VACANCY ANNOUNCEMENT

Montana University System  
Office of the Commissioner of Higher Education  
560 North Park Avenue / P.O. Box 203201 / Helena, MT 59620-3201

Job Title: Benefits Specialist  
Position #: 51266004  
Location: Helena, Montana  
Wage: $24.00 to $25.00 per hour depending on qualifications  
Status: Full-time

The Office of the Commissioner of Higher Education (OCHE) in the Montana University System (MUS) invites applications for the position of Benefits Specialist.

The MUS is the state-supported system of higher education in Montana governed by the Board of Regents and administered by the Commissioner of Higher Education. The MUS enrolls more than 40,000 students at 16 public universities and colleges in one of the most beautiful and geographically diverse states in the nation.

The Benefits program staff is responsible for administering a comprehensive Group Benefits Plan (the Plan) for university faculty, staff, retirees, and their eligible dependents. The self-insured plans include comprehensive Major Medical, Dental, and Prescription Drug plans. The Plan also offers insured products in the Life, AD&D, Vision, and Long-Term Care, Flexible Spending Accounts, and Wellness programs. In addition, the Benefits staff is responsible for administering the retirement plans offered by the MUS which include a 401(a) Defined Contribution Plan and a supplemental 403(b) Deferred Compensation Plan.

A multi-campus advisory group known as the Inter-Unit Benefits Committee (IUBC) makes recommendations on policy questions affecting the program. IUBC has members comprised of faculty, staff, labor, and management representatives. The group and/or its subcommittees meet on approximately a quarterly basis.

The position is a full-time classified staff position covered by the Montana University System Staff Compensation Plan. MUS staff are eligible for employee benefits (health insurance, sick leave and vacation leave, state holidays and retirement program) in accordance with state law. MUS employees are eligible to use certain college tuition waivers in accordance with Board of Regents policy.
The **Benefits Specialist** serves as a point-of-contact for Plan members regarding Plan questions, assistance in resolving benefit issues, and addressing concerns. This involves understanding benefit plan programs and the ability to share plan knowledge. This position is also responsible for gathering information regarding problems, analyzing where the problem originated, and assisting members in developing solutions to their benefit issues. The Benefits Specialist reports to the Associate Director of Benefits.

**Major Duties and Responsibilities**

- Maintains comprehensive knowledge of the Plan benefits and associated benefit administration systems;
- Provides customer service via face-to-face contact, phone, email, and mail to eligible Plan members, and MUS campus Human Resources offices and payroll staff;
- Solves complex eligibility issues for Plan members;
- Completes enrollment verification processes for eligible employees and retirees who are enrolling, making mid-year changes, or completing the annual enrollment election into the Plan, which includes all associated benefit offerings;
- Provides service support for all Plan programs, including but not limited to, medical, prescription, dental, life and disability insurance, vision, wellness, and flexible spending programs;
- Works directly with MUS third party claims administrators and vendors to research and resolve issues for Plan members;
- Participates in and conducts system audits to ensure benefit enrollment and billing for Plan members is accurate; and
- Independently researches transaction details regarding discrepancies and recommends corrective action;
- Assist and support in the design, development, and implementation of various group and customized benefit and medical programs
- Assist with all benefit programs as needed by helping with various projects that arise with varying degrees of notice or anticipation.
- Other general administrative duties.

**Researches, Analyzes, and Resolves Complex Insurance Issues**

- Serves as a point of contact for resolution of complex eligibility issues for Plan members, campus management and HR/payroll personnel. Works with members and vendors to gather information regarding problems (general application of benefits, adjudication of claims, eligibility for Plan benefits, etc.), analyze where the problem originated within the delivery system, and develop a resolution for the issue. Follows through to ensure that the solutions are properly applied (i.e. analyzes re-processed claims, verifies eligibility issue resolved, etc.) and/or benefit contributions are corrected.
- Supports eligibility and enrollment for active employees, new hires, retirees, COBRA participants and dependents. Incumbent must ensure all Plan members and dependents are enrolled in the proper affiliations, enrolled in benefits billing, and set up for the correct billing method.
Qualifications

Education and Experience:

- Bachelor’s degree in a healthcare related field, business administration, finance, human resources, public administration, communication, or a related discipline appropriate to the position.
- Five years of experience providing administrative or customer service support.
- Five years of experience in the medical insurance field or related field is preferred.
- Alternate combinations of education and experience will be considered on a case-by-case basis.

Competencies:

- Working knowledge of insurance terminology and ability to read and understand complex plan documents;
- Basic knowledge of state and federal laws, rules, and regulations pertaining to insurance benefits administration and eligibility criteria;
- Strong initiative and customer service skills.
- Advanced level of verbal and written communication skills and ability to organize thoughts and explain complex concepts; and
- Willingness to actively look for ways to help people.

Ability to:

- Follow precise directions and learn complex processes and procedures;
- Work in a team environment and support other job duties;
- Operate a personal computer and general office equipment as necessary to complete essential functions, including using spreadsheet, word processing, database, email, internet, and other computer programs;
- Independently plan, organize, gather information and conduct research;
- Give full attention to what others are saying, taking time to understand the points being made, asking questions as appropriate, not interrupting at inappropriate times, and draw correct conclusions from convoluted explanations; and
- Organize work and priorities with minimal oversight and communicate needs with direct supervisor.
- Ability to maintain confidential information.
Application Requirements and Deadlines

Application requirements consist of items one through four below:

(1.) a letter of interest relating the applicant’s experience and qualifications to the position;
(2.) a resume;
(3.) a list of three professional references with contact information; and
(4.) a completed State of Montana employment application.

Online submission is preferred at: https://statecareers.mt.gov/. Applicants may also submit materials to OCHE (Attention: Human Resources), PO Box 203201, Helena, MT 59620-3201.

The position is open until filled. Candidates should submit required application materials by 5:00 p.m. on Wednesday, September 29, 2021, to be considered in an initial screening of applications. The position is eligible for veterans’ preference in accordance with state statute. Approval will be obtained before contacting the candidates’ current employer.

Reasonable Accommodations: Under state and federal law, qualified applicants with disabilities are entitled to reasonable accommodations. Modifications or adjustments may be provided to assist applicants to compete in the recruitment and selection process. An applicant must request an accommodation when needed. If you need any such accommodation, contact the Office of the Commissioner of Higher Education at 406-449-9155. TDD users may use the relay service by dialing 711.

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