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clay@mostlymedicaid.com | 919-727-9231

Medicaid Jobs Hunter

December 10, 2018

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SourceURL: https://www.recruit.net/job/team-lead_helena-ca_jobs/116A97E32F82E48B?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

Team Lead Medicaid Eligibility Advocate in Helena CA USA

Do you have a passion for healthcare and helping others? Do you enjoy working in a fast-paced, patient-centered environment? Jump-start your career in our Government Programs department and apply today to be a Patient Benefit Advisor.

Parallon's Mission:

We serve and enable those who care for and improve human life in their communities.

Parallon, a division of HCA, is an industry-leading provider of patient financial and revenue cycle services to acute care providers across the United States. We are dedicated to our values and passionate about finding future leaders for our fast-growing divisions. Although we are the largest healthcare provider in the world and experts and leaders in revenue cycle services, we maintain a people-first culture and sense of community.

GENERAL SUMMARY OF DUTIES—Provides leadership to designated areas of responsibility, including direction of on-site staff. Responsible for affecting ongoing quality, productivity, and efficiency by actively working with operations of designated facility.

DUTIES INCLUDE BUT ARE NOT LIMITED TO:

- Monitor and oversee all daily operational duties and ensure that all employees adhere to all operational policies and procedures.
- Maintain staff work schedules on a weekly or monthly basis.
- Ensure work flow is consistent and timely for each employee.
- Enforce disciplinary action as warranted concerning any employee misconduct.
- Act as primary liaison to hospital staff/management.
- Respond to daily questions and concerns raised by hospital staff/management in a timely and responsible manner.
- Reviews all referred uninsured patients for potential state and federal assistance programs.
- Assists with application process to facilitate possible assistance approval and timely billing.
- Visits with patient in hospital or outside location (i.e., residence, employer, etc.) to finalize documents vital to assistance approval.
- Reviews all inpatient admissions to identify and ensure accurate record of all Medicaid primary and secondary eligible days. If application denied, assists patients with appeals process as needed.
- Reviews daily all certified and denied accounts to ensure the correct IPlan is appended and requests a rebill for a smooth handoff for Medicaid Authorizations.
- Serves as a backup for Financial Counselor position, reviewing in-house patients to ensure insurance coverage information and/or financial situation documented in Meditech is accurate.
- Adheres to and supports organizational IT&S standards, policies, and procedures.
- Adheres to Code of Conduct.
- Performs other duties as assigned.

KNOWLEDGE, SKILLS & ABILITIES

- Working knowledge of medical terminology, practices and procedures, as well as laws, regulations, and guidelines.
- Organization - proactively prioritizes needs and effectively manages resources
- Communication - communicates clearly and concisely, verbally and in writing
- Customer Orientation - establishes and maintains long-term customer relationships, building trust and respect by consistently meeting and exceeding expectations
- Leadership - guides individuals and groups toward desired outcomes, setting high performance standards and delivering leading quality services
- Tactical execution - oversees the development, deployment and direction of complex programs and processes
- PC Skills - demonstrates proficiency in PC applications as required
- Policies & Procedures - demonstrates knowledge and understanding of organizational policies, procedures and systems
- Basic Skills - able to perform basic mathematical calculations, balance and reconcile figures, punctuate properly, spell correctly and transcribe accurately
- Technical skills including:
 - Knowledge of state and federal assistance program requirements preferred.
 - Experience interacting with local Social Services personnel or departments.
 - Knowledge of medical terminology and computer literate.
 - Bilingual/Spanish preferred (may be required depending on facility).
 - An understanding of patient confidentiality to protect the patient and the clinic/corporation.
 - Demonstrated communication, problem solving and case management skills and the ability to act/decide accordingly.
 - Ability to collect, synthesize and research complex or diverse information.
 - Exceptional customer service and the ability to plan organize and exercise sound judgment.

EDUCATION

- College degree preferred or high school diploma (equivalent)

* *

EXPERIENCE

- A minimum three years of hospital/medical business office experience with insurance procedures and patient inte

SourceURL: https://www.glassdoor.com/job-listing/medicaid-specialist-i-state-of-mississippi-JV_KO0,21_KE22,42.htm?jl=3051780273&utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

State of Mississippi Medicaid Specialist I Job in 50

Characteristics of Work

This is investigative work involving the interpretation of policy to determine Medicaid eligibility for families and children and aged, blind, and disabled individuals. The incumbent makes the initial and continuing determinations of eligibility for Medicaid recipients who live in private and institutional settings. Limited supervision is received from administrative supervisors who oversee a regional office or Central Enrollment Office.

Examples of Work

Examples of work performed in this classification include, but are not limited to, the following:

Assumes responsibility for a Medicaid eligibility determination caseload for a designated territory within a region.

Investigates and verifies accuracy of information provided by recipients under the Medicaid programs to determine compliance with State and Federal laws, rules, and regulations.

Determines an applicant's eligibility for institutional care based on State and Federal guidelines and verifies the accuracy of information listed on the applicants' applications.

Maintains effective public relations with medical facilities and federal, state, county, and city agencies within assigned territory.

Verifies accuracy of information listed on applicants' applications including income, bank accounts, and any other assets.

Makes determination of an applicant's eligibility based upon established criteria.

Visits contact centers and medical facilities; assists other regional offices on an as-needed basis.

Performs related or similar duties as required or assigned.

Minimum Qualifications

These minimum qualifications have been agreed upon by Subject Matter Experts (SMEs) in this job class and are based upon a job analysis and the essential functions. However, if a candidate believes he/she is qualified for the job although he/she does not have the minimum qualifications set forth below, he/she may request special consideration through substitution of related education and experience, demonstrating the ability to perform the essential functions of the position. Any request to substitute related education or experience for minimum qualifications must be addressed to the Mississippi State Personnel Board in writing, identifying the related education and experience which demonstrates the candidate's ability to perform all essential functions of the position.

EXPERIENCE/EDUCATIONAL REQUIREMENTS:

Education:

A Bachelor's Degree from an accredited four-year college or university.

OR

Education:

An Associate's Degree or completion of sixty (60) semester hours from an accredited college or university;

AND

Experience:

Two (2) years of experience related to the described duties.

Substitution Statement:

Above an Associate's Degree or completion of sixty semester hours from an accredited college or university, related education and related experience may be

substituted on an equal basis.

Essential Functions

Additional essential functions may be identified and included by the hiring agency. The essential functions include, but are not limited to, the following:

1. Maintains caseload for Medicaid eligibility.
2. Maintains good public relations and customer service.
3. Collects eligibility data information.
4. Visits Medicaid contact centers and/or long-term care facilities.

SourceURL: http://federalgovernmentjobs.us/jobs/Senior-Analyst-Medicare-Medicaid-518935000.html?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

Senior Analyst Medicare Medicaid Job

Job Description (Please follow all instructions carefully)

Overview

Locations

FEW vacancies in the following locations:

Relocation expenses reimbursed

No

Telework eligible

Yes as determined by agency policy

This job is open to

Share Share

Announcement number

GAO-19-HC-0347-01-DE

Control number

518935000

- Duties

Duties

Summary

This position is located in the Health Care (HC) team of the Government Accountability Office (GAO). HC staff is responsible for conducting analysis and preparing products in all areas of health care delivery and financing. The HC mission encompasses policies and programs that affect the health and quality of life of the U.S. population and includes health financing, public health as well as military and veteran health care.

[Learn more about this agency](#)

Responsibilities

As a Senior Analyst, the incumbent serves as an individual contributor or Analyst in Charge (AIC) on research team. The Analyst performs the full range of duties in support of GAO studies in response to requests from congressional committees, subcommittees, and those mandated by public laws and committee reports. These duties include scoping and developing research designs and methodologies, conducting data collection and analysis, and participating in message development and product preparation. Research projects require specialized knowledge in Medicare or Medicaid.

- Independently or in collaboration with team members and a methodologist, determines the approach to be taken, the research design to be used, and researchable questions for Medicaid and Medicare research projects.
- Collects and analyzes data from a variety of sources by applying sound analytical concepts and methods in support of engagement objectives. Selects, refines, organizes and presents factual information and analysis; reviews program documents and reports; and decides on form, content, scope, and depth of analysis and response. Compares and presents options for review by internal and external audiences.
- Evaluates and analyzes findings to discern interrelationships and decides on thoroughness of information to be used in the report findings.
- Communicates, to Congress in presentations and written reports, factual and analytical information in a clear, balanced manner.
- As required, serves as the Analyst in Charge (AIC) on a research team. Prioritizes the work to ensure milestones are met; manages staff and assigns work to team members, to include expectations and deadlines for completing assignments; and performs audit work.
- As a Senior Analyst on the research team, serves as a coach or mentor to Band I Analysts and PDP members.
- Performs other duties as assigned.

Travel Required

Occasional travel - Some travel may be required.

Supervisory status

No

Promotion Potential

NA

- Requirements

Requirements

Conditions of Employment

- U.S. Citizenship.
- Completion of a probationary period may be required.
- Completion of a satisfactory background investigation.
- Selectee must be able to meet and maintain suitability requirements.
- Selective Service registration if you are a male born after Dec. 31, 1959.

You must meet all qualifications and requirements BEFORE the closing date of this announcement.

Qualifications

This position requires applicants to have at least 1-year of specialized experience equivalent to the PT-I (GS-12) grade/band level in the Federal Service. For this position specialized experience is defined as experience in developing and implementing policies for or on behalf of the Medicare or Medicaid programs at the Federal or State level.

Education

Additional information

This is a bargaining unit position.

Frequent travel may be required.

Based on the staffing needs, additional selections may be made through this vacancy announcement.

Selectee may be required to file a Financial Disclosure Statement.

Travel and relocation expenses will not be paid for by the GAO.

Males born after 12/31/59 and at least 18 years of age must be registered with the Selective Service System. Visit <http://www.sss.gov/>.

Please be aware that applicants will be required to complete questions contained on the Declaration for Federal Employment (OF-306) at the time a tentative job offer is made. If selected, at the time of appointment, selectees will be required to update the OF-306.

If you are selected for this position, you will be subject to a determination of your suitability for Federal employment.

The U.S. Government Accountability Office's policy is to provide equal employment opportunity for all regardless of race, religion, color, sex (including pregnancy), national origin, age, disability, genetic information, sexual orientation, or gender identity.

The U.S. GAO is part of the Legislative Branch of the Federal government. As such, all positions are in the excepted service. Initial appointments, permanent or indefinite, to the GAO require completion of a one-year or two-year probationary period.

How You Will Be Evaluated

You will be evaluated for this job based on how well you meet the qualifications above.

The questionnaire will assess your qualifications for the job. If you meet all of the qualification requirements, your application will be placed in one of three categories: Best Qualified, Well Qualified, or Qualified. Within these categories, applicants eligible for veteran's preference will receive selection priority over non-veterans. You will be further rated based on your responses to the vacancy questions. Please make sure that your responses to the vacancy questions are supported in your resume. Follow all instructions carefully as incomplete answers, errors, or omissions may affect your rating. Your rating will be invalid if you fail to include a narrative reply to any vacancy question(s) that requires further explanation or your reply is "see resume."

All applicants will be rated on the following KSA's or competencies:

- Substantive knowledge of the mission, organization, program requirements and operations of the Medicare or Medicaid programs or State Medicaid agencies.
- Skill and experience in developing and implementing policies or programs for or on behalf of the Medicare or Medicaid programs at the Federal or State level.
- Mastery of qualitative or quantitative research methods for analyzing and measuring effectiveness, efficiency, and productivity of the Medicare or Medicaid programs.
- Skill and experience in designing program evaluations, including analyzing complex data regarding Medicare and Medicaid.
- Skill in conveying complex information in writing in a concise and coherent manner.
- Skill in oral communication to conduct interviews and make effective presentations. By way of definition, oral communication may include methods used by employees with disabilities such as sign language interpretation, text-to-speech or TTY technology, and amplification devices.
- Skill and experience in managing multiple tasks and assignments under tight time constraints.
- Skill and experience in leading or collaborating in a team-based environment.

Veterans Preference applies to this announcement. For more information regarding veterans' preference please visit <http://www.fedshirevets.gov/index.aspx>

To preview questions please [click here](#).

Background checks and security clearance

Security clearance

[Public Trust - Background Investigation](#)

Drug test required

No

- Required Documents

Required Documents

You must provide a complete application package which includes:

- Resume: must be created using the USAJOBS resume builder and show relevant work experience.
- If you are using your education to qualify (even partially), you must submit a copy of your transcripts. Transcripts do not need to be official, but if you are selected for this position and you used your education to qualify, you will be required to provide official transcripts. Foreign Education: If you are submitting a transcript from a non-US educational institution, applicants must submit all necessary documents to a private U.S. organization that specializes in interpretation of foreign educational credentials, commonly called a credential evaluation service. For additional information, please visit <http://www.gao.gov/careers/foreignedu.pdf>.
- If you are claiming veterans' preference you must submit adequate proof of active service in the Armed Forces including Member 4 copy of your DD-214, which indicates character of service. To claim 10-point veterans' preference, you must also submit an SF-15 and a letter from the Department of Veterans Affairs verifying the percentage of your disability and preference in hiring. To claim 5-Point veterans' preference, you must submit a Member 4 copy of the DD - 214 or if you are currently active duty and are within 120 days of discharge or release from active duty, you must submit certification of expected discharge or release under honorable conditions with your application. The certification must be an official statement of service from the armed forces command.

Failure to submit any of the above mentioned required documents may result in loss of consideration due to an incomplete application package. It is your responsibility to ensure all required documents have been submitted.

If you are relying on your education to meet qualification requirements:

Education must be accredited by an accrediting institution recognized by the U.S. Department of Education in order for it to be credited towards qualifications. Therefore, provide only the attendance and/or degrees from

[schools accredited by accrediting institutions recognized by the U.S. Department of Education.](#)

Failure to provide all of the required information as stated in this vacancy announcement may result in an ineligible rating or may affect the overall rating.

- Benefits

Benefits

A career with the U.S. Government provides employees with a comprehensive benefits package. As a federal employee, you and your family will have access to a range of benefits that are designed to make your federal career very rewarding. [Learn more about federal benefits.](#)

Individuals selected will be eligible for a full range of federal employment benefits including vacation and sick leave, retirement coverage and Thrift Savings Plan, and health and life insurance. A complete list of benefits is available on the web at <http://www.gao.gov/careers/benefits.html>.

Eligibility for benefits depends on the type of position you hold and whether your position is full-time, part-time, or intermittent. Contact the hiring agency for more information on the specific benefits offered.

- How to Apply

How to Apply

1. To apply on-line, you must complete and submit an application by accessing the USAJOBS website at <http://www.usajobs.gov>. To begin, click the Apply Online button near the bottom of this screen and follow the prompts to register into your USAJOBS account, answer the questions, and submit all required documents. Follow the prompts to begin the application process.

2. You will be redirected to the Career Connector website to complete the application process.

3. Click on "Submit" to transmit your complete application package to GAO.

Can I send my application package documents to the agency point-of-contact via email or mail?

Your application package must be submitted online through Career Connector. We are unable to accept mailed or emailed documents.

What is a complete application package?

1. Your resume. This must be created using the USAJOBS resume builder. Resumes created outside USAJOBS (e.g., uploaded resumes) will not be accepted.
2. The assessment questionnaire.
3. The documentation listed in the Required Documents section. You only need to submit the documents listed.

When is the application package due?

It must be received by 11:59 p.m. Eastern Time (ET) on the closing date of the announcement. It is your responsibility to ensure all the documents are received and the information is readable. Your application may not be considered if it doesn't meet the criteria. Requests for extensions will not be granted.

If you have problems completing your on-line application, including problems submitting your supporting documents, please contact the Help Desk by e-mail at mgshelp@monster.com or by phone at (866) 656-6831. The help desk is available Monday-Friday, 7:00 a.m. to 7:00 p.m. ET

1. Sign into your USAJOBS account.
2. If your application package was successfully transmitted, you will see "Received" beside the position title. Keep in mind, this may take a couple hours because your documents undergo a virus scan.
3. To view your documents or the complete application package received by GAO, select "Application Status." The Details page will display the status of your application, the documentation received and processed, and any correspondence the agency has sent related to this application.

If you have questions about:

- The vacancy announcement or the position: The agency contact is listed at the bottom of the announcement.

- Technical issues with USAJOBS: Please refer to the USAJOBS Help page.
- Technical issues with Career Connector: Please contact CareerConnectorHelp@do.treas.gov.

Agency contact information

Ymani Washington Ymani Washington

Phone

[202-512-6602](tel:202-512-6602)

TDD

800-877-8339

Fax

202-512-5151

Email

WashingtonY@gao.gov

Address

*GOVERNMENT ACCOUNTABILITY OFFICE
441 G Street NW
Room 1157
Washington, District of Columbia 20548
United States*

[Learn more about this agency](#)

Next steps

After the closing date of this announcement, GAO's Human Capital Office will conduct an evaluation of your qualifications and determine by reviewing your assessment questionnaire and resume to complete an analysis, so please be

as complete and thorough as possible. If your application is rated "best-qualified," your name will be referred to the selecting official for consideration. At this point you may be contacted for an interview.

If you do not meet the key requirements, and/or basic qualifications or you fail to submit all required application materials, your application will not be considered.

- Fair & Transparent

Fair & Transparent

The Federal hiring process is setup to be fair and transparent. Please read the following guidance.

Equal Employment Opportunity Policy

The United States Government does not discriminate in employment on the basis of race, color, religion, sex (including pregnancy and gender identity), national origin, political affiliation, sexual orientation, marital status, disability, genetic information, age, membership in an employee organization, retaliation, parental status, military service, or other non-merit factor.

- [Equal Employment Opportunity \(EEO\) for federal employees & job applicants](#)

Reasonable Accommodation Policy

Federal agencies must provide reasonable accommodation to applicants with disabilities where appropriate. Applicants requiring reasonable accommodation for any part of the application process should follow the instructions in the job opportunity announcement. For any part of the remaining hiring process, applicants should contact the hiring agency directly. Determinations on requests for reasonable accommodation will be made on a case-by-case basis.

A reasonable accommodation is any change to a job, the work environment, or the way things are usually done that enables an individual with a disability to apply for a job, perform job duties or receive equal access to job benefits.

Under the Rehabilitation Act of 1973, federal agencies must provide reasonable accommodations when:

- An applicant with a disability needs an accommodation to have an equal opportunity to apply for a job.
- An employee with a disability needs an accommodation to perform the essential job duties or to gain access to the workplace.
- An employee with a disability needs an accommodation to receive equal access to benefits, such as details, training, and office-sponsored events.

You can request a reasonable accommodation at any time during the application or hiring process or while on the job. Requests are considered on a case-by-case basis.

Learn more about [disability employment and reasonable accommodations](#) or [how to contact an agency](#).

Legal and regulatory guidance

SourceURL: https://www.recruit.net/job/medicaid-compliance_lubbock-tx_jobs/2F9E1AB192C0040F?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

Medicaid Compliance Dir-Plan PS15467 in Lubbock TX USA

Job Description

Medicaid Compliance Dir-Plan PS15467

New

Location: Austin, Texas, United States

Field: Fraud

Requisition #: PS15467

Post Date: 3 days ago

Your Talent. Our Vision. At Anthem, Inc., it's a powerful combination, and the foundation upon which we're creating greater access to care for our members, greater value for our customers, and greater health for our communities. Join us and together we will drive the future of health care .

This is an exceptional opportunity to do innovative work that means more to you and those we serve at one of America's leading health benefits companies and a Fortune Top 50 Company.

Preferred location: _Austin, Texas but also open to Houston, El Paso, and Lubbock, Texas._

The Medicaid Compliance Director is responsible for implementing and maintaining the Medicaid Business Unit (MBU) Compliance Program, incorporating the Office of Inspector General's Guidance on the essential components of an effective compliance program that serves, in part, to prevent and detect crime, to implement effective policies and procedures, to mitigate compliance risk, to establish an auditing and monitoring program and to uphold an ethical culture.

Primary duties may include but are not limited to:

- + Develops and implements an annual plan-specific compliance work plan to ensure the elements of an effective compliance program are appropriately in place at the plan-level and that the MBU compliance work plan is carried out locally, as appropriate.
- + Participates as an active member of the health plan's leadership team, developing strong relationships with key leaders and engaging plan leadership in the compliance risk assessment process to identify and address compliance risks and failures and manage action plans designed to fully mitigate risk(s).
- + Delivers compliance education sessions to address key issues.
- + Monitors adherence to contractual obligations.
- + Designs and implements a compliance communication strategy to keep senior management and other relevant associates informed of changes to the regulatory environment, as well as communicating about specific compliance program initiatives throughout the year.

Requires BA/BS; 7+ years relevant experience compliance or audit, including 3 years of leadership/management experience; or any combination of education and experience, which would provide an equivalent background. Master's Degree preferred.

Anthem, Inc. is ranked as one of America's Most Admired Companies among health insurers by Fortune magazine and is a 2018 DiversityInc magazine Top 50 Company for Diversity. To learn more about our company and apply, please visit us at careers.antheminc.com

An Equal Opportunity Employer/Disability/Veteran

[Save Job](#)

SourceURL: https://wellcare-health-plan.jobmount.net/job-5c0d9f4324543f7107946744-ltss-care-specialist-new-port-richey-florida?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

LTSS Care Specialist, New Port Richey, Florida

Created 12/09/2018 Reference 1808533 Category Healthcare Country United States State Florida City New Port Richey

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Oversees the care for long term support services / long term care populations and provides coordination of care services for lower acuity individuals living in the community or nursing facilities. Ensures a comprehensive assessment of member's care needs and status, interdisciplinary team approach, and education of members. Works closely with internal and external partners to achieve optimal health care outcomes for the member through effective coordination of care activities.

Essential Functions:

- Coordination and care management of members with lower utilization of home community services (i.e. members attending adult day care services or those who are stable on current medication / treatment regimens).
- Manages an active caseload based on state mandated ratios according to residential setting, case intensity and acuity.
- Ensures comprehensive assessments are completed within required time frames and utilizes knowledge and expertise to assess options for care including use of benefits and community resources.
- Partners effectively with the PCP, Specialist, member, member's family and integrated care teams (ICT) to develop a Person Centered Care Plan.

- In partnership with the member, family, physician(s), ICT and other providers, assesses short and long term member needs, evaluates the need for alternative services and establishes member driven care management objectives.
- Responsible for coordination of service authorizations (i.e. meals, transportation, activities of daily living).
- Educates on and coordinates community resources with emphasis on medical, behavioral and social services. Applies care management standards and maintains HIPAA standards and confidentiality of protected health information.
- Ensures compliance with all state and federal regulations and guidelines in day-to-day activities.
- Performs special projects as assigned.

Additional Responsibilities: Candidate Education:

- Required Other For Florida LTC: a Bachelors degree in social work, sociology, psychology, gerontology, or other related social services field
- Preferred Other For Florida LTC: a Masters degree in social work, sociology, psychology, gerontology, or other related social services field

Candidate Experience:

- Required Other For Florida LTC, must meet one of the following: *Possess a minimum of two (2) years of relevant experience and have a Bachelor’s degree in social work, sociology, psychology, gerontology, or a related social services field; or * Possess a master’s degree in social work, sociology, psychology, gerontology, or a related social services field may substitute experience obtained through a practicum, internship, or clinical rotation on an equivalent basis for up to one (1) year of the experience requirements; *Non-degreeed candidates may substitute professional human service experience on a year-for-year basis for the educational requirement with a minimum of six (6) years of relevant experience.

Candidate Skills:

- Intermediate Demonstrated written communication skills
- Intermediate Demonstrated interpersonal/verbal communication skills
- Intermediate Knowledge of healthcare delivery
- Intermediate Ability to work as part of a team
- Intermediate Ability to work independently
- Intermediate Ability to work in a fast paced environment with changing priorities
- Intermediate Demonstrated organizational skills

- Intermediate Other Ability to remain calm under pressure

Licenses and Certifications:

A license in one of the following is required:

- Required Other CPR Certified
- Preferred Certified Case Manager (CCM)

Technical Skills:

- Required Intermediate Microsoft Outlook
- Required Intermediate Microsoft Word
- Required Intermediate Microsoft Excel
- Required Intermediate Healthcare Management Systems (Generic)

Languages:**About us**

Headquartered in Tampa, Fla., WellCare Health Plans, Inc. (NYSE: WCG) focuses primarily on providing government-sponsored managed care services to families, children, seniors and individuals with complex medical needs primarily through Medicaid, Medicare Advantage and Medicare Prescription Drug Plans, as well as individuals in the Health Insurance Marketplace. WellCare serves approximately 5.5 million members nationwide as of September 30, 2018. WellCare is a Fortune 500 company that employs nearly 12,000 associates across the country and was ranked a "World's Most Admired Company" in 2018 by Fortune magazine. For more information about WellCare, please visit the company's website at www.wellcare.com. EOE: All qualified applicants shall receive consideration for employment without regard to race, color, religion, creed, age, sex, pregnancy, veteran status, marital status, sexual orientation, gender identity or expression, national origin, ancestry, disability, genetic information, childbirth or related medical condition or other legally protected basis protected by applicable federal or state law except where a bona fide occupational qualification applies. Comprehensive Health Management, Inc. is an equal opportunity employer, M/F/D/V/SO.

Director, State Regulatory Affairs

Remote, USA | Medicare and Medicaid Managed Care Health Company

Incumbent leads the State Regulatory Affairs department and responsible for developing and executing the Medicaid Regulatory Affairs strategy, focused on publicly funded healthcare programs. Provides guidance, oversight and support to Regulatory Affairs teams with respect to contract administration and account management. Provides strategic guidance from a regulatory perspective to the market leader, COO and/or leadership team. Partners with state Medicaid agency to ensure compliance and effective partnership.

Essential Functions:

Identifies, compiles and aggregates regulatory and operational issues across markets to manage risk. Partners with markets on resolutions through expertise and lessons learned.

Makes timely and effective decisions using data and takes a fact-based approach to problem-solving, while understanding the limits of data to make and support decisions.

Establishes the Medicaid Regulatory Affairs strategy and oversees contract administration activities in markets.

Manages and supports audits and implementations to ensure regulatory requirements are satisfied.

In partnership with Corporate Compliance, develops procedures, toolkits and reports and monitors contractually required deliverables, including but not limited to, regulatory reports and performance metrics.

Develops procedures and toolkits for Account Management Plans and monitors adherence with corporate processes.

Directs and manages a team of associates responsible for supporting Medicaid Regulatory Affairs initiatives and teams.

Supports development and implementation of Regulatory Affairs in new markets.

Develops and manages department budget.

Performs special projects as needed.

This position is contingent upon the bid award in the state of North Carolina to Medicare and Medicaid Managed Care Health Company Health Plans, Inc.

Candidate Education:

Required A Bachelor's Degree in business administration or related field

Preferred A Master's Degree in public policy, public health, political science, health administration or related field

Candidate Experience:

Required 10 years of experience in managed health care or health care consulting

Required 5 years of management experience

Candidate Skills:

Intermediate Demonstrated leadership skills

Intermediate Ability to lead/manage others

Intermediate Other facilitative skills

Intermediate Other In-depth knowledge of government programs and the managed care industry and experience leading and managing regulatory affairs programs through teamwork, collaboration and open communication

Licenses and Certifications:

A license in one of the following is required:

Technical Skills:

Required Intermediate Microsoft Project Strong knowledge of MS Office including Project, Access, PowerPoint and Visio

Required Intermediate Microsoft Access Knowledge of and/or ability to utilize COGNOS for budgetary decisions or review

Required Intermediate Microsoft PowerPoint

Required Intermediate Microsoft Visio

Required Intermediate Other Knowledge of and/or ability to utilize COGNOS for budgetary decisions or review

Other companies hiring with Ivy Exec



SourceURL: https://www.recruit.net/job/care-coordinator_little-rock_jobs/E54968F385489D1F?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

Behavioral Care Coordinator in Little Rock AR USA

Job Description

HourlyPosition Purpose: Conduct screening and risk assessment interventions per program guidelines. Provide outreach and preventative care to members seeking services in the least restrictive environment.

- + Identify special needs members through the completion of health screens and other resources.

- + Educate providers, members and their families on behavioral health issues including symptoms, relapse prevention, stress reduction, lab work, and healthy lifestyle choices.

- + Coordinate behavioral health treatment with PCP's and behavioral health providers.

- + Participate in the development and modification of care plans in conjunction with member, member's family and managing physician to include, monitoring for treatment compliance and assisting with problem solving in breaking down barriers to treatment to include referrals to community resources.

- + Coordinate urgent care evaluations when necessary.

- + Assist members with locating providers and scheduling appointments as necessary.

- + Assist with development of plan specific literature and education materials in conjunction with medical director and corporate oversight.

Education/Experience: Bachelor's degree in Social Work or equivalent experience.

2+ years of experience in managed care and/or behavioral healthcare setting.

Practical knowledge of Medicaid and Health Plan administration.

Centene is an equal opportunity employer that is committed to diversity, and values the ways in which we are different. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, veteran status, or other characteristic protected by applicable law.

TITLE: Behavioral Care Coordinator

LOCATION: Little Rock, Arkansas

REQNUMBER: 1122489

COMPANY: Health Insurance Operations

POSITION TYPE: Hourly

[Save Job](#)

SourceURL: https://www.linkedin.com/jobs/view/rn%2C-care-manager%2C-special-needs-plan-at-visiting-nurse-service-of-new-york-1011536406/?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

RN, Care Manager, Special Needs Plan

Company Name [Visiting Nurse Service of New York](#) Company Location Brooklyn, NY, US

New Posted Date Posted 23 hours ago

Be an early applicant

Job description

Overview

The Visiting Nurse Service of New York (VNSNY) is the nation's largest not-for-profit home- and community-based health care organization, serving the five boroughs of New York City, and Nassau, Suffolk, and Westchester Counties. For 125 years, VNSNY has been committed to meeting the health care needs of New Yorkers with compassionate, high-quality home health care. We offer a wide range of services, programs, and health plans to meet the diverse needs of our patients, members, and clients from before birth to the end of life.

Each day, more than 13,000 VNSNY employees- including nurses, rehabilitation therapists, social workers, other allied professionals, and paraprofessionals- deliver compassionate care, unparalleled medical expertise, and 24/7 solutions

and resources to more than 48,000 patients and members, helping them to live the best lives possible in their homes and communities.

Responsibilities

Improves clinical and cost-effective outcomes by reducing hospital admission and emergency department visits for members enrolled in VNSNY CHOICE Medicare and Medicaid, through on-going member education, care coordination and collaboration with providers of care. Provides telephonic case management to members, balancing clinical, social, and environmental concerns. Ensures services provided are in compliance with VNSNY CHOICE Medicare and Medicaid policies and procedures, as well as applicable state and federal regulations. Works under general supervision.

Licensure: License and current registration to practice as a registered professional nurse in New York State required. Certified Case Manager Certification preferred.

Education: Associate Degree in Nursing required. Bachelor's or Master's Degree in Nursing preferred.

Experience: Minimum of two years of case management experience assessing needs, coordinating/collaborating services and referrals required. Case management experience in a managed care organization or health plan preferred. Excellent organizational and time management skills, interpersonal skills, verbal and written communication skills required. Working knowledge of Microsoft Excel, Power-Point, and Word required. Knowledge of Medicare/Medicaid and/or commercial regulations preferred.. Knowledge of Milliman criteria (MCG) preferred. Bilingual skills preferred.

Seniority Level

Associate

Industry

- Non-profit Organization Management
- Mental Health Care
- Hospital & Health Care

Employment Type

Full-time

Job Functions

- Health Care Provider

SourceURL: https://www.linkedin.com/jobs/view/health-insurance-specialist-at-centers-for-medicare-%26-medicaid-services-1013411396/?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

Health Insurance Specialist

Company Name Centers for Medicare &
Medicaid Services Company Location
Kansas City, KS, US

New Posted Date Posted 12 hours ago

Be an early applicant

Job description

Videos

Duties

HelpDuties

Summary

This position is located in the Department of Health & Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), Consortium for Medicare Health Plan Operations, Kansas City Medicare Advantage and Health.

As a Health Insurance Specialist, GS-0107-11, you will perform program policy work related to national health insurance programs, such as Medicare, Medicaid, the Children's Health Insurance Program (CHIP), Marketplace Exchange/private health insurance.

Learn more about this agency

Responsibilities

- Analyze and interpret Federal regulations, policy statements, and other program guidance.
- Propose modifications to policies to reflect changes or trends in the health care industry, program objectives and the needs of beneficiaries.
- Prepare and coordinate a variety of written products, including position papers and briefing materials for senior officials to use as background information on program policy related activities.
- Respond to inquiries regarding program policies to a variety of internal and external stakeholders(e.g., beneficiaries, providers, and representatives of public and private organizations, congressional staff, and other government organizations).
- Work with States, other key stakeholders, and CMS staff to identify and address evolving program issues or to provide guidance on programmatic matters.

Travel Required

Not required

Supervisory status

No

Promotion Potential

12

- ##### Job family (Series)

0107 Health Insurance Administration

- Requirements

HelpRequirements

Conditions of Employment

- You must be a U.S. Citizen or National to apply for this position.
- You will be subject to a background and suitability investigation.
- Time-in-Grade restrictions apply.

Qualifications

ALL QUALIFICATION REQUIREMENTS MUST BE MET WITHIN 30 DAYS OF THE CLOSING DATE OF THIS ANNOUNCEMENT.

In order to qualify for the GS-11, you must meet the following: You must demonstrate in your resume at least one year (52 weeks) of qualifying specialized experience equivalent to the GS-09 grade level in the Federal government, obtained in either the private or public sector), to include:(1) Assisting in the development or revision of processes used for the oversight of a health insurance program; (2) Monitoring entities for compliance with health insurance program regulations and policies; and (3) Preparing briefing materials, manuals, or reports for health insurance program improvements. - OR - Substitution of Education for Experience: You may substitute education for specialized experience at the GS-11 level by possessing 3 full years of progressively higher level graduate education leading to such a degree or Ph.D. or equivalent doctoral degree or LL.M., if related to the position being filled. - OR - Combination of Experience and Education: Only graduate education in excess of the amount required for the GS-09 grade level may be used to qualify applicants for positions at the grade GS-11. Therefore, only education in excess of a master's or equivalent graduate degree or 2 full years of progressively higher level graduate education leading to such a degree, may be used to combine education and experience.

TRANSCRIPTS are required to verify satisfactory completion of the educational requirement related to substitution of education for experience and combination of experience and education. Please see 'Required Documents' section below for what documentation is required at the time of application.

Click the following link to view the occupational questionnaire:

Education

Additional information

Bargaining Unit Position: Yes Tour of Duty:Flexible Recruitment/Relocation

Incentive:Not Authorized Financial Disclosure: Not Required

CMS employees currently participating in 100% Full-Time Telework Program may be eligible to remain in the program. If an employee in this program is selected, the pay will be set in accordance with the locality pay for the applicable duty station. The listed salary range reflects the locality pay assigned to the duty location(s) listed in the vacancy announcement. For more information about pay based on locality, please visit the Office of Personnel Management (OPM) Salaries & Wages Page.

The Interagency Career Transition Assistance Plan (ICTAP) and Career Transition Assistance Plan (CTAP) provide eligible displaced federal employees with selection priority over other candidates for competitive service vacancies. To be qualified you must submit the required documentation and be rated well-qualified for this vacancy. Click here for a detailed description of the required supporting documents. A well-qualified applicant is one whose knowledge, skills and abilities clearly exceed the minimum qualification requirements of the position. Additional information about ICTAP and CTAP eligibility is on OPM's Career Transition Resources website at

Additional Forms REQUIRED Prior To Appointment

- Optional Form 306, Declaration of Federal Employment and the Background/Suitability Investigation - A background and suitability investigation will be required for all selectees. Appointment will be subject to the successful completion of the investigation and favorable adjudication. Failure to successfully meet these requirements may be grounds for appropriate personnel action. In addition, if hired, a reinvestigation or supplemental investigation may be required at a later time. If selected, the Optional Form 306 will be required prior to final job offer. Click here to obtain a copy of the Optional Form 306.
- Form I-9, Employment Verification and the Electronic Eligibility Verification Program - CMS participates in the Electronic Employment Eligibility

Verification Program (E-Verify). E-Verify helps employers determine employment eligibility of new hires and the validity of their Social Security numbers. If selected, the Form I-9 will be required at the time of in-processing. Click here for more information about E-Verify and to obtain a copy of the Form I-9.

- Standard Form 61, Appointment Affidavits- If selected, the Standard Form 61 will be required at the time of in-processing. Click here to obtain a copy of the Standard Form 61.

Additional selections may be made from this announcement for similar positions within CMS in the same geographical location. For Central Office vacancies, the 'same geographical location' includes Baltimore, Maryland; Bethesda, Maryland; and Washington, D.C.

If you are unable to apply online or need to fax a document you do not have in electronic form, view the following link for information regarding an Alternate Application.

[Read more](#)

How You Will Be Evaluated

You will be evaluated for this job based on how well you meet the qualifications above.

Once the announcement has closed, your online application, resume, transcripts and CMS required documents will be used to determine if you meet eligibility and qualification requirements listed on this announcement. If you are found to be among the top qualified candidates, you will be referred to the selecting official for employment consideration. Please follow all instructions carefully. Errors or omissions may affect your rating.

Your qualifications will be evaluated on the following competencies (knowledge, skills, abilities and other characteristics):

- Oral Communication
- Oversight
- Policy Analysis
- Written Communication

[Read more](#)

Background checks and security clearance

Security clearance

Public Trust - Background Investigation

Drug test required

No

- Required Documents

HelpRequired Documents

The Following Documents Are REQUIRED

Resume showing relevant experience; cover letter optional. Your resume must indicate your citizenship and if you are registered for Selective Service if you are a male born after 12/31/59. Your resume must also list your work experience and education (if applicable) including the start and end dates (mm/dd/yy) of each employment along with the number of hours worked per week. For work in the Federal service, you must include the series and grade level for the position(s). Your resume will be used to validate your responses to the assessment tool(s). For resume and application tips visit:

CMS Required Documents (e.g., SF-50, DD-214, SF-15, etc.).Required documents may be necessary to be considered for this vacancy announcement. Click here for a detailed description of the required documents. Failure to provide the required documentation WILL result in an ineligible rating OR non-consideration.

College Transcripts. Although this position does not require a degree, you may substitute college credit in whole, or in part, for experience at specified grade levels. You must submit a copy of your transcript at the time of application in order to substitute your education for the required experience. If you do not submit a transcript, your education will not be considered in determining your qualifications for the position. You may submit an unofficial transcript or a list of college courses completed indicating course title, credit hours, and grades received. An official transcript is required if you are selected for the position.

College Transcripts and Foreign Education:Applicants who have completed part or all of their education outside of the U.S. must have their foreign education evaluated by an accredited organization to ensure that the foreign education is comparable to education received in accredited educational institutions in the U.S. For a listing of services that can perform this evaluation, visit the National Association of Credential Evaluation Services website. This list, which may not be

all inclusive, is for informational purposes only and does not imply any endorsement of any specific agency.

PLEASE NOTE: A complete application package includes the online application, resume, transcripts (if qualifying through education substitution or a combination of education and experience) and CMS required documents. Please carefully review the full job announcement to include the 'Required Documents' and 'How to Apply' sections. Failure to submit the online application, resume, transcripts (if applicable) and CMS required documents, will result in you not being considered for employment.

If you are relying on your education to meet qualification requirements:

Education must be accredited by an accrediting institution recognized by the U.S. Department of Education in order for it to be credited towards qualifications. Therefore, provide only the attendance and/or degrees from schools accredited by accrediting institutions recognized by the U.S. Department of Education.

Failure to provide all of the required information as stated in this vacancy announcement may result in an ineligible rating or may affect the overall rating.

- [Benefits](#)

[HelpBenefits](#)

A career with the U.S. Government provides employees with a comprehensive benefits package. As a federal employee, you and your family will have access to a range of benefits that are designed to make your federal career very rewarding. Learn more about federal benefits.

[Review our benefits](#)

Eligibility for benefits depends on the type of position you hold and whether your position is full-time, part-time, or intermittent. Contact the hiring agency for more information on the specific benefits offered.

- [How to Apply](#)

[HelpHow to Apply](#)

Your complete application package, as described in the 'Required Documents' section, must be received by 11:59 PM ET on 12/04/2018 to receive consideration.

IN DESCRIBING YOUR WORK EXPERIENCE AND/OR EDUCATION, PLEASE BE CLEAR AND SPECIFIC REGARDING YOUR EXPERIENCE OR EDUCATION.

Please Ensure EACH Work History Includes ALL Of The Following Information

We strongly encourage applicants to utilize the USAJOBS resume builder in the creation of resumes.

- Official Position Title (include series and grade if Federal job)
- Duties (be specific in describing your duties)
- Employer's name and address
- Supervisor name and phone number
- Start and end dates including month, day and year (e.g. June 18, 2007 to April 05, 2008)
- Full-time or part-time status (include hours worked per week)
- Salary Determining length of general or specialized experience is dependent on the above information and failure to provide ALL of this information WILL result in a finding of ineligible.
- To begin, click Apply to access the online application. You will need to be logged into your USAJOBS account to apply. If you do not have a USAJOBS account, you will need to create one before beginning the application.
- Follow the prompts to select your resume and/or other supporting documents to be included with your application package. You will have the opportunity to upload additional documents to include in your application before it is submitted. Your uploaded documents may take several hours to clear the virus scan process.
- After acknowledging you have reviewed your application package, complete the Include Personal Information section as you deem appropriate and click to continue with the application process.
- You will be taken to the online application which you must complete in order to apply for the position. Complete the online application, verify the required documentation is included with your application package, and submit the application. To verify the status of your application, log into your USAJOBS account (***** all of your applications will appear on the Welcome screen. The Application Status will appear along with the date your application was last updated. For information on what each Application Status means, visit:

This agency provides reasonable accommodation to applicants with disabilities. If you need a reasonable accommodation for any part of the application or hiring

process, please send an email to *****. The decision to grant reasonable accommodation will be made on a case-by-case basis.

Commissioned Corps Officers (including Commissioned Corps applicants that are professionally boarded) who are interested in applying for this position must send their professional resume (not PHS Curriculum Vitae) and cover letter to ***** in lieu of applying through this announcement.

The cover letter should specifically explain how you are qualified for this position and draw specific attention to your resume that demonstrates these qualifications. In the subject line of your e-mail please include only the Job Announcement Number. In the body of your e-mail please include your current rank name and serial number. Failure to provide this information may impact your consideration for this position.

[Read more](#)

[Agency contact information](#)

Donna Cottman

Phone

Email

Address

Consortium for Medicare Health Plan Operations 7500 Security Blvd Woodlawn,
MD 21244 US

[Learn more about this agency](#)

[Next steps](#)

Once your online application is submitted, you will receive a confirmation notification by email. Your application will be evaluated to determine your eligibility and qualifications for the position. After the evaluation is complete, you will receive another email notification regarding the status of your application.

Within 30 business days of the closing date, 12/04/2018, you may check your status online by logging into your USAJOBS account

(***** We will update your status after each key stage in the application process has been completed.

[Read more](#)

- Fair & Transparent

Fair & Transparent

The Federal hiring process is setup to be fair and transparent. Please read the following guidance.

Equal Employment Opportunity Policy

The United States Government does not discriminate in employment on the basis of race, color, religion, sex (including pregnancy and gender identity), national origin, political affiliation, sexual orientation, marital status, disability, genetic information, age, membership in an employee organization, retaliation, parental status, military service, or other non-merit factor.

- Equal Employment Opportunity (EEO) for federal employees & job applicants

[Read more](#)

Reasonable Accommodation Policy

Federal agencies must provide reasonable accommodation to applicants with disabilities where appropriate. Applicants requiring reasonable accommodation for any part of the application process should follow the instructions in the job opportunity announcement. For any part of the remaining hiring process, applicants should contact the hiring agency directly. Determinations on requests for reasonable accommodation will be made on a case-by-case basis.

A reasonable accommodation is any change to a job, the work environment, or the way things are usually done that enables an individual with a disability to apply for a job, perform job duties or receive equal access to job benefits.

Under the Rehabilitation Act of 1973, federal agencies must provide reasonable accommodations when:

- An applicant with a disability needs an accommodation to have an equal opportunity to apply for a job.
- An employee with a disability needs an accommodation to perform the essential job duties or to gain access to the workplace.
- An employee with a disability needs an accommodation to receive equal access to benefits, such as details, training, and office-sponsored events.

You can request a reasonable accommodation at any time during the application or hiring process or while on the job. Requests are considered on a case-by-case basis.

Learn more about disability employment and reasonable accommodations or how to contact an agency.

Read more

Legal and regulatory guidance

- Financial suitability
- Social security number request
- Privacy Act
- Signature and false statements
- Selective Service
- New employee probationary period

This job originated on *****. For the full announcement and to apply, visit ***** Only resumes submitted according to the instructions on the job announcement listed at ***** will be considered.

Open & closing dates: 11/21/2018 to 12/04/2018

Service: Competitive

Pay scale & grade: GS 11

Salary: \$61,605 to \$80,089 per year

Appointment type: Permanent

Work schedule: Full-Time

SourceURL: https://www.linkedin.com/jobs/view/health-insurance-specialist-%28program-integrity%29-at-centers-for-medicare-%26-medicaid-services-1013421286/?utm_campaign=google_jobs_apply&utm_source=google_jobs_apply&utm_medium=organic

Health Insurance Specialist (Program Integrity)

Company Name Centers for Medicare & Medicaid Services Company Location Woodlawn, MD, US

New Posted Date Posted 11 hours ago Number of views 1 view

Be an early applicant

Job description

Videos

Duties

HelpDuties

Summary

This position is located in the Department of Health & Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), Center for Program Integrity (CPI), Division of Vulnerability Governance (DVG).

As a Health Insurance Specialist (Program Integrity), GS-0107-13, you will be responsible for analyzing, developing, and implementing a wide range of program integrity initiatives.

Learn more about this agency

Responsibilities

- Oversee and execute administrative studies, projects, and assignments designed to identify, monitor, and address program vulnerabilities.

- Evaluate and analyze the impact of new or revised changes to legislation before the Congress pertaining to any CMS program.
- Research, evaluate, identify, and propose modifications to policies that reflect changes or trends in the health care industry, program integrity initiatives, and the needs of beneficiaries.
- Act as an Agency representative and contribute to discussions and planning sessions on program policy developments.

Travel Required

Occasional travel - You may be expected to travel 5% for this position.

Supervisory status

No

Promotion Potential

13

- ##### Job family (Series)

0107 Health Insurance Administration

- Requirements

HelpRequirements

Conditions of Employment

- You must be a U.S. Citizen or National to apply for this position.
- You will be subject to a background and suitability investigation.
- Time-in-Grade restrictions apply.

Qualifications

ALL QUALIFICATION REQUIREMENTS MUST BE MET WITHIN 30 DAYS OF THE CLOSING DATE OF THIS ANNOUNCEMENT.

In order to qualify for the GS-13, you must meet the following: You must demonstrate in your resume at least one year (52 weeks) of qualifying specialized experience equivalent to the GS-12 grade level in the Federal government, obtained in either the private or public sector, to include: (1) Evaluating health insurance program vulnerabilities to detect fraud, waste, or abuse; (2) Collaborating across organizational lines on investigations, audits, or

oversight of health insurance programs; and (3) Proposing policy changes relating to program integrity.

Experience refers to paid and unpaid experience, including volunteer work done through National Service programs (e.g., Peace Corps, AmeriCorps) and other organizations (e.g., professional; philanthropic; religious; spiritual; community, student, social). Volunteer work helps build critical competencies, knowledge, and skills and can provide valuable training and experience that translates directly to paid employment. You will receive credit for all qualifying experience, including volunteer experience.

Time-in-Grade: To be eligible, current Federal employees must have served at least 52 weeks (one year) at the next lower grade level from the position/grade level(s) to which they are applying.

Click the following link to view the occupational questionnaire:

Education

This job does not have an education qualification requirement.

Additional information

Bargaining Unit Position: Yes Tour of Duty: Flexible Recruitment/Relocation

Incentive: Not Authorized Financial Disclosure: Not Required

CMS employees currently participating in 100% Full-Time Telework Program may be eligible to remain in the program. If an employee in this program is selected, the pay will be set in accordance with the locality pay for the applicable duty station. The listed salary range reflects the locality pay assigned to the duty location(s) listed in the vacancy announcement. For more information about pay based on locality, please visit the Office of Personnel Management (OPM) Salaries & Wages Page.

The Interagency Career Transition Assistance Plan (ICTAP) and Career Transition Assistance Plan (CTAP) provide eligible displaced federal employees with selection priority over other candidates for competitive service vacancies. To be qualified you must submit the required documentation and be rated well-qualified for this vacancy. Click here for a detailed description of the required supporting documents. A well-qualified applicant is one whose knowledge, skills and abilities clearly exceed the minimum qualification requirements of the position. Additional information about ICTAP and CTAP eligibility is on OPM's Career Transition

Resources website at

Additional Forms REQUIRED Prior To Appointment

- Optional Form 306, Declaration of Federal Employment and the Background/Suitability Investigation - A background and suitability investigation will be required for all selectees. Appointment will be subject to the successful completion of the investigation and favorable adjudication. Failure to successfully meet these requirements may be grounds for appropriate personnel action. In addition, if hired, a reinvestigation or supplemental investigation may be required at a later time. If selected, the Optional Form 306 will be required prior to final job offer. [Click here to obtain a copy of the Optional Form 306.](#)
- Form I-9, Employment Verification and the Electronic Eligibility Verification Program - CMS participates in the Electronic Employment Eligibility Verification Program (E-Verify). E-Verify helps employers determine employment eligibility of new hires and the validity of their Social Security numbers. If selected, the Form I-9 will be required at the time of in-processing. [Click here for more information about E-Verify and to obtain a copy of the Form I-9.](#)
- Standard Form 61, Appointment Affidavits - If selected, the Standard Form 61 will be required at the time of in-processing. [Click here to obtain a copy of the Standard Form 61.](#)

Additional selections may be made from this announcement for similar positions within CMS in the same geographical location. For Central Office vacancies, the 'same geographical location' includes Baltimore, Maryland; Bethesda, Maryland; and Washington, D.C.

If you are unable to apply online or need to fax a document you do not have in electronic form, view the following link for information regarding an Alternate Application.

Read more

How You Will Be Evaluated

You will be evaluated for this job based on how well you meet the qualifications above.

Once the announcement has closed, your online application, resume, and CMS required documents will be used to determine if you meet eligibility and

qualification requirements listed on this announcement. If you are found to be among the top qualified candidates, you will be referred to the selecting official for employment consideration. Please follow all instructions carefully. Errors or omissions may affect your rating.

Your qualifications will be evaluated on the following competencies (knowledge, skills, abilities and other characteristics):

- Oral Communication
- Policy Analysis
- Program Integrity
- Written Communication

Read more

Background checks and security clearance

Security clearance

Public Trust - Background Investigation

Drug test required

No

- Required Documents

HelpRequired Documents

The Following Documents Are REQUIRED

- Resume showing relevant experience; cover letter optional. Your resume must indicate your citizenship and if you are registered for Selective Service if you are a male born after 12/31/59. Your resume must also list your work experience and education (if applicable) including the start and end dates (mm/dd/yy) of each employment along with the number of hours worked per week. For work in the Federal service, you must include the series and grade level for the position(s). Your resume will be used to validate your responses to the assessment tool(s). For resume and application tips visit:

- * CMS Required Documents (e.g., SF-50, DD-214, SF-15, etc.).* Current CMS employees are REQUIRED to submit a copy of their most recent Notification of Personnel Action (SF-50) at the time of application. Additional documents may also be required to be considered for this vacancy announcement. Click here for a detailed description of the required documents. Failure to provide

the required documentation WILL result in an ineligible rating OR non-consideration.

PLEASE NOTE: A complete application package includes the online application, resume, and CMS required documents. Please carefully review the full job announcement to include the 'Required Documents' and 'How to Apply' sections. Failure to submit the online application, resume and CMS required documents, will result in you not being considered for employment.

- Benefits

HelpBenefits

A career with the U.S. Government provides employees with a comprehensive benefits package. As a federal employee, you and your family will have access to a range of benefits that are designed to make your federal career very rewarding. Learn more about federal benefits.

Review our benefits

Eligibility for benefits depends on the type of position you hold and whether your position is full-time, part-time, or intermittent. Contact the hiring agency for more information on the specific benefits offered.

- How to Apply

HelpHow to Apply

Your complete application package, as described in the 'Required Documents' section, must be received by 11:59 PM ET on 12/13/2018 to receive consideration.

IN DESCRIBING YOUR WORK EXPERIENCE AND/OR EDUCATION, PLEASE BE CLEAR AND SPECIFIC REGARDING YOUR EXPERIENCE OR EDUCATION.

Please Ensure EACH Work History Includes ALL Of The Following Information

We strongly encourage applicants to utilize the USAJOBS resume builder in the creation of resumes.

- Official Position Title (include series and grade if Federal job)
- Duties (be specific in describing your duties)
- Employer's name and address
- Supervisor name and phone number

- Start and end dates including month, day and year (e.g. June 18, 2007 to April 05, 2008)
- Full-time or part-time status (include hours worked per week)
- Salary Determining length of general or specialized experience is dependent on the above information and failure to provide ALL of this information WILL result in a finding of ineligible.
- To begin, click Apply to access the online application. You will need to be logged into your USAJOBS account to apply. If you do not have a USAJOBS account, you will need to create one before beginning the application.
- Follow the prompts to select your resume and/or other supporting documents to be included with your application package. You will have the opportunity to upload additional documents to include in your application before it is submitted. Your uploaded documents may take several hours to clear the virus scan process.
- After acknowledging you have reviewed your application package, complete the Include Personal Information section as you deem appropriate and click to continue with the application process.
- You will be taken to the online application which you must complete in order to apply for the position. Complete the online application, verify the required documentation is included with your application package, and submit the application. To verify the status of your application, log into your USAJOBS account (***** all of your applications will appear on the Welcome screen. The Application Status will appear along with the date your application was last updated. For information on what each Application Status means, visit:

This agency provides reasonable accommodation to applicants with disabilities. If you need a reasonable accommodation for any part of the application or hiring process, please send an email to *****. The decision to grant reasonable accommodation will be made on a case-by-case basis.

Commissioned Corps Officers (including Commissioned Corps applicants that are professionally boarded) who are interested in applying for this position must send their professional resume (not PHS Curriculum Vitae) and cover letter to ***** in lieu of applying through this announcement.

The cover letter should specifically explain how you are qualified for this position and draw specific attention to your resume that demonstrates these qualifications. In the subject line of your e-mail please include only the Job Announcement Number. In the body of your e-mail please include your current

rank name and serial number. Failure to provide this information may impact your consideration for this position.

CMS employees who are currently appointed under Schedule A authority and are interested in applying for this position must submit their resume, Schedule A documentation, transcripts (if positive education required or qualifying through education substitution), and cover letter (optional) to

*****. You MUST include the Job Announcement Number in the subject line of the email to receive consideration for the position. For additional information regarding Schedule A authority click here.

[Read more](#)

Agency contact information

Amanda Sullivan

Phone

Email

Address

Center for Program Integrity 7500 Security Blvd Woodlawn, MD 21244 US

[Learn more about this agency](#)

Next steps

Once your online application is submitted, you will receive a confirmation notification by email. Your application will be evaluated to determine your eligibility and qualifications for the position. After the evaluation is complete, you will receive another email notification regarding the status of your application.

Within 30 business days of the closing date, 12/13/2018, you may check your status online by logging into your USAJOBS account

(***** We will update your status after each key stage in the application process has been completed.

[Read more](#)

- Fair & Transparent

Fair & Transparent

The Federal hiring process is setup to be fair and transparent. Please read the following guidance.

Equal Employment Opportunity Policy

The United States Government does not discriminate in employment on the basis of race, color, religion, sex (including pregnancy and gender identity), national origin, political affiliation, sexual orientation, marital status, disability, genetic information, age, membership in an employee organization, retaliation, parental status, military service, or other non-merit factor.

- Equal Employment Opportunity (EEO) for federal employees & job applicants

[Read more](#)

Reasonable Accommodation Policy

Federal agencies must provide reasonable accommodation to applicants with disabilities where appropriate. Applicants requiring reasonable accommodation for any part of the application process should follow the instructions in the job opportunity announcement. For any part of the remaining hiring process, applicants should contact the hiring agency directly. Determinations on requests for reasonable accommodation will be made on a case-by-case basis.

A reasonable accommodation is any change to a job, the work environment, or the way things are usually done that enables an individual with a disability to apply for a job, perform job duties or receive equal access to job benefits.

Under the Rehabilitation Act of 1973, federal agencies must provide reasonable accommodations when:

- An applicant with a disability needs an accommodation to have an equal opportunity to apply for a job.
- An employee with a disability needs an accommodation to perform the essential job duties or to gain access to the workplace.
- An employee with a disability needs an accommodation to receive equal access to benefits, such as details, training, and office-sponsored events.

You can request a reasonable accommodation at any time during the application or hiring process or while on the job. Requests are considered on a case-by-case basis.

Learn more about disability employment and reasonable accommodations or how to contact an agency.

Read more

Legal and regulatory guidance

- Financial suitability
- Social security number request
- Privacy Act
- Signature and false statements
- Selective Service
- New employee probationary period

This job originated on *****. For the full announcement and to apply, visit ***** Only resumes submitted according to the instructions on the job announcement listed at ***** will be considered.

Open & closing dates: 11/30/2018 to 12/13/2018

Service: Competitive

Pay scale & grade: GS 13

Salary: \$96,970 to \$126,062 per year

Appointment type: Permanent

Work schedule: Full-Time