

REBECCA I FREEMAN

PROFESSIONAL SUMMARY

Results-focused leader successful in building and motivating dynamic teams. Strong collaboration and relationship-building skills. Seasoned professional who cultivates a culture in which staff members feel comfortable voicing questions and concerns, as well as contributing new ideas that are critical to financial and operational success. Willing to take risks and own results.

AREAS OF EXPERTISE

- Strong operations management background
- Results-oriented
- Six Sigma black belt certification
- Coaching, mentoring, and staff development
- Cross-functional team management
- Exceptional data management and analytical skills
- Adept at change management
- Vendor management expertise, including contract negotiation/review/drafting
- Ability to think both strategically and tactically
- Complex problem-solving skills
- Tech-savvy
- Excellent oral and written communication skills
- Calm under pressure

KEY ACCOMPLISHMENTS

- Key team member for a project to pilot a Claim Coordinator in Long-term Care Claims Team. Results were a 90% reduction in NIGO (not in good order) documents, a 57% reduction in claims cycle time, and 75% of survey respondents identifying as net promoters.
- Served as Black Belt mentor on a project where the result was a 70% reduction in overtime expenses, a 20% reduction in cycle time, and a 20% increase in productivity for the Long-term Care Claims Team.
- Served as Green Belt on a project where the result was a 50% reduction in cycle time for field agent recruiting and an annual hard dollar savings of \$135,000.
- Led the Human Resources division to capture an annual savings of \$900,000.
- Resolved an issue with misrouted phone calls in the Corporate Call Center where to reduce these calls by 45%.

PROFESSIONAL EXPERIENCE

THRIVENT FINANCIAL

Appleton, WI

Claims Consultant

03/2017 to Current

- Consult and provide advice on the most complex long-term care, disability income, and Medicare supplement claims.
- Represent the organization in all claims litigation cases and audit inquiries.
- Research, introduce, and implement innovation and process improvements to the department.
- Mentor and coach junior team members on everything from process and systems to communication.
- Write programs to extract claims data, design reports, and present this information to leadership.
- Collaborate with business analysts and application engineers regarding technical issues and claims systems requirements.
- Partnered with law and compliance to understand the implication of new and pending regulations.

Senior Rewards Specialist

12/2013 to 03/2017

- Defined operational needs of new initiatives.
- Designed processes required to test and refine new ideas; identified opportunities for process improvement.
- Analyzed internal and external data, designed scorecards and metrics of success.
- Assisted with overall project management of new rewards solutions.
- Identified change management needs, assisted with stakeholder management and associated communications.
- Delivered efficient and effective rewards solutions to leaders and employees, including education and consultation, and proactively recommend changes.
- Maintained and improved infrastructure necessary to deliver rewards solutions.

Manager, Health Claims

01/2011 to 12/2013

- Provided leadership and work direction to a staff of 22 in four business units.
- Built and maintained a high-performing team; selected, developed, coached, rewarded, and recognized team members.
- Oversaw work distribution, resource management, and staffing levels within workgroup.
- Assisted in development of team goals, priorities, and metrics. Monitored progress toward goals, analyzed variances, and took corrective action. Adapted plans and priorities to address resource and operational challenges.
- Provided staff with ongoing coaching and performance feedback. Resolved escalated customer cases, situations, and inquiries.
- Partnered with legal and compliance to conduct operations in compliance with pertinent laws and regulations.

Manager, Long-Term Care and Medicare Supplement Claims

10/2006 to 01/2011

- Provided leadership and work direction to a staff of 15 in two business units.
- Identified and championed continuous improvement initiatives.
- Conducted operations in compliance with pertinent laws and regulations.
- Monitored team progress toward daily goals, anticipated staffing needs, analyzed variances, and took corrective action when needed.
- Mitigated service problems for complex claims processes.
- Maintained a positive and supportive work environment and provided coaching and personalized development planning to team members.
- Developed strong and productive relationships with internal and external partners.
- Provided recognition, completed salary administration, monitored individual performance, gave candid and meaningful feedback, and confronted off-target performance with appropriate disciplinary action.

Lead Specialist, Health Claims/Manager, Medicare Supplement Claims

10/2004 to 10/2006

- Provided leadership and work direction to a staff of 9.
- Set policy and procedure for disability income, life waiver, long-term care, and Medicare supplement claims.
- Collaborated with the law department to interpret government regulations and make appropriate changes to ensure compliance.
- Created complex field and home office communications.
- Assisted staff with resolution to complex claims situations.
- Supported insurance department and other audits.
- Partnered with law and procurement departments to negotiate vendor contracts.
- Provided input for claim settlement decisions.

Lead Specialist, Health Claims and Service

05/2002 to 10/2004

Director, Health Claims and Service

05/2000 to 05/2002

Senior Health Issue and Change Policy and Procedure Specialist

05/1997 to 05/2000

Health Issue and Change Systems Specialist

04/1996 to 05/1997

Senior Disability Income Issue and Change Policy and Procedure Specialist

10/1993 to 04/1996

EDUCATION

BACHELOR OF ARTS: BIOLOGY AND PSYCHOLOGY

St. Olaf College, Northfield, MN

CERTIFICATIONS AND AFFILIATIONS

Fellow, Life Management Insurance (FLMI)**Fellow, Life and Insurance Health Claims (FLHC)****Associate, Customer Service (ACS)****Lean Six Sigma Black Belt****Long Term Care International Forum - Board member****Insurance and Risk Management Association - Board member****Long Term Care Claims Advisory Group - Committee member****Long Term Care and Disability Income Insurance Claims Expert Witness**