

Medical Management Coordinator (RN) - Insurance

This position acts as the liaison between MedBen and its medical management vendors and stop-loss carriers. The individual in this position will be responsible for assisting in the maintenance and support of MedBen's medical management service offerings, providing information to stop-loss carriers and reviewing prescription and medical records and related clinical data.

Job Requirements

- Assist with managing the organizational relationships with MedBen's third party utilization review, case management, pharmacy consultant, and other cost containment vendors (collectively "medical management vendors")
- Review prescription and medical clinical information against MedBen clients' plan documents (for both coverage and exclusion) and coordinate same with MedBen's medical management vendors to perform such reviews, if applicable.
- Review medical/clinical information and data to determine need for case management or other services and answer questions, as necessary; and
- Provide support and contracting assistance for transplant network contracts
- Interface with MedBen's medical management vendors to resolve complaints and disputes, as well as provide guidance regarding related issues on behalf of MedBen and MedBen's clients
- Monitor implementation of new medical management vendors and their products and programs, including interfacing with other MedBen departments and personnel, as applicable.

Specific Job Duties

- Enter clinical information, data, results, outcomes, documents, etc. into MedBen's computer systems (and other medical management vendor systems as required).
- Manage, perform analysis of, and report on data and information provided by medical management vendors pertaining to MedBen and MedBen's clients, including navigating such vendors' systems to access related data and information.
- Perform specific medical management and cost containment functions for MedBen and its clients.
- Meet and interact with medical management vendor personnel on a regular basis to support and enhance MedBen's and MedBen's clients' vendor relationship and results.
- Review invoices and bills from medical management vendors to determine correctness and find economies of scale.
- Report on medical management vendor outcomes, complaints and compliments.

Job Requirements

- Registered nurse, currently licensed in the State of Ohio by the Ohio Board of Nursing and with up-to-date Continuing Education credits.
- Minimum 2-year degree required. 4-year degree preferred. (Substitution of experience in lieu of education will be at MedBen's discretion.)
- Knowledge of insurance products and applicable laws and regulations.
- Minimum 5 years clinical nursing experience or equivalent experience as a Utilization Review Nurse or Case Management Nurse in the health insurance or TPA industry.
- Minimum 2 years' experience in medical management preferred.
- Proficient in Microsoft Office for Windows software, including Word and Excel.
- Strong verbal, writing, and grammatical skills.
- Strong research and information gathering skills.
- Must be customer-oriented and able to adapt to MedBen's corporate culture.