



Job Title: Redetermination Coord II
Reports To: Lead Case Manager
FLSA Status: Full Time, Exempt
Department: Medicaid Waiver
Location: M4A

Position Summary:

The Medicaid Waiver Services Redetermination Coordinator II supports the Lead Case Manager's oversight of the Redetermination process for all clients. He or she has the appropriate experience, education and licensing to review person-centered care plans (PCCP) as required by NCQA accreditation. He or she provides feedback to Case Managers on care plans and assists them to develop or adjust person-centered care plans as needed and as required. The Redetermination Coordinator II documents accurately and promptly and performs other duties as assigned by the Lead Case Manager or Assistant Director. The Redetermination Coordinator II liaises with Medicaid Waiver Case Managers to ensure there are no gaps in service.

The MWS Redetermination Coordinator II must adhere to ethical behavior and HIPAA; establish and maintain positive working relationships; communicate effectively; and foster teamwork.

Essential Duties and Responsibilities:

- Redeterminations of the EDW clients are performed on an annual basis and follow an existing timeline and steps.
- Each month the Redetermination Coordinator initiates the redetermination process for each client by generating the application up to obtaining the completed Medical Application and serves as the connector between clients, caregivers, case managers, and Health Care Providers in this process.
- The Redetermination Coordinator must complete a new HCBS-1 application in the month that the current determination expires as well as prompt the case manager to complete the required narrative.
- Adjust the Care Plan with guidance, as needed, because of changes in care from the redetermination process.
- Document approval and notify case manager.
- Outreach to doctor offices, communities, and other organizations to educate about the E&D Waiver.
- Assist the LCM as part of the Care Team to review person-centered care plans
- Work with case managers to make appropriate changes and corrections to ensure PCCP's meet all requirements of NCQA
- Perform other duties as assigned.

Knowledge, Skills, and Abilities (**can be acquired on the job*)

- Knowledge of community resources and aging programs.*
- Comprehend the goals, objectives, and regulations of applicable programs.
- Ability to establish and maintain effective working relationships with co-workers, clients, and community representatives.

- Ability to de-escalate stressful situations, multi-task and manage projects.
- Ability to write reports and compile information accurately and meet deadlines.
- Work independently and as a team player.
- Maintain HIPAA Compliance with clients, professionals and in methods of communication.
- Knowledge of social work principles and interviewing techniques.
- Working knowledge of Microsoft Office and general office procedures.
- Excellent verbal and written communication skills.
- Knowledge of English grammar, spelling, and punctuation.

Education / Experience:

1. Bachelor's Degree in social work is required, Master's degree preferred.
2. Social Work License required.
3. 2-4 years home visit experience required.

Essential Functions / Physical Requirements:

The requirements below are required with or without reasonable accommodations:

- Ability to tolerate walking, standing, crouching, reaching, and sitting throughout the day.
- Ability to meet the attendance requirements for the position.
- Ability to "drive" to locations necessary to accomplish for position / program work.
- Ability to occasionally lift and/or move up to 10 pounds.