



Example of Appeals Analyst Job Description

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Our growing company is looking to fill the role of appeals analyst. We appreciate you taking the time to review the list of qualifications and to apply for the position. If you don't fill all of the qualifications, you may still be considered depending on your level of experience.

Responsibilities for appeals analyst

- Communicate clearly, such as telephonically, online or via payment package processes to both internal and external parties
- Gain commitment, when required, for payment through concise and factual collection techniques
- Facilitate correction of non-payment related discrepancies through I-plan changes or coordination with other departments as needed
- Escalate accounts to appropriate individuals at the payer and management as needed, including accounts with lack of timely payer response
- Coaches, trains, and audits to ensure the team correctly utilizes guidelines and review tools to conduct extensive research and analyze the grievance and appeal issue(s) and pertinent claims and medical records to either approve or summarize and route to clinical staff for review
- Assists in training new associates and helps manager identify need for remedial training
- Serves as an expert on company knowledge for the team
- Identification of process improvements consistent with compliance requirements and presentation for implementation
- Determine and initiate appropriate appeal process tracking
- Determines outcome of non clinical appeal decisions using judgment within set guidelines for more complex cases

Qualifications for appeals analyst

- Ability to prioritize and work independently or as part of a team
- Ability to track assignments and communicate using TeamTrack/SharePoint, Email, and WebEx
- Knowledge of multiple products and benefits associated with each product
- Reviews, classifies, researches and resolves member complaints (grievances and/or appeals) and communicates resolution in writing to members or their authorized representatives in accordance with standards and requirements established by the Centers for Medicare and Medicaid
- Researches member's covered benefits under both Medicare and Medicaid, using member utilization and medical records obtained for the purpose of critically reviewing member's complaint