



Southern Ute Indian Tribe

Human Resources
P. O. Box 737 – 356 Ouray
Ignacio, CO 81137
Fax: (970) 563-0302

VACANCY ANNOUNCEMENT

ANNOUNCEMENT DATE: 06/03/2010
POSITION TITLE: Referral Services Manager Trainee
DEPARTMENT: Tribal Member Health Benefits
POSITION STATUS: Full Time

CLOSING DATE: 06/17/2010
GRADE: 19
FLSA: Exempt

POSITION SUMMARY: This is a trainee position for a Southern Ute Tribal member. The goal of the program is for the Trainee to assume the position of Referral Services Manager upon successful completion of the Program. The length of trainee program is one year, with quarterly evaluations and merit increases based upon performance. The beginning wage is 20% below a grade 19. This position will learn the responsibilities of the Tribal Health Referral Services division to include the overall direction, supervision, and technical administration of federally funded contract health services (CHS) and Tribally funded resource pool benefits coordination.

STATEMENT OF DUTIES:

1. Learns to supervise and coordinate the functions and staff of the Referral Services Division across the THD Department, the Southern Ute Health Center, and other programs as required including Federally funded contract health services (CHS) and Tribally funded resource pool Benefits Coordination.
2. Learns to provide support and technical assistance to the Department Director on matters involving referral services including medical, surgical, dental, hospital, and clinical services to all eligible beneficiaries.
3. Learns to develop long and short range planning, evaluation, analysis, and projections in consultation with appropriate personnel including the THD Director.
4. Learns personnel management functions to include, but not limited to, scheduling work hours, completing annual employee performance reviews, processing leave requests, participation in the employee recruitment process, completing and issuing disciplinary actions. Learns to develop and update position descriptions, performance requirements and procedural manuals as necessary. Keeps staff informed of changes in procedures, regulations and policies affecting referral services and its functions.
5. Learns to create, implement, and maintain referral service policies for all related programs, functions, services, and activities. Learns to implement policies and procedures to maintain the confidentiality, security, and physical safety of referral service records.
6. Learns to develop and implement a comprehensive internal quality control system determining the effectiveness of such controls and the impact on the referral services program.
7. Learns to formulate and issue written instructions and procedures for non-routine or complex assignments, new or changed referral service programs, functions, services, and activities.
8. Learns how to perform liaison functions with providers, state, and local agencies; and monitors/reports status of CHS activities and funds.
9. Learns to issue purchase orders obligating CHS (federal) funds and/or Tribal funds when appropriate and electronically submits purchase order information to the Tribe's contracted fiscal intermediary.
10. Learns to determine those cases that patients may qualify for alternate resources and/or catastrophic health emergency funds (CHEF).
11. Learns how to evaluate pertinent contract health cases and assembling, analyzing, and checking statistical data. Learns to advise patients and their families concerning eligibility and other facets of the referral services program.
12. Learns to plan and develop orientation materials for patients, families, and THD staff concerning referral services.
13. Learns to ensure referral services assistance is provided to eligible Southern Ute and other Native American people within fund limitations utilizing the appropriate medical priorities and funding sources on a case-by-case basis.
14. Learns to maintain complete document control registers indicating federally appropriated funds and authorization registers for tribally appropriated funds for contract patient care. Learns to review automated data for comparison with manual data and when errors are detected locates the source and executes appropriate corrective action.
15. Learns to recommend adjustments in medical priorities when warranted due to limited funding.
16. Learns to recommend hardware, software, and required equipment and supplies to maintain an efficient referral service operation.
17. Learns to review completed claims submitted by vendors, and EOBRS received from the FI. Returns unclear or incomplete documents to health providers. Learns to compare services provided against contract terms and enters data to ensure that system operations are accurate.
18. Learns to draft correspondence regarding patients, health care providers, and other agencies regarding eligibility, CHS policy and regulations, including letters of denial of claims.
19. Learns to audit claims processed for patient eligibility for third party programs, proper codes that indicate primary provider codes, diagnosis, and clinic codes.
20. Learns for the process of completing and submitting referral service budgetary documents and reports required as part of the THD department budgetary process.
21. Learns to provide and/or coordinate bi-annual training and orientation of referral service employees, and programs to ensure compliance with new and existing tribal, federal, and state regulations.
22. Learns to resolve informal client complaints and refers unresolved problems to the THD Director for resolution.
23. Learns to utilize a number of substantive guidelines. Guidelines are provided and include the following: IHS circulars, CHS Regulations, Tribal, State, Federal and Public laws, Electronic Health Record Users Manual, AAAHC Standards, HIPAA Guidelines, and other IHS procedure manuals. Applicable technical references are available from the private sector. Learns to use judgment in locating and selecting the most appropriate guidelines, references and procedures for application and in making appropriate changes to adapt the guidelines to specific cases.
24. Learns to ensure work is performed in compliance with the privacy act and the health insurance portability and accountability act (HIPAA) laws and regulations.

25. Performs other work related duties as required or requested.

SUMMARY OF QUALIFICATIONS:

- Associates Degree in Medical Administration, Accounting, Business Administration or closely related area, and one-year experience in the health or employee benefits administration field **OR** 2 years experience in health or employee benefits administration and 1 years experience in office administration. A combination of relevant and appropriate education and experience demonstrating analytical and critical thinking skills and an ability to administer the requirements and responsibilities of the position may be considered.
- Must have six months supervisory experience with a sound knowledge of supervisory methods, procedures, and managerial techniques, including time management and organizational skills.
- Must have general knowledge of Contract Medical Care Policies and Procedures, Fiscal Intermediary claims processing, and automated data processing systems.
- Must have general knowledge of various federal, state, and local laws, policies, regulations, and precedents as they pertain to contract health services.
- Must have a working knowledge of and proficiency in Word Processing and Data Systems management.
- Must have general knowledge and familiarity with the regulations and standards of the health care accrediting agencies (i.e. AAAHC or JCAHO) and the skill to reconcile contradictory requirements in preparing recommendations.
- Must have strong interpersonal skills and strong organizational skills.
- Must have excellent verbal and written communication skills.
- Must be able to interact in a positive manner with Tribal members, Tribal leaders, and other department staff, visitors to the Department, and coworkers and supervisors.
- Must have experience using basic office equipment including telephones, copiers, and fax machines.
- Must pass thorough criminal background, Colorado Central Registry, and fingerprint checks and will be required to sign confidentiality agreements.
- Must complete OF-306, "Indian Health Service Child Care & Indian Child Care Worker Positions" Form.
- Must possess a valid Driver's License for state of residency and be insurable under the Tribal vehicle insurance policy.
- Must pass pre-employment drug test.

PREFERRED QUALIFICATIONS:

- General knowledge of Indian Self Determination P.L. 93-638.
- Ability to read, interpret, and comprehend the 1974 Federal Privacy Act.
- Knowledge of, and the ability to apply, the Alternate Resources regulations; P.L. 94-437, Title IV of Indian Health Care Improvement Act, Indian Health Service Policy and Regulations on Alternate Resources, CFR 42-36.2 1 (A) and 23 (F), and P.L. 99-272, Federal Medical Care Cost Recovery Act, the Drug Abuse Office and Treatment Act of 1972, Health Insurance Portability and Accountability Act (HIPAA), and policies and procedures governing the recovery cost of medical care provided to patients
- Knowledge of Indian Health Service policies and procedures and an understanding of the capabilities and limitations of hardware and software resources in order to advise the supervisor and make recommendations to carry out projects and coordinate efforts with others.

APPROVED:

Personnel Director

Date

Executive Officer

Date

HIRING PREFERENCE:

1. Enrolled Southern Ute Indian Tribal Member
2. Native American legally married to a Southern Ute Tribal Member
3. Enrolled Member of the Ute Mountain Ute or Northern Ute Tribe
4. Local Native American
5. Veteran

HOW TO APPLY:

1. A completed, signed Application for Employment must be received by the Human Resource Department by 5:00 p.m. on the date of the job closing.
2. A separate Application for Employment must be completed for each position applied for.
3. Mail, deliver, or FAX a completed and signed Application for Employment to the address at the top of the page.