HEALTH CARE ADVOCATE PROGRAM MANAGER

Duties Include but not limited to: The position will perform health insurance consumer education, case management; case review; medical records review; coordinate internal and external consumer appeals; liaison with health plans, providers, consumers, families, government agencies; lead consumer presentation at appeal hearings; assist in the design of, and participate in, agency quality improvement activities; and, outreach. Manages OHA Nurse Consultants, reviews for cases for agency scope, triages cases to staff, conducts performance reviews, attends task force and council meetings upon request. Performs related duties as required.

Knowledge, Skills and Abilities:
Considerable knowledge of and ability to apply relevant state and federal laws, statutes and regulations; considerable knowledge of financial and business operations, statutory accounting and financial procedures related to insurers, hospital and medical service corporations and health maintenance organizations; considerable knowledge of health benefits, case management, utilization review and managed care appeal process; considerable knowledge of consumer issues in area of health insurance or managed care; considerable knowledge of program development and management in areas of health care, health insurance and customer service; knowledge of and ability to apply management principles and techniques; knowledge of business operations of health care providers and health maintenance organizations; knowledge of methods used by other state insurance regulatory bodies; knowledge of in-service training and instructional methods; knowledge of economic and research techniques; knowledge of state legislative process; considerable interpersonal skills; considerable oral and written communication skills; ability to interpret proposed legislation and determine application and impact on program

General Experience: Eight (8) years of experience in health care advocacy, insurance regulation, the insurance industry, nursing, managed care and/or health care administration.

Special Experience: At least two (2) years of the General Experience must have been in a lead capacity or consultative capacity.

Substitutions Allowed:
1. College training may be substituted for the General Experience on the basis of fifteen (15) semester hours equaling one-half (1/2) year of experience to a maximum of four (4) years for a Bachelor's degree.
2. A Master's degree in health care advocacy, health care management, nursing, business administration, insurance, finance, public administration, public health or other related areas may be substituted for one (1) additional year of the General Experience.

SPECIAL REQUIREMENTS:
1. Incumbents in this class may be required to travel.
2. Incumbents in this class may be required to possess and retain a valid Motor Vehicle operator's license.

Note: The filling of this position will be in accordance with reemployment, SEBAC, transfer, promotion and merit employment rules, if applicable.
APPLICATION INSTRUCTIONS: To be considered for this position, qualified candidates must submit a cover letter, resume, and Application for Employment (CT-HR-12 form) located at www.das.state.ct.us/exam to be received no later than the Closing Date noted above. Current State employees must also include copies of their two (2) most recent performance appraisals. Submit application package to:

Carmen Rivera  
Human Resources Assistant  
P.O. Box 816  
Hartford, CT 06142-0816

OR

E-MAIL: CID.HR@CT.GOV / Overnight mail address: 153 Market Street, 7th Floor, Hartford, CT 06103

Incomplete or late application packages will not be considered. Due to the large volume of applications expected to be received, we are unable to confirm receipt of applications.

AN AFFIRMATIVE ACTION / EQUAL OPPORTUNITY EMPLOYER

The State of Connecticut is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities, and persons with disabilities.