed, negotiated and paid in a timely fashion.
- Participate in an on-going process of developing efficiencies and strategic approaches to streamlining cost management strategies around claims and contracts with providers.
- Responsible for handling 25-30 claims.
- Work with clients and providers to resolve claim related matters (payment disputes, statuses, additional information, etc.) in a timely fashion.

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Qualifications:

- Minimum 1 year experience working with and repricing US claims.
- Post secondary education or equivalent.
- Exceptional organizational, interactive, and communication skills – phone experience preferred.
- Must be flexible and able to work in a dynamic environment where priorities may shift daily.
- Experience developing and fostering productive working relationships with provider offices through ongoing communications by means of phone, email, facsimile, or as necessary.
- Moderate to high level of claim coding, RVU and CMS-based pricing knowledge with an emphasis in researching solutions for the above items as needed.
- Strong analytical, mathematical, service, and solution oriented skills are required.

Assets:

- LOMA/LIMRA designation a plus
- Operational experience in Claims and Repricing department.

If this describes your skills, please apply by submitting your resume with cover letter to: hr@cmn-global.com. Please indicate the job title **Claims Arbitrator - Medical** in the subject line or fax your resume to: **905-669-2318**.