<u>**Senior Health Analyst**</u>

The Company

The Building Service 32BJ Benefits Funds is an organization responsible for administering Health, Training, Pension, retirement Savings and Legal Services benefits to its members. The Benefit Funds office is located in the heart of New York City. The Building Service 32BJ Benefits Funds manages a $1 Billion regional health insurance plan whose goal is to improve the lives of its members and their families by providing comprehensive and affordable healthcare. Its mission is to improve member's lives through our unique combination of talent, expertise, and commitment to education, communication with and enabling members to receive benefits.

Summary:

32BJ Health Fund is looking for a talented Senior Health Analyst to perform complex analyses on claims data to generate data-driven insights that inform strategic decisions of the Executive leadership. This person needs to be passionate about working with dirty data, be flexible in dealing with ambiguity and be a master storyteller.

Essential Duties and Responsibilities:
- Support the Health Fund's commitment to improving lives of 32BJ members by providing high-quality benefits
- Perform analyses on claims data to measure trends in healthcare utilization and costs
- Evaluate performance of current benefit plans to identify opportunities for improvement in quality and costs
- Provide support for other internal units within the Fund to facilitate outreach to members
- Summarize highly complex data insights into compelling stories
- Effectively communicate findings and recommendations to the Executive leadership
- Use claims data to test specific hypotheses related to Fund's strategic initiatives
- Evaluate performance of Fund's vendors and partners to drive optimal care
- Organize, maintain, and transform large quantities of real-world data into manageable units
- Coordinate with the vendors and other partners to successfully deliver projects

Qualifications:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required
- At least three (3) years of work experience in health claims analytics
- Strong health care policy and research background; MPH or MPA preferred
- Knowledge of common statistical approaches to hypothesis testing and bias reduction in observational studies
- Must have a strong knowledge of ICD9/10, Revenue, DRG and CPT coding and general health care reimbursement methodologies
- Strong knowledge of Stata statistical software is preferred
- Strong writing and presentation skills with the ability to express complex analysis in simple to understand language and visuals

- Advanced knowledge of Excel and the MS Office suite

Interpersonal Skills:
- Detail oriented with excellent organizational and analytical skills
- Curious to understand and pursue outlying data points and to clarify opaque findings
- Eager to find insights in the data and to effectively share findings with technical and non-technical audiences
- Highly communicative and collaborative – must love working in a complex team environment
- Anticipates questions and takes initiative to resolve them
- Ability to prioritize work, seek support when needed, communicate timelines and meet deadlines

Education and/or Experience: Bachelor's degree in research or health related field required. MPA or MPH strongly preferred.

Language Skills: Fluent in English
Reasoning Ability: High
Certificates, Licenses, Registrations: None