

		JOB CODE:	
POSITION TITLE:	Provider Services Representative (Hybrid)	DATE:	<u>January 2024</u>
	** Only Local Candidates will be considered **		
DIVISION:	Provider Network Management		
REPORTS DIRECTLY TO:	Senior Director of Network Management		

ORGANIZATION

Fulcrum Health is a physical benefit management organization, performing delegated administrative functions for its’ clients, including credentialing, utilization management, claims processing and care coordination in support of delivering high-quality practitioner networks to our customers.

POSITION PURPOSE:

The Provider Services Representative is a critical member of Fulcrum’s Network Management team. The position functions as a liaison between providers, the organization, and its customers. Responsibilities include communicating with and maintaining strong relationships with Fulcrum’s network providers and provider clinic staff. Intake, research, respond to, and track and report on external and internal inquiries. Maintains current knowledge of and complies with policy, procedures and regulatory requirements in the organization, as well as regulatory and customer requirements for day-to-day activities and projects. Additionally, this role will develop and maintain provider educational materials, assist with provider training, provider onboarding, research and respond to claim inquiries, support network expansion efforts, and participate in quality improvement activities. This is a hybrid position requiring an on-site presence at our Plymouth, MN, office two to three days a week. Only local candidates will be considered for this role.

ESSENTIAL FUNCTIONS:

- Initiate and maintain effective channels of communication with network providers, and provider office staff
- Handle provider, provider office staff and Fulcrum client inbound inquiries within expected turnaround times
- Assist providers and provider office staff with problem resolution

- Research and respond to claims inquiries
- Gather, review, and submit relevant documentation needed to resolve claim inquiries
- Conduct outreach to providers
- Develop and maintain education materials (i.e. FAQ's)
- Coordinate publication of provider materials on Fulcrum portals (i.e., administrative procedure tools, provider manual, provider billing training, etc.)
- Initiate and participate in process improvement opportunities
- Compile routine inbound and outbound inquiry statistics (key performance indicator)
- Develop and maintain policies and procedures
- Document and maintain work instructions
- Support network expansion efforts
- Other duties as assigned.

REQUIRED QUALIFICATIONS: *(Minimum qualifications needed for this position)*

- Experience in customer services, client services, provider relations, or claims processing
- 3+ years of experience in coordinating and managing administrative business processes
- Project management skills
- Effectively prioritize and execute tasks
- Strong attention to detail
- Customer service skills
- Strong verbal and written communication skills
- Critical thinking, analysis and problem solving
- Ability to maintain composure in stressful situations
- Project a professional business presence and appearance
- Knowledge and experience with MS Office suite and applications (i.e. Excel, Word, TEAMS, and Outlook)

PREFERRED QUALIFICATIONS:

- Bachelor's degree or equivalent industry experience
- Experience with Zendesk and/or other client relationship management (CRM) solutions
- Experience with Symplr sProvider

DIRECT/INDIRECT REPORTS:

- Number of direct reports: 0
- Number of indirect reports: 0

Work Location:

Plymouth, MN (hybrid).