

ASSISTANT MEDICAID ANALYST

Code No: 4-01-055
COMPETITIVE

DISTINGUISHING FEATURES OF THE CLASS: This is a technical position in a school district responsible for supporting the Medicaid compliance and reimbursement operation and services. Duties involve the review and audit of eligible services, and documentation of service delivery. The employee reports directly to, and works under the general supervision of, a higher level staff member. Supervision is not a responsibility of this position. Does related work as needed.

TYPICAL WORK ACTIVITIES: (All need not be performed in a given position. Other activities may be performed although not listed.)

Reviews and audits Medicaid eligible services for the district and outside agencies for compliance with State and Federal guidelines, regulations, and laws;

Reviews documentation of service deliveries to support claims for Medicaid reimbursements;

Reviews quarterly progress reports, assessments, contact logs, statements of accessibility, prescriptions, orders, and referrals;

Develops and maintains the district's Medicaid intranet site for use as a resource and hub for documents, forms, training materials, information, and announcements;

Assists in the development of procedure manuals and training for the district's outside agencies;

Maintains supporting documentation for all claims submitted for Medicaid reimbursement in compliance with all State and Federal guidelines, regulations, and laws;

Develops and maintains multiple databases necessary to insure compliance with State and Federal Medicaid guidelines, this includes Medicaid consent, related services attendance, quarterly progress notes, Medicaid eligible students, demographics, and un-billable students;

Submits documentation, and reviews audit defensible claims for Medicaid reimbursement;

Submits claims for Medicaid reimbursement using New York State's software system.

FULL PERFORMANCE KNOWLEDGES, SKILLS, ABILITIES AND PERSONAL CHARACTERISTICS:

Good knowledge of Medicaid eligible services regarding compliance with State and Federal guidelines, regulations, and laws; good knowledge of applicable laws, rules and regulations; good knowledge of employer's policies relating to Medicaid reimbursement; ability to organize information into reports; ability to review claims, reimbursements, and reports; ability to monitor related services provided; ability to determine if billing is complete and accurate; ability to develop and maintain an intranet site; ability to assist in the development of procedure manuals and training; ability to maintain documentation for Medicaid claims and reimbursement; ability to develop and maintain databases; ability to establish and maintain effective working relationships; ability to communicate effectively both orally and in writing; analytical ability; good judgment; physical condition commensurate with the demands of the position.

MINIMUM QUALIFICATIONS: Graduation from high school or possession of an equivalency diploma, PLUS one (1) year of paid full-time or its part-time equivalent experience in the review and submission of Medicaid reimbursement forms, or insurance or medical claims.

SPECIAL REQUIREMENT: If you are appointed, you will be required to have a valid license to operate

a motor vehicle in New York State or otherwise demonstrate your capacity to meet the transportation needs of the job.

ADOPTED: August 5, 2010

REVISED: November 8, 2012