

# Provider Licensing Team Lead

InSight Telepsychiatry – Medical Affairs

## Position Summary

InSight Telepsychiatry is seeking a provider licensing team lead to work with the medical affairs team in Marlton, NJ and connect regularly with a national team of colleagues. InSight's medical affairs team functions as a service department designed to support our network of providers and our operational counterparts. This position is responsible for leading a team of internal licensing coordinators that support InSight's employed and contracted behavioral health providers – MD/DOs, APNs and LPC/LCSWs – in obtaining and maintaining their licensure, prescriptive authority and DEA/CDS registrations. It is the provider licensing team lead's responsibility to ensure our licensing coordinators submit accurate, timely and complete information. This person will report to the director of medical affairs. This fast-paced position is an excellent opportunity for an organized, problem-solving individual, with an interest in medical affairs, behavioral health and telemedicine.

## Organization Overview

InSight is the leading national telepsychiatry service provider organization with a mission to increase access to quality behavioral health care through telehealth. InSight's behavioral health providers bring care into any setting on an on-demand or scheduled basis. With over 18 years of telepsychiatry experience and an active footprint in telepsychiatry-related advocacy, InSight is recognized as an industry thought-leader. InSight is the telemedicine arm of the CFG Health Network, a behavioral health organization that delivers onsite services across the spectrum of care. These roots in onsite care influence InSight's approach to appropriate, quality services delivered through telehealth. [www.InSightTelepsychiatry.com](http://www.InSightTelepsychiatry.com)

## Job Responsibilities

### *License Maintenance (50%)*

- Track all currently held licenses for all InSight providers (MD/DO, APN, PhD, LPC/LCSW) and maintain alert system for documents/licenses set to expire
- Track and document CMEs for providers and initiate notification emails/phone calls to ensure providers are maintaining the required CMEs for license renewal
- Submit applications for license renewals of all expiring licenses and Drug Enforcement Administration/clinical decision support (DEA/CDS) registrations
- Develop systems for electronic payment of application renewals wherever possible
- Update systems (Council for Affordable Quality Healthcare ProView (CAQH ProView) etc.) with current license statuses and maintain documentation of the progress on these licenses
- Other duties as assigned

### *Initial License Application Processing (25%)*

- Ensure applicants' eligibility by analyzing their provider profiles and accompanying documents
- Work closely with providers to obtain missing documentation and/or signatures pertaining to licensing

- Populate applications, review for accuracy and completeness, submit to decision-making body and maintain follow-up to completion
- Confirm receipt of requested documents, identify and respond to issues that require additional investigation and evaluation, validate discrepancies with providers and/or licensing bodies or state boards
- Perform timely follows-ups, maintain and update databases with application statuses and report to management and providers
- Monitor licensing process requirements and compliance with regulatory bodies
- Maintain and utilize credentialing database to optimize efficiency, perform document generation and track and report on application statuses
- Maintain library of current electronic forms
- Serve as expert on all initial and renewal license applications for MD/DO, NP, LCSW/LPC and compact licenses
- Serve as expert on licensing systems, such as CAQH ProView, Federation Credentials Verification Service (FCVS) and the Uniform Application for Physician State Licensure (UA), Federation of State Medical Boards (FSMB), National Practitioner Data Bank (NPDB) etc.
- Other duties as assigned

*Staff Support (15%)*

- Serve as main support and mentor to licensing coordinators responsible for submission of new licensing applications, as well as maintenance of existing licenses, tracking CMEs and applying for and maintaining DEA/CDS registrations
- Train and coach licensing coordinators to improve their professional knowledge and skills
- Monitor and ensure compliance with principles and practices (P&P) and standard operating procedures
- Assist in creating or revising workflows, procedures, policies and/or standards as needed
- Assist in assigning medical affairs jobs to the appropriate licensing coordinator
- Monitor and balance the workload of licensing coordinators, to ensure efficiency and maximum productivity
- Regularly communicate updates, including expected completion dates, internally and externally
- Assist the medical affairs director in identifying barriers or challenges to timely completion of medical affairs jobs and help put solutions in place, including escalation and communication protocols
- Other duties as assigned

*External Communication, Report and Special Projects (10%)*

- Serve as a liaison for medical affairs with partner counterparts
- Meet with medical affairs director and project manager regularly to provide updates
- Support the medical affairs director in establishing goals and benchmarks for licensing team and regularly monitor and report on the progress of those goals
- Support quality assurance initiatives and create an environment where QA outcomes drive performance of licensing coordinators
- Participate and support credentialing committee meetings as needed
- Address overflow of credentialing jobs and other duties as assigned

### **Job Requirements**

- Bachelor's degree preferred, high school education required
- Five years of relevant healthcare experience, including specialized skills in credentialing in behavioral health care settings, hospitals, medical team offices or credential verification organizations
- Ability to work independently and with a group
- Exceptional organization and time management skills to handle priorities and meet deadlines
- Ability to communicate effectively, both verbally and in writing
- Comfortable working with individuals of diverse backgrounds
- Strong attention to quality and detail
- Proficiency with Microsoft Office Suite (Word, Outlook, Excel)

### **Ideal Candidate**

- Certified Provider Credentialing Specialist (CPCS) or Certified Professional in Medical Service Management (CPMSM)
- Knowledge of Echo credentialing software
- Knowledge of Joint Commission standards as they relate to credentialing and privileging
- Knowledge of NCQA standards as it relates to credentialing and health plan enrollment
- Knowledge of medical terminology as it relates to specific privileges

### **Logistics**

- Position available February 2018
- Position based in Marlton, NJ
- Full-time
- Reports to Director of Medical Affairs

To apply, please send your resume and a customized cover letter to [recruiting@in-sight.net](mailto:recruiting@in-sight.net).

*The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.*

*While performing the duties of this job, the employee is regularly required to stand, walk, and talk or hear. The employee frequently is required to use hands to finger, handle, or feel objects, tools, or controls; reach with hands and arms; and climb or balance. The employee is occasionally required to sit and stoop, kneel, crouch, or crawl. The employee must frequently lift and/or move up to 50 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, depth perception, and the ability to adjust focus.*

EOE M/V/F/D