**Managed Care Contracts Manager**

**Northeast Family Services**

**Lawrence, MA**

**Are you interested in working for a dynamic organization that is invested in their clients and staff?**

Under the direction of the Senior Vice President, this position will be responsible for a wide variety of duties related to the development, implementation and ongoing management of the agency’s multi-state managed care contracting function. Primary responsibilities include contract negotiation, administration, review and analysis of contract proposals, development of managed care strategies, serving as a liaison to external and internal customers and other special projects as assigned.

The Managed Care Contracts Manager is responsible for reaching out to providers to develop a network and evaluate, negotiate, and implement new contracts. You must be able to identify appropriate contracting, collaborate with organizations to understand payer-specific requirements, maintain appropriate documentation and review contract performances to make the right recommendations. The Manager Care Contract Manager must also coordinate with other internal team members to ensure contractual terms.

**Responsibilities**

* Assist in the development of an overall strategy for the managed care contracting activities for the agency - develop new managed care contracts; modify existing contracts with health plans; review contract language and rate and fee proposals; complete market analysis comparisons; evaluate proposals and present to senior leadership and membership
* Participate in, develop, maintain and communicate alternative payment contracts that promote the provision of high-quality and cost-efficient care such as pay-for-performance, bundled payments, shared-savings, risk sharing and global payment arrangements
* Act as a liaison to internal departments and external partners (health plan contracting and provider relations management); develop decision support and presentation materials for leadership making key decisions in critical areas
* Understand and disseminate healthcare market and industry changes including impacts due to the Affordable Care Act, Health Exchange and regulatory requirements; communicate the impact of these changes to the agency
* Support compliance with State regulatory requirements & reporting
* Follow-up with payers to address global contracting issues; ensure and interpret payer compliance to contract language and provisions and follow-up on issues as appropriate; attend meetings with contracted health plans to address complex operational and/or payment issues; work with stakeholders to develop internal process changes as needed
* Develop, review and communicate operational and clinical contract requirements; assist with pay for performance and bonus program settlement and distribution process

**Requirements**

* Bachelor of Science required, Master of Arts preferred
* 5 years of experience in healthcare, managed care, payer expertise or contract modeling and analysis
* Physician Hospital Organization (PHO), Accountable Care Organization (ACO), Provider focused work or experience
* Thorough knowledge of revenue codes, CPT codes and health care delivery systems, particularly government and commercial sponsored programs such as Medicaid and Medicare
* Knowledge of antitrust laws and regulations
* Understanding of health care reimbursement
* Strong communication and project management skills
* Able to work independently as well as with team members

**Benefits**

* Health (75% coverage) & Dental
* 3 weeks paid vacation & 1 week paid sick time
* 9 paid holidays
* 401k retirement plan with match (after 1 year of employment)
* Life insurance
* Mileage reimbursement
* Company provided laptop and cell phone
* Incentives
* Longevity bonus

**Compensation**

* Salary