Position: Patient Benefits Coordinator
Department: Nursing Services
Supervisor: Case Manager
Supervises: None
FLSA Status: Non-Exempt

**Position Summary:**

The purpose of this position within the Black Hawk Health Center, Sac & Fox Nation is to obtain and verify alternate resources for health care coverage services for patients.

**Duties and Responsibilities:**

- Assists patients in completing appropriate forms and interpret rules and regulations for Alternate Resources and how it impacts the Sac and Fox Nation Health Services.
- Defines alternate resources available to patient’s eligibility for Medicare, Medicaid, Veterans Administration, Medical Services, private insurance, SSI, SSDI, state programs, Medicare Prescription Drug Programs, Affordable Care Act Marketplace Insurance Companies and any other applicable resources.
- Contacts alternate resource agencies, conducts personal interviews with patient and/or family members to determine potential eligibility for any alternate resources.
- Educate and advocate on behalf of and in partnership with community members on various benefits, eligibility criteria and participate in Outreach Programs.
- Assist patients in filling out proper 3rd party resource applications, appropriate state, tribal and federal benefits including due process, and representatives for due process. Follow up to patients needing re-certification for alternate resources.
- Educate staff of tribal departments and provide technical assistance to assist staff to gain a working knowledge about benefits and increase their confidence and competency (build capacity in the community through outreach programs.)
- Works closely with and serve as a liaison between the community and,
  - Social Security Administration (SSA) local, regional and central offices
  - State Disability Determination Service
  - IHS, tribal health, and community health care providers
  - State and tribal public assistance offices/staff (including TANF, LIEAP, and Food Stamp benefits)
  - Veterans’ benefits and services at the state and federal level
  - Affordable Care Act Marketplace Insurances
- Assist health care and other professional (e.g. education and human services) to understand elements of communication with SSA/DDS and how to respond to persons with disabilities.
- Gather and compile information needed to determine benefits related to health care services for all third party billing purposes and processes.
• Performs Medicare Part D eligibility check on each Medicare patient through the use in (POS) Point of Sale.
• Perform daily interviews to obtain specific demographic and insurance information in a confidential manner.
• Acquire and maintain current knowledge on information about IRS/tax policies concerning benefits, SSI, SSDI, Medicaid, Medicare, Veterans’ Benefits, Section 8, Affordable Care Act and other HUD/tribal subsidized housing.
• Utilize policy resources (CD, paper, internet format) including:
  ▪ SSA Code of Federal Regulations (CFR)
  ▪ SSA Program Operations Manual System (POMS)
  ▪ Medicaid CFR
  ▪ State Medicaid Policy
  ▪ TANF CFR
  ▪ State and/or Tribal TANF policy
  ▪ Federal and state Food Stamp (FS) policy
  ▪ VA CFR and policy
  ▪ HUD CFR, policy and forms, as necessary
  ▪ Affordable Care Act Marketplace Insurance Companies
• Plan and carry out the work of the office and handles problems and deviations in accordance with established instructions, priorities, policies, commitments and program goals of the supervisor and accepted practices in the position.
• Maintains logs of all Medicaid applications listing approvals, denials and verifications. Compiles TMAM (Ok Tribal Medicaid Administrative Match-Soonercare Application Processing Invoice) on a quarterly period. Maintains logs of patients applying for the Affordable Care Act Marketplace Insurance.
• Prepare routine correspondence when appropriate to patients and providers.
• Work in coordination with the Contract Health Services Specialist and relevant Health and Human Services Program Staff. (Social Services, Behavioral Health, etc.)
• Enhances professional growth and development through participation in educational programs, meetings, and workshops.
• Performs other duties as assigned.

Knowledge, Skills, and Abilities:

• Must be computer proficient, excel application skills and must possess good communication skills. Ability to interact with patients and co-workers in a courteous and productive manner.
• Skill in the practical use of electronic systems to provide general clerical office support and proficient typing.
  ▪ Ability to keep abreast current changes in policies and regulations of eligibility.
  ▪ Ability to participate in planning, implementation and improvements of Alternate Resources.
  ▪ Knowledge of established procedures, required forms, etc., associated with the various health insurance programs.
• Knowledge of the nature and content of publications, forms, and other guidelines or informational material pertinent to carrying out or coordinating work and specific program activities.
• Must be courteous and demonstrate good public relation skills.
• Knowledgeable of HIPAA guidelines and 1974 Privacy Act involving confidentiality, Civil and Criminal penalties for unlawful disclosure of patient information.

**Supervisory Controls:**

• Work is performed under the general supervision of the Case Manager, who provides instructions on new or changed procedures.
• Work is primarily reviewed in terms of the overall efficiency of the services provided to patients, accuracy of information obtained and compliance with various guidelines.

**Complexity:**

• Medicare, Medicaid, and/or private/commercial insurance) and Affordable Care Act Marketplace Insurance are available for all patients served within the Sac and Fox Nation Health Services.
• Incumbent must be able to effectively communicate to the patient what specific information is needed, the reason for requesting such information and be able to ascertain that it is accurate as possible.

**Personal Contacts:**

Personal contacts are with patients and families exchanging and providing factual medical information to determine eligibility for services and to serve as liaison to providers and recipients.

**Physical Demands:**

Work is mostly sedentary, typing, and usage of the telephone. Visual acuity is needed for computer monitor screens.
**Education And Experience:**

Incumbent must have an Associate Degree or higher in a field relevant to the position. Excellent oral and written communications skills and a professional appearance. Previous experience on qualifying patients for Alternate Resources and communicating with Private Insurances for pre-certification preferred.