

Stephanie Morgan Expert C.V.

LOA, Benefits and Claims Expert

E.A. Renfroe & Company, Inc.

Amberton University

Dallas/Fort Worth Area

Experience

•



Total Loss Adjuster

Company Name E.A. Renfroe & Company, Inc.

Dates Employed Jan 2017 – Present

Employment Duration 9 mos

Location Irving, TX

Worked with customers, State Farm agents, attorneys, witnesses, repair shops and witness to settle Total Loss automobile claims.

Evaluated and investigated the claim within authority.

Utilized NEXT Gen, CCC and other systems to update all parties regarding the claim status.

Communicated with customers and other associates over the telephone and in written correspondence.

Provided assignments and direction to claims processors and claims service assistance.

•



Independent Property and Auto Claims Adjuster (Contract)

Company Name Wardlaw Claims Service, LLC

Dates Employed Sep 2016 – Nov 2016

Employment Duration 3 mos

Location Waco, Texas Area

Mentored and trained a team of 10-12 Independent Property Claims Adjusters specializing in Catastrophic homeowners claims after Hurricane's Hermine and Matthew.
Provided ongoing support to bring the claims to resolution efficiently.
Processed and review my own desk load of daily claims.

•



Senior Claims Specialist

Company Name Willis

Dates Employed Oct 2014 – Jun 2015

Employment Duration 9 mos

Coordinated the Return to work program for DynCorp International employees for all US states, including International employees.
Worked with the HR Representatives to ensure the employees return to work overseas in a timely manner once released to return back to work.
Attended Quarterly claims review and helped to develop the Nurse Case Management initiative with one of the Third Party Administrators.
Reviewed and worked all lines of Risk Management including general liability, auto physical damage claims as well as Workers' Compensation.
Has extensive experience handling WC claims of a complex nature.
Handled complaints, arbitrates disputes and negotiates alternative solutions
Consultant with clients to help mitigate their risk.
Support new business with sales presentations and Request for Proposals (RFP).

•



Workers Compensation/ Benefits Administrator

Company Name Parkland Hospital

Dates Employed Dec 2008 – May 2014

Employment Duration 5 yrs 6 mos

Location dallas/fort worth area

- Acts as initial point of contact for workers compensation incident reporting originating from Managers, responsible for timely reporting of claim to carrier and required follow up, to include wage statements, collection of medical releases and coordination of light duty.
- Facilitates return to work and modified duty programs while maintaining ADA, FMLA and other legal compliance.
- Communicates with management, claimants, attorneys, regulatory agencies, investigators, reinsurers, beneficiaries, and medical professionals to provide background status, reasoning, and disposition of cases.
- Provides technical expertise and maintains processes to effectively manage workers' compensation costs (in relation to light duty program, return-to-work initiatives, accident investigation and prevention, etc.).
- Conducts biannual claims review with Workers compensation carrier to monitor handling of claim, settlement details and status of older claims, prompts carrier to implement action plans to resolve claims in a timely and cost effective manner.
- Assist with the selection and issuance of various Personal Protective Equipment (PPE) such as safety vests, totes, gloves, etc.
- Assists in developing and implementing new safety awareness programs, accident prevention training, and other related policies, provides assessment of safety training and recommends appropriate solutions.
- Responsible for coordination and management of other types of leave (FMLA, short term disability, etc.) to include completion of required forms, management of claim with third party administrator, determining eligibility of employee for leave requested, and compliance with company leave policies.
- Generates and reviews various reports of employee information related to workers compensation claims, creates specialized workers compensation reporting for internal stakeholders.



WC-RTW Coordinator

Company Name Lear

Dates Employed Oct 2007 – Dec 2008

Employment Duration 1 yr 3 mos

- Performed daily evaluation of overall claim handling activities handled by Third Party Administrators to ensure Special Account Instructions are being followed accordingly.
- Ensure that the claim handling activities from qualitative and quantitative standpoint are effective in achieving the organization's goal of mitigating the cost of workers' compensation claims.
- Prepared required reports to management, outlining current claim management activities and status of claims along with resolution strategies and areas of concern.
- Place unionized injured workers in light duty positions that correspond with their seniority within the plant as well as their restrictions.
- Met with the network providers and Nurse Case Managers to ensure all claims are progressing in a timely manner based on ODG guidelines and rules of TDI-DWC.

•



Sr WC Adjuster

Company Name Sedgwick CMS

Dates Employed 2005 – 2007

Employment Duration 2 yrs

- Analyzed and process 150-175 lost time and medical only Workers' Compensation claims for the State of Texas and Arizona by investigating and gathering medical records, recorded statements from claimants and personnel information to determine the exposure on the claim for Coca Cola Enterprises Inc.
- Partnered with healthcare providers and pre-certification nurses on a daily basis to ensure the appropriate treatment is being provided to the claimant.
- Received ongoing training in medical bill review, ICD-9 codes, diagnosis and proper treatment to assist our client in medical cost containment.

•

Workers' Compensation Adjuster

Company Name Wal Mart Stores AR-CMI

Dates Employed 2004 – 2005

Employment Duration 1 yr

- Processed and adjudicate Workers' Compensation claims for Wal-Mart Associates within the state of Texas.
- Paid medical bills to the providers and issue temporary income benefits to the injured workers.
- Follow Division of Workers' Compensation rules to ensure accurate and timely payment of all benefits.
- Contacted medical providers to determine diagnosis, work status and future treatment plan for the Injured Worker.
- Utilized Merck manual and other medical resources to acquire vast knowledge of medical terminology and expanding technology.



Long Term Disability Claims Adjuster

Company Name CIGNA Group Insurance

Dates Employed 1997 – 2004

Employment Duration 7 yrs

- Managed long term disability claims by utilizing contracts designed for specific accounts.
- Utilized medical resources to gain knowledge and understanding of the symptoms, diagnosis and the appropriate treatment for the claimant.
- Participated in ongoing training provided by, Vocational Rehabilitation Counselors and Nurse Case Managers and references from Merck's manual.
- Utilized appropriate resources to develop and modify as needed, an action plan to establish claim strategy to expedite the claimant's recovery to a functional, employable status and reduce the cost of long term disability to all parties.



CSR

Company Name Excel

Dates Employed 1995 – 1997

Employment Duration 2 yrs

Served as liaison between marketing staff and commission review board to monitor and review commission discrepancies.

Examined, researched and provided answers to extensive pay and promotion issues for the Independent Representatives.

Provided ongoing training and coaching to new and existing employees.

Answered and processed inbound telephone calls from Independent Representatives within a multi-level marketing plan, troubleshooting problem accounts for the fourth largest long distance carrier.

- Assigned to special projects by the Manager to resolve extenuating marketing problems.

•



Auto Claims Adjuster and Sales Counselor

Company Name GEICO

Dates Employed Aug 1986 – Dec 1994

Employment Duration 8 yrs 5 mos

Location Dallas/Fort Worth Area

Performed liability investigations for automobile claims as per company guidelines.

Identify possible fraud indicators and handle claim in conjunction with SIU.

Analyzed auto damages and made decisions regarding insurance coverage.

Maintained documents for coverage issues, investigations, thefts and injury claims.

Maintained positive working relationships with insurance policyholders.

Determined settlement options for assigned claims.

Open and process correspondence related to assigned claims.

Recognize recovery opportunities regarding subrogation and salvage.

Assist internal and external customers with problems or questions regarding claims by phone or through written correspondence while providing a high level of customer service.

Establish and maintain appropriate diary of open claims following company guidelines.