APPLY IN PERSON AT:
Human Resources Department
909 Packerland Drive
Green Bay, WI 54303

APPLY ONLINE AT:
http://oneida-nsn.gov

ONEIDA
A good mind. A good heart. A strong fire.

OR MAIL TO:
Human Resources Department
P.O. Box 365
Oneida, WI 54155-0365

Phone: (920) 496-7900
Fax: (920) 496-7490
Job Line: 1-800-236-7050

JOB DESCRIPTION

POSITION TITLE:	Purchased/Referred Care Supervisor
POSITION NUMBER:	02524
DEPARTMENT:	Business Operations
LOCATION:	525 Airport Road Oneida WI
DIVISION:	Comprehensive Health
RESPONSIBLE TO:	Assistant Business Operations Director
SALARY:	E05 $43,772/Annually (NEGOTIABLE DEPENDING ON EDUCATION & EXPERIENCE)
	(Employees will receive 5% below the negotiated pay rate during their probationary status.)
CLASSIFICATION:	Exempt
POSTING DATE:	November 8, 2016
CLOSING DATE:	Until Filled
Transfer Deadline:	November 16, 2016
Proposed Start Date:	As Soon As Possible

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

The Oneida Nation does not discriminate on the basis of race, color, national origin, sex, religion, age or disability status in employment or the provision of services. However, individuals of Indian ancestry and Veterans will be given preference by law in initial employment or re-employment.

POSITION SUMMARY

This position will supervise the Purchased/Referred Care department and medical benefit staff. Manage the Purchased/Referred Care program and Medical Benefit Coordinators which includes referral process, assume compliance with federal eligibility rules and ensure prompt payment of claims. Coordinate the implementation of operating policies and procedures, and participates in operational planning. Continuation of this position is contingent upon funding allocations

DUTIES AND RESPONSIBILITIES:

1. Supervise personnel which include recommendations for hiring, performance evaluation, training, work allocation, time approval and problem resolution and disciplinary actions.
2. Recommend implements and maintain policies and procedures for continuing quality improvement of the departmental operations, record maintenance, control, security, and computer system.
3. Develop and implement department goals, mission, vision, objectives, annual budget, and accounts for any variances.
4. Ensure voucher activity and adjudicated claims are processed for payment in a timely manner.
5. Maintain compliance with eligibility guidelines and notify applicant patients who are not eligible through the denial process.
6. Develop and implement screening methods to identify alternate resources to pay claims.
7. Provide a plan to promote continuous training for improvement in the Health Information System (HIS) software.
8. Provide Indian Health Services (IHS) with all reports requesting Catastrophic Health Emergency Fund (CHEF) cases after notice of claims.
9. Interpret health care policies at the state, local and federal levels.
10. Seek discounts with health systems when possible to reduce Purchase/Referred Care expenses.
11. Interpret federal register guidelines regarding Purchased/Referred Care service and alternate resource allocations and eligibility.
12. Develop and provide statistical data to appropriate staff as required
13. Request legal interpretation from Staff Attorneys, Bemidji Area Office and Headquarters when federal register eligibility guidelines are challenged.

DUTIES AND RESPONSIBILITIES: (Cont.)

14. Provide data regarding subrogated claims for reimbursement of medical expenses incurred.
15. Maintenance of appeal records and process contracted in federal register.
16. Monitor Purchased/referred Care spending and submit written requests for supplemental Purchased/Referred Care funding.
17. Review, analyze and summarize statistical program data to maintain and advise on effectiveness of current contracts and possible new contract recommendations.
18. Monitor and evaluate customer satisfaction through customer satisfaction surveys.
19. Monitor and maintain compliance of Purchased/Referred Care eligibility and payer of last resort requirements are maintained.
20. Provide the community with information/ seminars on new benefits as may become available.
21. Ensure strict confidentiality of records.
22. Contribute to a team effort and accomplish related results as required.
23. Adhere to all Personnel Policies and Procedures, Standard Operating Procedures, and Area and Program Strategic Plans and Policies.
24. The above duties and responsibilities are not an all inclusive list but rather a general representation of the duties and responsibilities associated with this position. The duties and responsibilities will be subject to change based on organizational needs and/or deemed necessary by the supervisor.

PHYSICAL REQUIREMENTS/WORK ENVIRONMENT:

1. Frequently stand, handle, or feel; reach with hands and arms; and talk or hear; walk in tight aisles.
2. Occasionally sit; and stoop, kneel, crouch, or crawl; lift and/or move up to twenty-five (25) pounds.
3. Work is generally performed in an office setting.
4. Extended hours and irregular shifts may be required.
5. A Tuberculosis (TB) Screening and/or TB Skin Test is required within thirty (30) days of employment and annually thereafter as required.

STANDARD QUALIFICATIONS:

1. Knowledge of applicable federal, state, county and local laws, regulations, and requirements.
2. Knowledge of patient care charts and patient histories.
3. Knowledge of medical insurance claims procedures and documentation.
4. Knowledge of medical billing procedures.
5. Knowledge of related accreditation and certification requirements.
6. Knowledge of the nature and provisions of alternative health insurance plans and emerging healthcare issues and trends that affect the Purchased/Referred Care alternate resource processor.
7. Knowledge of the precertification requirements, procedures and documentation of third party medical insurance payers.
8. Knowledge of Medicaid, Medicare, Social Security, Tribal and County Department of Human Services and private health insurances is required.
9. Knowledge of or willingness to learn the social and economic conditions in the local community and availability of resources to which a client may be referred is required.
10. Knowledge of Indian Health Services rules and regulations pertaining to eligibility.
11. Knowledge of supervisory techniques.
12. Knowledge of budgeting processes and techniques.
13. Knowledge of principles, practices and techniques of health care financing, contracting, administration, including benefits, medical services contracts and agreements.
14. Knowledge of IHS data processing system and required reports.
15. Knowledge of ICD -9 and CPT coding.
16. Skill in operating business computers and office machines, including word-processing, spreadsheets, database software programs, POS system and e-mail.
17. Skill in preparing and maintaining patient records.
18. Knowledge of applicable federal, state, county and local laws, regulations, and requirements.
19. Ability to travel.
20. Ability to use independent judgment in interpretation and application of existing guidelines, policies and legislation to specific areas of work.

STANDARD QUALIFICATIONS: (Cont.)

21. Ability to analyze and administer skills and techniques that ensure the Purchased/Referred Care programs and vendors are abiding by the established requirements and practices governed by the federal register.
22. Ability to plan, design and implement new approaches, techniques and objectives without compromising federal requirements or congressional mandates.
23. Ability to gather data, compile information, and prepare reports.
24. Ability to analyze and solve problems.
25. Ability to maintain quality, safety, and/or infection control standards.
26. Ability to communicate effectively, both orally and in writing.
27. Ability to inform and communicate orally and in writing in diverse and challenging situations with the ability to process information effectively, identify and define problems and make objective decisions.
28. Ability to communicate effectively in the English language, both verbally and in writing.
29. Ability to establish and maintain professional relationships with the public and co-workers.
30. Ability to handle multiple tasks and meet deadlines.
31. Ability to understand and follow oral and written instruction.
32. Ability and willingness to provide strong customer service orientation.
33. Ability to demonstrate excellence in everything, and continually seek improvement in results.
34. Ability to prepare and maintain written records and reports.
35. Ability to communicate effectively both verbally and in writing.
36. Ability and willingness to obtain Oneida Certification on reporting Child Abuse and Neglect within ninety (90) days.
37. Ability and willingness to be CPR certified and trained in blood borne pathogens within one year.
38. Must adhere to strict confidentiality in all matters. **(Must sign a confidentiality statement prior to employment.)**
39. Health Insurance Portability and Accountability Act (HIPAA) training is required prior to starting this position**. (Training will be administered by the Human Resource Department)**
40. Must be willing and able to obtain additional education and training.
41. Must pass a pre-employment drug screening. Must adhere to the Tribe's Drug and Alcohol Free Workplace Policy during the course of employment.
42. Must pass a background security check with the Oneida Tribe in order to meet the Employment Eligibility Requirements, Tribal/State Compact and/or Oneida Nation Gaming Ordinance as they pertain to the position. A temporary license or Gaming License issued by the Oneida Gaming Commission is required as a condition of employment and continuing employment within the Oneida Tribe's Gaming Division.
43. A valid driver's license, reliable transportation, and insurance. Must obtain a Wisconsin driver's license within thirty (30) days of employment if applicant has an out-of-state driver's license. Must be authorized as eligible to operate a personal and Tribal vehicle under the Oneida Nation Vehicle Drivers Policy prior to actual start date. Must maintain driver's eligibility as a condition of employment.

PREFERRED QUALIFICATIONS:

Applicants please clearly state on the application/resume if you meet these qualifications.

1. Social Services experience.

MINIMUM QUALIFICATIONS:

Applicants please clearly state how you meet these qualifications on the application/resume.

1. Associate Degree in, Supervisory Management, Accounting, Health Information Technology, or related health field; three (3) years experience in an insurance or third party billing; one (1) year experience in a supervisory capacity; an equivalent combination of education and experience may be considered.
2. One (1) year of experience working with federal, state or local alternate resource agencies and guidelines.

ITEMS TO BE SUBMITTED:

1. **Must provide a copy of diploma, license, degree or certification upon employment.**