

Care Advocate Specialist

This position is available in our San Antonio, TX and Nashville, TN locations.

Please email resumes to careadvocatejobs@callcarenet.com.

CareNet has a challenging opportunity for a **Care Advocate Specialist**. Reporting to the Client Services Department, this position is responsible for managing and coordinating a high volume of service requests from members and providers. This is a non-clinical position. The Care Advocate Specialists are not responsible for conducting any triage program activities that require interpretation of clinical information.

Responsibilities listed are representative of the knowledge, skill, and/or ability required:

- Provide exceptional customer service via telephone
- Ensures customer satisfaction by providing quality service, identifying customer needs and assisting them with issues/concerns related to health care issues
- Research, identify and problem solve, verify eligibility of service and place call backs as required
- Meet and support established service goals and business objectives by meeting and exceeding performance standards
- Adapts communication style to persons representing diverse personal, professional, cultural, and socio-economic backgrounds.
- Ability to multi-task; simultaneously thinks, talks, and types.
- Uses excellent hearing and listening skills to receive detailed information.
- Responds to the needs of a 24/7/365 operation.
- Contact health plans on member's behalf to coordinate care.
- Collaborate care for members with complex medical issues
- Facilitate the collection and transfer of medical records as needed.
- Arrange health care services for members
- Locate various healthcare resources in member's community
- Ability to analyze and understand multiple health plan benefits
- Proactively identify and make appropriate referrals into the member's healthcare program
- Continuously evaluates process and programs to ensure Client, Accredited and CareNet standards of practice are met and implements methods and recommendations to improve process.

The Job Qualifications are as follows:

- Education/Experience: High School Diploma or General Education Degree (GED) required; some college preferred. Minimum of three years medical clerical experience required. Minimum of two years customer service, medical office/clinic or institutional setting; or equivalent combination of education and experience required.
- Healthcare experience required.
- Medicare/Medicaid experience preferred.
- Medical benefit and insurance coordination experience preferred.
- Language Ability: Ability to read, analyze, and interpret company software, guidelines, health references, professional journals, technical procedures, or governmental regulations. Ability to effectively present information and respond to questions.
- Math Ability: Ability to calculate figures and amounts. Ability to apply concepts of basic algebra.
- Reasoning Ability: Ability to deal with and solve problems using solid judgment skills.

- Technical skills: Solid PC and keyboarding skills required. Ability to handle multiple line phone systems, pagers and paging systems preferred. Must be proficient in Microsoft Office programs including but not limited to Excel, PowerPoint and Word.
- Supervisory Responsibilities: N/A