

Program Manager

1. Willingness to step in as needed to perform front-line services to program participants such as advocacy, case management, and enrollment in a variety of government programs. (4)

2. Ensures that general outreach and marketing materials are clear, grammatically correct, and concise. In coordination with the FRC Program Director, maintains and edits social media presence. (4)

3. Provides information to individuals and families about the Medi-Cal program and refers to Medi-Cal eligibility sites. (4)

4. Coordinates Medi-Cal covered health services for a client. (6)

5. Assists individuals and families with aspects of the Medi-Cal application process. (8)

6. Arranges transportation if client has a physical or mental limitation to Medi-Cal covered health services to meet their identified needs. (6)

7. Communicates with FRC Program Director about any significant shifts and makes recommendations for future planning as appropriate. (15, 17)

8. In coordination with the FRC Program Director, participates in collaborative planning across the FRC Collective. (15, 17)

9. Actively engages in community planning and county initiatives ensuring agency presence. (15, 17)

10. Develop strategic plans, sets objectives based on goals, mission and values, gathers input and knowledge of others, adjusts and monitors plans in coordination with FRC Program Director to ensure responsive programming to the changing community needs. (15, 17)

11. Works with the FRC Program Director and Fund Development Department to organize fundraising events, as well as assists with development and implementation of new projects and/or events, as needed. (15, 17)

12. Prepares proposals for expansion and enhancement of health and Medi-Cal services to clients and families based on intra and interagency coordination and collaboration. (15, 17)

13. Assists to administer MAA claiming, including development of claim plans, overseeing time survey and invoice process. (19)

14. Complete daily Medi-Cal Administrative Activities (MAA) time survey. (19)

15. Attends training related to the performance of MAA. (19)

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Employee Signature (please sign in blue ink)                                      Date

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Employee Name (Printed)