



POSITION: Provider Relations Representative

DEPARTMENT: Provider Relations

LOCATION: Oregon

JOB CLASSIFICATION: Hourly/Non-exempt

Position Summary: The Provider Relations Representative is responsible for supporting provider education and communications and to maintain highly satisfying and functioning relationships. The Provider Relations Representative will also serve as the primary contact and resource for ATRIO provider inquiries and questions in the assigned territory.

Reporting Accountability: Reports to the Provider Relations Manager

Primary Role and Responsibilities:

- Lead Provider Relations communication efforts in the development and delivery of positive and productive relationships with all provider networks;
- Serve as a point of contact for all provider types in resolving issues escalated through customer and provider service call centers, grievance and appeals, or as may be initiated through direct provider contact with the goal of balancing relationships, ATRIO timeliness guidelines and policies;
- Cultivate and maintain a collaborative working relationship with contracted providers and delegated network providers and administration;
- Manage provider communications; assists as an internal subject matter expert in claims adjudication and government payment requirements;
- Assist providers in understanding contractual obligations;
- Report and track/trend operational issues to be communicated to the Director of Provider Relations;
- Coordinate with internal departments and develop, schedule and lead provider education presentations in assigned territories;
- Support provider network adequacy review and process;
- Work cooperatively supporting internal departments (i.e., Medical Management, Customer Service and Marketing) as well as external partners;
- Serve as an active member of the Provider Relations team, demonstrating behaviors supportive of teamwork, collaboration, flexibility, problem solving and customer service;
- Other duties as assigned

Professional Competencies:

- Will require up to 70% travel;
- Ability to demonstrate effective group presentation design and execution;
- Proficient in basic computer software applications, including Microsoft Office;
- Solid and tactful oral and written communication skills;
- Ability to work efficiently in a fast-paced environment with competing priorities;
- Ability to interact with a wide variety of personality styles;
- Skilled in critical thinking, problem solving, and drawing conclusions from data, regulatory requirements, and past and current best practices;
- Ability to demonstrate open and non-defensive communication;
- Ability to understand and explain government sponsored health care payment methodologies;
- Ability to research answers from multiple sources timely and effectively.

Preferred Experience:

- Minimum 3 – 5 years of both commercial and government sponsored health care payment methodologies;
- Provider relations, customer service, claims adjudication or grievance and appeal experience for either a health plan or medical provider/facility;
- Understanding of insurance industry terminology in the field of health care.

Education and Training:

- Associates degree required/or related experience
- Bachelors degree preferred

Required Licensing or Certification:

- State specific driver's license