

Position Description

Position Location: Hybrid, Department Flex
Position Classification: Hourly, Non-Exempt

Reports to: Provider Affairs Supervisor

JOB SUMMARY

This position is part of a team responsible for day-to-day tasks, communications, and activities between external network vendors and internal departments.

SPECIFIC DUTIES

- Requests, develops and analyzes data using reports/tools, Word or Excel. Sample reports include:
 - o Percent of Savings Reconciliation Reports for various network vendors
 - Disruptions and Geographic reports
 - Network reference sheets and issue logs
 - Distribution of the Product Lives Report monthly
- Coordinates new communication, research, and issue resolution between internal customers and provider networks
- Responsible for Provider Portal and VisionPlus contracting, correspondence, and other related activity
- Assist in setting up new networks including, claim workflow and contract numbers, for groups and coordinates signing of network contracts with the Compliance Department Develops, communicates, and assesses work instructions for the functions of the team
- Monitors assigned workbaskets of the team and provides input of process improvement to meet turnaround times effectively
- Develops and maintains good working relationships with service representatives from provider networks.
- Maintains provider network and PHO contracts and folders, including but not limited to, updating fee schedules, loading the negotiated discounts, and terming providers as applicable
- Verify internet repricing of claims for various networks and Physician Hospital Organizations
- Follow up timely and consistently on questions related to PHO claims
- Distribute mail within the department including mail received through email Provider Tech Services mailbox and investigate return mail for valid provider addresses
- Assists the unit, department and organization as needed

PREFERRED KNOWLEDGE, SKILLS, AND EXPERIENCE

- High school diploma or equivalent
- Two years of experience in health insurance or employee benefits administration preferred
- Experience with Genelco Admin/Claims Adjudication a plus
- Intermediate-level computer experience (both CRT and PC), including Microsoft Office, Word, Excel, Outlook, and Teams programs preferred
- Professional and effective verbal, written, and interpersonal communication skills to provide clear and concise instructions and recommendations to internal and external customers
- Strong analytical, organizational and time management skills to effectively prioritize and meet departmental goals and metrics
- Ability to work independently, and shift focus effectively with changing priorities

 Willingness to continue self-development and team development, including providing and receiving quality feedback

SCHEDULE

Individual team member schedules vary in order to cover department hours of 7:30 – 5:00 pm Monday – Friday. Due to high volume business need, this department has an annual vacation blackout period the last 2 weeks of December.

PHYSICAL REQUIREMENTS

- Ability to sit or stand at a desk for long periods of time
- Ability to type and view a computer screen for extended periods daily

If you have any questions regarding a specific job position or completing the <u>MedBen Employment Application</u>, please contact MedBen Human Resources Manager Jill Evans at (740) 522-7382 or medbenhr@medben.com.

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