

## Grievance and Appeals Specialist

Support the Grievance and Appeals team by resolving and triaging incoming requests. Intake and organize complaints by listening to and summarizing calls and assigning cases to others. Support members through problem-solving, education about resources, and information-gathering about their concerns.

### Position overview

- Member Support:
  - Speak with members and providers on the phone to understand their concerns and gather information. Research member concerns and problem-solve to find resolution.
  - Assist members with appointment scheduling and educate members about resources, benefits, and other supports.
  - Communicate with people calmly and respectfully (even when someone is not calm and respectful).
- Case Intake & Quality Control:
  - Listen to call recordings of complaints from members, conduct call quality reviews, write detailed summaries of calls, and distribute cases for further research to others on the team.
- Administrative Support:
  - Answer incoming calls to the Grievance and Appeals Unit and forward appropriately.
  - Support the department through sorting and organizing documentation and incoming requests (i.e., mail, faxes, emails, and calls), maintaining records, and transcribing minutes at department meetings.
  - Maintain departmental spreadsheets and databases as requested.
- Abide by grievance and appeals processes and regulatory requirements

### Requirements

These are the qualifications typically needed to succeed in this position. However, you don't need to meet every requirement to apply.

#### Education and experience

- Associate's degree in health, social sciences or humanities (preferred)
- Experience working in a call center, patient relations, care coordination or other customer service position (required)
- Two years of experience working with Medi-Cal or Medicare in a managed care environment (preferred)
- Experience performing grievance and appeals processing (preferred)

#### Knowledge of:

- Computer applications, including proficiency in Microsoft Office Suite
- Medicare, Medi-Cal, managed care and medical terminology (preferred)
- Work as part of a professional team as well as independently
- Thrive in a fast-paced and collaborative team environment
- Provide quality customer service at all times using a member-centered approach
- De-escalate challenging situations in which people may be upset

#### Ability to:

- Adapt to changes in requirements/priorities for daily and specialized tasks.

### Salary and benefits

The starting salary range depends on the candidate's work experience.

#### Excellent benefits package includes:

- HPSM-paid premiums for employee's medical, dental and vision coverage (employee pays 10% of each dependent's premiums)
- Fully paid life, AD&D and LTD insurance

- Retirement plan (HPSM contributes equivalent of 10% of annual compensation)
- 12 paid holidays a year, 12 paid sick days a year and paid vacation starting at 16 days a year
- Tuition reimbursement plan
- Employee wellness program

**To apply, submit a resume to [careers@hpsm.org](mailto:careers@hpsm.org).**

*Health Plan of San Mateo (HPSM) is a local County-funded nonprofit manages the health care for over 140,000 low-income people San Mateo County, including all its Medi-Cal eligible residents. HPSM is proud to be an Equal Opportunity Employer and an affirmative action employer. We are committed to equal employment opportunity regardless of race, color, ancestry, religion, sex, national origin, sexual orientation, age, citizenship, marital status, disability, gender identity or Veteran status.*