Healthcare Investigator
Medicaid Fraud Division
New Jersey Office of the State Comptroller

Unclassified Medical Review Analyst
Salary Range: P26 - $83,582.01-$122,831.91
Eligible for remote work up to 2 days per week
Opening Date: September 24, 2026 | Closing Date October 30, 2026
Posting # 40-26

About the Office:

The Office of the State Comptroller (OSC) is an independent state agency created to bring greater efficiency and transparency to all levels of New Jersey government. Our mission is to make the government in New Jersey more efficient, transparent, and accountable. Our office audits and investigates municipalities, school districts, and counties; state colleges and universities; independent state authorities; and state agencies. We also oversee government expenditures, review public contracts, evaluate local and state programs, and oversee the integrity of New Jersey's Medicaid program. We detect and uncover fraud, waste, and abuse and share our findings through public reports.

About the Division:

The Medicaid Fraud Division (MFD) oversees New Jersey's Medicaid program. The Division works to improve the efficiency and integrity of Medicaid in New Jersey and returns millions of dollars to taxpayers each month. MFD audits and investigates healthcare providers, recipients, and managed care organizations (MCOs) that coordinate the provision of an individual's health care needs. We evaluate the care provided to Medicaid recipients and work to prevent and detect fraud, waste, and abuse in the program. In addition, we pursue civil and administrative enforcement actions and disqualify providers from participating in the Medicaid program when necessary.

About the Role:

We are seeking a motivated and committed professional for the role of Medical Review Analyst. This position will be responsible for performing analysis of Medicaid claims, reviewing medical records, interviewing providers, and conducting field investigations.

Responsibilities:

- Conduct thorough investigations by gathering and analyzing relevant information through methods such as on-site visits, issuing subpoenas and analyzing records, and interviewing providers, recipients, and other involved parties. Analyze Medicaid claims, documentation in support of claims, Medicaid payments, business records relating to ownership of Medicaid providers, and other relevant information.
- Apply appropriate laws, regulations, guidelines, contractual requirements, and policies to evidence

obtained to determine whether providers billed and were paid appropriately for Medicaid goods/services.

- Prepare technically sound, accurate, and informative investigative, financial, statistical, and other reports that properly memorialize investigative findings, conclusions, and recommendations.
- Engage in efforts to recover overpayments in accordance with applicable laws, regulations, and policies.
- Assist in preparing, reviewing, and evaluating information in contested cases.
- Testify in Office of Administrative Law or Superior Court hearings/trials regarding investigative findings.

Requirements:

- Applicants must meet one of the following or a combination of both experience and education:
  - Seven (7) years of professional comprehensive experience in work involving the review, analysis, investigation, and/or authorization of medical care services in a large agency or organization responsible for the provision and/or payment of health services.
    OR
  - Possession of a bachelor's degree from an accredited college or university; and
  - Three (3) years of the above-mentioned professional experience.
    OR
  - Possession of master's degree in Health Administration, Hospital Administration, Public Administration or Business Administration; and
  - Two (2) years of the above-mentioned professional experience.

The ideal candidate will have the following skills and experience:

- Attention to detail.
- Proficient in analyzing data.
- Excellent verbal and written communication skills.
- Proficient with Microsoft Office (Word, Excel, Outlook).
- Working knowledge of the Medicaid program.
- Strong research skills.
- Experience with healthcare insurance, nursing, pharmacy, medical coding, and civil or criminal investigations work.
- Ability to work both independently and as a member of a team.
- Certified Fraud Examiner (CFE), Certified Professional Coder (CPC), or Certified Professional Medical Auditor (CPMA) credential, preferred.

Interested candidates should submit a cover letter, resume, and three references to:

Office of the State Comptroller
P.O. Box 024
Trenton, NJ 08625
Email: careers@osc.nj.gov

NOTE: In accordance with N.J.S.A. 52:15C-5, OSC employees and personnel shall be deemed confidential employees and shall serve in the unclassified service of the Civil Service.

Residency Requirements - Pursuant to N.J.S.A. 52:14-7 (L. 2011, Chapter 70), also known as the "New Jersey First Act," all new public employees are required to obtain principal residence in the State of New Jersey within one (1) year of employment.

The Office of the State Comptroller is proud to be an equal opportunity employer. We are committed to providing a work environment that supports, inspires, and respects all individuals and in which personnel processes are based on merit, performance, and business needs. We do not discriminate on the basis of race, religion, color, national or ethnic origin, gender, sexual orientation, gender identity, gender expression, familial status, citizenship, age, or status as an individual with a disability. We believe that diversity and inclusion among our

staff is critical to our success. We seek to recruit, develop and retain the most talented people from a diverse candidate pool and encourage applicants from all backgrounds and experiences to apply.

SAME Applicants: If you are applying under the "NJ SAME" program, your supporting documents (Schedule A or B letter), must be submitted along with your resume. For more information on the SAME Program visit their website at https://nj.gov/csc/same/overview/index.shtml , email: SAME@csc.nj.gov, or call CSC at (833) 691-0404.