

Credentialing Coordinator

InSight Telepsychiatry – Medical Affairs

Position Summary

InSight Telepsychiatry is seeking a credentialing coordinator to work with the medical affairs team in Marlton, NJ and connect regularly with a national team of colleagues. This position will be exposed to a wide variety of medical affairs and credentialing-related functions, and is responsible for leading, coordinating, monitoring and maintaining the credentialing and re-credentialing process. The credentialing coordinator will work under the supervision of the credentialing team leads and assist them with functions related to credentialing, including provider licensing, payer enrollment, facility privileging, initial appointment, reappointment, expirable documents and other tasks. This position is largely responsible for the accuracy and integrity of the credentialing database system and related applications. This position will provide an excellent opportunity to learn and to grow within the credentialing and telemedicine fields. This person will report to the manager of medical affairs.

Organization Overview

InSight is the leading national telepsychiatry service provider organization with a mission to transform access to quality behavioral health care through innovative applications of technology. InSight has two decades of experience with telepsychiatry, and serves hundreds of organizations across the country with its on-demand, scheduled, connected services and Inpathy divisions. InSight is uniquely positioned to offer scalable telepsychiatry services in settings across the continuum of care. InSight has a diverse provider team, a robust internal infrastructure and a history of adapting its programs to fit the needs of a variety of different settings and populations. www.InSightTelepsychiatry.com

Job Responsibilities

- Lead, coordinate and monitor the review and analysis of practitioner applications and accompanying documents, ensuring applicant eligibility
- Conduct thorough background investigation, research and primary source verification of all components of an application file
- Identify issues that require additional investigation and evaluation, validate discrepancies and ensure appropriate follow-up
- Prepare provider credentials file for completion, within specified periods of time and present to health network committees
- Update provider credentialing files with current information and documentation in order to maintain quality and deliver an excellent customer service experience for our providers and our partner organizations
- Respond to inquiries from other healthcare organizations, interface with internal and external customers on day-to-day credentialing issues as they arise
- Utilize the Echo OneApp credentialing database for optimizing efficiency, and perform query, report and document generation
- Submit and retrieve National Practitioner Data Bank reports in accordance with Healthcare Quality Improvement Act
- Monitor the initial, reappointment and expirables process for all medical staff, allied health professional staff, other health professional staff and delegated providers, ensuring compliance

with regulatory bodies (Joint Commission, NCQA, URAC, CMS, federal and state), as well as medical staff bylaws, rules and regulations, policies and procedures and delegated contracts

- Input credentialing information into the credentialing database
- Assist providers with completion of necessary forms, applications, etc.
- Respond to requests from customers and providers regarding credentialing documentation and privileging
- All other duties as assigned

Job Requirements

- High School diploma
- 2+ years of experience in healthcare
- Ability to analyze, interpret and draw inferences from research and prepare reports
- Informational research skills
- Ability to communicate effectively, both orally and in writing
- Organization and time-management skills
- Ability to multitask
- Comfortable working with a remote team
- Independent worker

Ideal Candidate

- Experience with credentialing systems like Echo (OneApp), Vistar, eVIPs, or Cactus
- CPCS, or other credentialing certification and/or previous credentialing experience preferred
- Working knowledge of clinical and/or hospital operations and procedures
- Program planning and implementation skills
- Experience supporting licensed professionals
- Behavioral health industry experience
- Experience working with a diverse and remote team
- Strong communication skills

Logistics

- Position available immediately
- Position based in Marlton, NJ
- Reports to Manager of Medical Affairs

To apply, please send your resume and a customized cover letter to jnapoli@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