

# Investigator/Senior Investigator

## GEHA

Job Location: Lee's Summit, MO

Full Time

### JOB SUMMARY:

Under general supervision, the Investigator investigates incidents of suspected fraud, waste and abuse that are sent to the GEHA Special Investigations Unit (SIU) from a variety of internal and external sources in accordance with OPM - OIG requirements. This role reports to the Investigations Supervisor.

### RESPONSIBILITIES:

- Identify, investigate, analyze and evaluate instances of alleged fraud, waste and abuse related to the line of business assigned (pharmacy, medical, dental) in accordance with OPM carrier letter requirements.
- Conduct interviews and correspond with patients, providers, witnesses or other parties who may have information relevant to the investigation.
- Utilize anti-fraud technology to identify new opportunities for investigation and development of cases.
- Organize and prioritize investigations, securing needed information to substantiate or refute allegations through research and gathering other evidence.
- Prepare clear, concise and complete investigative reports and integrate medical review findings, if appropriate.
- Support OPM – OIG communication requests as required, including providing claims data analysis, medical policy guidelines, EOB's and other documents/information.
- Understand, interpret, analyze and make investigative determinations concerning CDT, CPT, ICD and HCPCS coding as it relates to potential healthcare fraud schemes and understand DRG and revenue codes.
- Maintain a basic understanding of statistical sampling methodologies in order to make recommendations on appropriate and efficient medical reviews.
- Prepare OIG case notifications and make law enforcement referrals, as required.
- Participate in negotiations and settlement discussions with providers.
- Regularly interact and communicate with members, providers and employees during the investigative process.
- Presents findings to leadership, regulators and law enforcement; assists in legal proceedings as appropriate, including testifying in legal proceedings in support of investigations.
- Travel as necessary to effectively investigate allegations of fraud, waste and abuse.
- Maintain confidentiality and discretion in all investigative activity.
- Support other projects as assigned.

### REQUIRED QUALIFICATIONS:

- Bachelor's Degree
- Additional years of qualifying related experience may be considered in lieu of formal education
- Minimum 2 years' claims investigation experience within the assigned healthcare environment (e.g., dental, pharmacy, medical)

*OR Any combination of academic education, professional training or work experience, which demonstrates the ability to perform the duties of the position.*

Preferred: Bachelor's degree

## **KNOWLEDGE AND SKILLS:**

- Excellent verbal and written communication skills with thorough documentation required.
- General knowledge and understanding of investigative processes within a healthcare environment.
- Knowledge of federal and state guidelines as well as CDT, ICD, CPT, HCPCS, DRG, and revenue codes.
- Demonstrated ability to interpret and analyze healthcare data and records.
- Above average proficiency in the use of technology applications, particularly Excel, Access, Word, and others as necessary.
- Ability to quickly adapt to different anti-fraud technology solutions.
- Possess integrity, professionalism, excellent interpersonal skills.
- Demonstrated ability to work independently.
- Critical problem-solving skills and attention to details.

## **FOR MORE INFORMATION/TO APPLY:**

[https://geha.wd5.myworkdayjobs.com/en-US/GEHACareers/details/Investigator-Senior-Investigator\\_R-003801?q=Investigator](https://geha.wd5.myworkdayjobs.com/en-US/GEHACareers/details/Investigator-Senior-Investigator_R-003801?q=Investigator)