

Access & Reimbursement Manager (ARM) – Columbus, OH - Remote

Job ID
REQ-10053545
May 29, 2025
USA

Summary

Access and Reimbursement Manager (ARM) is a field-based role that proactively provides in person (or virtual as needed) education to defined accounts within their assigned geographies on a wide range of access and reimbursement topics and needs (see below) in support of aligned product(s) strategy.

ARM will serve as the key contact and lead for access and reimbursement support-related matters and is responsible for being the local market access expert on payer policy coverage, multi-channel acquisition pathways, billing and coding, claims processing, reimbursement, and integration of manufacturer support programs into a range of account workflows. Additionally, the ARM will continually need to demonstrate a keen ability to problem solve, analyze access and reimbursement issues and opportunities, and proactively communicate changes in the healthcare landscape.

ARM will partner closely with other Novartis Pharmaceuticals Corporation (NPC) field associates, including Customer Engagement (Sales) and Market Access, representing NPC with the highest integrity in accordance with NPC Values and Behaviors. ARM will also be required to coordinate and communicate cross-functionally within NPC (e.g., Patient Support Center, Customer Engagement, Marketing, Market Access, Public Affairs, State & Government Affairs, Trade, Special-ty Pharmacy Account Management, and other applicable third-party affiliates).

This is a remote & field-based role that covers the following, but not limited to: Ann Arbor, MI Columbus, OH, Cincinnati, OH, Fort Wayne, IN Associate must reside within territory, or within a reasonable daily commuting distance of 60 miles from territory border.

About the Role

Major accountabilities:

- Interact within assigned accounts to support patient access within their therapeutic area product(s) providing proactive face-to-face education on product-specific programs to providers and staff in order to support integration of those programs into office processes and workflows.
- Work with key members of therapeutic area offices (e.g., providers, administrators, billing and coding staff, claims departments, revenue cycle managers) in order to appropriately support patient access to products.
- Ability to analyze problems and offer solutions. Understand specifics and support questions associated with payer policies (e.g., utilization management, denial, and appeals), drug acquisition and inventory management, and patient / practice reimbursement (e.g., Co-pay, administration, drug claims). Analyze

- account reimbursement issues & opportunities (as needed). Identifies trends at a local, regional and national level and partner with purpose internally and externally to support patient pull-through.
- Supports pull through on local coverage decisions to enable meaningful patient access within the system. Proactively communicate policy changes or issues that could potentially affect other departments.
 - Accountable for standing up NVS-sponsored patient support programs to enable patients starting and staying on therapy (i.e., Co-pay).
 - Maintain expertise in regional and local access landscape, anticipating changes in the healthcare landscape, and act as their aligned therapeutic area product(s) reimbursement expert (as needed).
 - Interface with Patient Support Center (hub) on important matters related to patient case management, including tracking cases, issue resolution, reimbursement support, and appropriate office staff education. Review patient-specific information in cases where the site has specifically requested assistance and patient health information is available in resolving any issues or coverage challenges.
 - Collaborate with aligned cross-functional associates within NPC (see above) to share insights on customer needs and barriers for their aligned therapeutic area product(s) related to access and reimbursement.
 - Maintain a deep understanding of NPC policies and requirements and perform all responsibilities with integrity and in a manner consistent with company guidance and prescribed Values and Behaviors. Handle Patient Identifiable Information (PII) appropriately (understand and ensure compliance with HIPPA and other privacy laws and regulations and internal Company compliance guidelines).
 - Responsible for identifying and reporting adverse events via the established Novartis systems as per applicable processes.
 - **Essential Requirements:**
 - **Education:** Bachelor's Degree required. Advanced degree preferred.
 - Minimum three to five years' experience in public or private third-party Reimbursement arena or pharmaceutical industry in managed care, clinical support, or sales.
 - Experience with specialty pharmacy products acquired through Specialty Pharmacy networks
 - Experience with coding, billing and in office support programs
 - Prior account management experience or prior experience with complex accounts (Payer landscape, high patient volume, large systems)
 - Specialty pharmacy experience required (ability to teach an office the entire process from script to injection)
 - Establishing relationships within a practice by working closely with them to help remove Reimbursement barriers to specialty products for their patients
 - Knowledge of Centers of Medicare & Medicaid Services (CMS) policies and processes with expertise in Medicare Parts B and D (Medical and Pharmacy Benefit design and coverage policy) a plus
 - Knowledge of Managed Care, Government, and Federal payer sectors, as well as Integrated Delivery Network/Integrated Health Systems a plus
 - Ability to operate as a "team player" in collaborating with multiple sales representatives, sales leadership, and internal colleagues to reach common goals
 - Ability to travel and cover large multistate geography territories, at least 50% travel required, based on geography and territory / targeting make up.
 - **Desirable Requirements:**
 - Ability to manage multiple products
 - Excellent presentation skills
 - Advanced knowledge of medical insurance terminology
 - Ability to manage expenses within allocated budgets
 - Understanding of patient privacy laws including HIPAA and similar state laws
 - Strong business acumen

- The pay range for this position at commencement of employment is expected to be between \$138,600 and \$257,400 per year; however, while salary ranges are effective from 1/1/25 through 12/31/25, fluctuations in the job market may necessitate adjustments to pay ranges during this period. Further, final pay determinations will depend on various factors, including, but not limited to geographical location, experience level, knowledge, skills and abilities. The total compensation package for this position may also include other elements, including a sign-on bonus, restricted stock units, and discretionary awards in addition to a full range of medical, financial, and/or other benefits (including 401(k) eligibility and various paid time off benefits, such as vacation, sick time, and parental leave), dependent on the position offered. Details of participation in these benefit plans will be provided if an employee receives an offer of employment. If hired, employee will be in an “at-will position” and the Company reserves the right to modify base salary (as well as any other discretionary payment or compensation program) at any time, including for reasons related to individual performance, Company or individual department/team performance, and market factors. The individual hired for this role will be required to successfully complete certain initial training, including home study, in eight (8) or fewer hours per day and forty (40) or fewer hours per week. Driving is an essential function of this role, meaning it is fundamental to the purpose of this job and cannot be eliminated. Because driving is an essential function of the role, you must have a fully valid and unrestricted driver’s license to be qualified for this role. The company provides reasonable accommodations for otherwise qualified individuals with medical restrictions, if an accommodation can be provided without eliminating the essential function of driving.

Why Novartis: Helping people with disease and their families takes more than innovative science. It takes a community of smart, passionate people like you. Collaborating, supporting and inspiring each other. Combining to achieve breakthroughs that change patients’ lives. Ready to create a brighter future together?
<https://www.novartis.com/about/strategy/people-and-culture>

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<https://talentnetwork.novartis.com/network>

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The Novartis Group of Companies are committed to working with and providing reasonable accommodation to individuals with disabilities. If, because of a medical condition or disability, you need a reasonable accommodation for any part of the application process, or to perform the essential functions of a position, please send an e-mail to us.reasonableaccommodations@novartis.com or call +1(877)395-2339 and let us know the nature of your request and your contact information. Please include the job requisition number in your message.

Division

US

Business Unit

Universal Hierarchy Node

Location

USA

State

Field, US

Site

Field Non-Sales (USA)

Company / Legal Entity

U014 (FCRS = US014) Novartis Pharmaceuticals Corporation

Alternative Location 1

Ann Arbor (Michigan), Michigan, USA

Alternative Location 2

Cincinnati (Ohio), Ohio, USA

Alternative Location 3

Columbus (Ohio), Ohio, USA

Alternative Location 4

Fort Wayne (Indiana), Indiana, USA

Functional Area

Sales

Job Type

Full time

Employment Type

Regular

Shift Work

No

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6. https://novartis.wd3.myworkdayjobs.com/en-US/Novartis_Careers/job/Field-Non-Sales-USA/Access---Reimbursement-Manager--ARM---Columbus--OH---Remote_REQ-10053545