

GREENE COUNTY CIVIL SERVICE COMMISSION
411 MAIN STREET, CATSKILL, NEW YORK 12414
518-719-3253 – www.greenecountyny.gov

Announces an
OPEN COMPETITIVE CONTINUOUS RECRUITMENT EXAMINATION FOR
MEDICAL SERVICES SPECIALIST

NON-REFUNDABLE FILING FEE: A \$15.00 filing fee must be submitted with your application in the form of a check or money order. Credit cards can be accepted when filing applications in **person only**. Please be advised the service fee is 2.49% or a flat fee of \$1.50, whichever is greater, for each credit card transaction.
CASH IS NOT ACCEPTED

LOCATION OF POSITION: Greene County Department of Social Services will utilize the eligible list resulting from this examination to fill vacancies as they occur within Social Services.

RESIDENCY REQUIREMENTS: There are no residency requirements for filling applications, but preference in appointments may be given to Greene County residents. (C.S. Law #23, Para 4, Sub Para 4-a)

SALARY: Salary will vary depending on full time or part time status

DISTINGUISHING FEATURES OF THE CLASS: The work involves responsibility for managing medical assistance medical services of the social services agency such as CTHP, Disability, Home Care, Managed Care, Family Planning, and Aid to the Disabled, etc. Work is performed under the administrative/policy direction of a Director or Administrator with professional direction from the Medical Services Director and other health professionals. Supervision is exercised over clerical personnel/support staff as directed. Does related work as required. Direct supervision is provided by an Administrator or other designated supervisor as directed.

TYPICAL WORK ACTIVITIES: (Illustrative Only)

Discusses medical problems and services available with clients; supervises the auditing of and/or audit claims submitted by physicians and other health care providers for proper reimbursement in view of services provided; Manages medical assistance programs such as CTHP, Managed Care, Disability, Home Care, Family Planning in compliance with federal, state and local program guidelines to assure proper treatment and/or to qualify for maximum reimbursement; Supervises clerical staff involved with medical services program; in conformity with established federal, state and local policies and procedures, authorizes medical care by various providers to MA eligible clients; May refer or consult with Medical Director on difficult cases or those requiring prior approval; Reviews and makes recommendations for revisions of medical assistance policies as they relate to the payment of fees and the delivery of services; establish and maintain close written and verbal contacts with health care providers; Informs health care providers of new and revised policies, procedures and fee schedules of the department; Assists social services staff in interpreting rules, regulations and mandates as they apply to medical assistance programs; prepares case and/or fair hearing outlines/drafts for review by supervisor or director.

MINIMUM QUALIFICATIONS: Graduation from an accredited school of nursing and licensure to practice as a registered professional nurse in New York State **AND:**

- A.** Two (2) years of satisfactory paid experience in a medical institution or other agency, which is involved in the delivery of health services; **OR**
- B.** A Bachelor's Degree in nursing with at least one (1) year experience in a medical institution or other agency, which is involved in the delivery of health services.

SPECIAL REQUIREMENT: **MUST HAVE VALID NEW YORK STATE DRIVER'S LICENSE** Must be willing to travel as required and can access transportation to meet field work requirements in a timely and efficient manner.

EVALUATION OF TRAINING AND EXPERIENCE

SUBJECTS OF THE EXAMINATION: The only subject of examination will be an evaluation of your training and experience. You are, therefore, asked to include in your application a summary of all pertinent training and experience in sufficient detail so that your background may be evaluated against the duties of the position. In your *summary of training* include all college course work, formal in-service training, and seminars you have attended. You must specify either the number of credits received or the number of contact hours and dates of attendance. Also include a copy of your professional license or documentation indicating eligibility for licensure. Specify the date that your license was first issued. In your *summary of experience*, you must specify the dates of your employment, the number of hours worked per week, your title, and the main duties for each. Be specific; vagueness and ambiguity will not be resolved in your favor. Candidates who submit incomplete applications or documentation may be disqualified. **ALL SECTIONS OF THE APPLICATION MUST BE COMPLETED. A RESUME WILL BE ACCEPTED ONLY AS A SUPPLEMENT TO THE APPLICATION, NOT A SUBSTITUTE FOR IT.**

APPLICATIONS ARE ACCEPTED CONTINUOUSLY: For applications, please contact this office at the above address or visit our web site at:
www.greenecountyny.gov