

# Claims Resolution Analyst

**Professional Benefit Administrators leads with one guiding principle, provide exceptional benefit administration for self-funded health plans. Brokers who choose to partner with PBA will benefit from an ally who values cost containment, flexibility, responsiveness, member advocacy, transparency, and results. PBA collectively aligns through the organization's core values of:**

- **Work together and respect each other**
- **Be dedicated to the customer**
- **Be accountable and do what you say**
- **Take initiative, be willing to learn and strive for continuous improvement**
- **Generate positive energy**

## **Summary of Position:**

The Claims Resolution Analyst serves as a key point of contact for clients and brokers, managing and resolving claim-related inquiries with a high level of accuracy and responsiveness. This role investigates issues; coordinates claim adjustments and communicates outcomes clearly while maintaining strong relationships and ensuring a positive client experience. This role will report to our Director of Client Services.

## **Responsible for:**

- Research and resolve all claim inquiries and issues submitted by clients and brokers, including pre-service matters such as pre-certification and prior authorization delays
- Analyze claims and initiate adjustments when appropriate to ensure accurate and timely resolution
- Communicate findings and resolutions to clients and brokers, copying Account Executives (AE) or Customer Service Representatives (CSR) as appropriate
- Track, document, and monitor claim-related issues by client to identify trends and support reporting needs
- Provide cross-functional support to other departments as needed to ensure efficient operations and service delivery
- Other duties as assigned

## **Minimum Job Requirements:**

- High school diploma or equivalent required
- Minimum of 1–3 years of experience in claims processing, claims analysis, or healthcare/TPA environment
- Familiarity with claims systems or platforms (e.g., Javelina, Facets, or similar)
- Basic understanding of medical claims, including pre-certification and prior authorization processes

# Claims Resolution Analyst

- Experience researching and resolving claim issues, discrepancies, or client inquiries
- Strong written and verbal communication skills with the ability to clearly explain claim outcomes to clients and brokers
- Ability to manage multiple priorities, track issues, and meet deadlines in a fast-paced environment
- Proficiency in Microsoft Office, particularly Excel and Outlook
- Strong attention to detail and problem-solving skills
- Ability to work independently while collaborating effectively with internal teams

## Essential Functions Statement

- The person in this position will work remotely and must have a dedicated space that is set free of distractions, quiet and private for HIPAA compliance.

## Benefits and Compensation:

- PBA offers a wide range of benefits including medical, dental, vision, life insurance, AD&D, critical illness, accidental illness, FSA, disability and 401k.
- The range for this role is \$24-\$30 per hour based on prior experience

Professional Benefit Administrators is an equal opportunity employer. In accordance with anti-discrimination law, it is the purpose of this policy to effectuate these principles and mandates. Professional Benefit Administrators affords equal employment opportunities to all employees and applicants and specifically prohibits any and all discrimination and harassment based on race, race-related traits, color, religion, national origin, ethnicity, ancestry, military status, sex, pregnancy, sexual orientation, gender identity, disability (mental or physical), age, marital status, citizenship status, unfavorable military discharge, genetic information, order of protection status, and any other protected status under federal, state, and local law. Professional Benefit Administrators conforms to the spirit as well as to the letter of all applicable laws and regulations.