

About Overalls

It happens! Maybe it's a fender bender, or an unplanned visit to the vet. Maybe you're at the doctor for your daughter's soccer injury, or you're stranded at O'Hare. Maybe a freak ice storm burst a pipe. These things happen – all the time. And they aren't just inconveniences. Hassles (big and small) take our time, money, and mental focus, to the tune of 17% of workforce productivity.

Until now. We created Overalls to reclaim the time, joy, and money our people lose to all of life's little (and big) hassles. Overalls combines concierge-like services with vetted financial products in a delightful experience designed to save and protect people's time, money, and the things they love.

Overalls' Company Values

- Diverse perspectives and backgrounds with shared values
- We are all thinkers and doers
- Balance of industry experts and outside perspectives
- Efficient decision-making informed by respectful debate
- Attract and unleash extraordinary talent
- Kindness, collaboration and integrity

About the role:

As a Medical Provider Specialist, you will primarily support requests related to finding and vetting medical providers for our customers. You will guide customers through the process of finding, vetting, and scheduling healthcare providers. Your mission is to ensure each member secures in-network coverage, understands potential out-of-pocket costs, and gains peace of mind when accessing medical care. You'll be the expert who navigates insurance nuances, confirms eligibility, and sets appointments on behalf of our customers.

You Will:

- Act as the customer's advocate for locating and selecting a healthcare provider—physicians, specialists, or clinics—based on quality of care, reviews, and in-network coverage.

- Review customers' insurance cards, verify benefits, and estimate out-of-pocket expenses.
- Coordinate appointment scheduling during core business hours, using Google Calendar or equivalent tools.
- Maintain up-to-date protocols for each provider type (e.g., primary care, specialists, imaging centers) to streamline research and booking.
- Conduct follow-up to confirm appointment details and address any last-minute questions or insurance changes.
- Collaborate with LifeConcierge mentors to expand your knowledge into claim advocacy and insurance marketplace options.
- Consistently respond to customer inquiries with speed and accuracy, driving satisfaction and service excellence.

You Bring:

- Proven experience calling providers and insurance companies to verify coverage and book appointments. Background in medical claims, medical provider office work is a plus.
- Strong attention to detail when reading insurance cards, interpreting benefits, and estimating patient costs.
- Excellent verbal and written communication: confident, empathetic, and able to explain complex insurance details in plain language.
- Comfort navigating multiple online tools (EHR portals, insurer websites, scheduling platforms).
- While this is a flexible role that does not require a strict schedule, candidates must have availability during core business hours (e.g., 8 am–5 pm local time) to align with provider office needs. Individuals without availability within this window will not be a good fit.
- Adaptability and eagerness to learn “Claim Advocacy” and “Insurance Marketplace” processes as upskill tracks.

Things That Would Make This Role a Good Fit for You:

- You genuinely care about reducing customers' stress around healthcare logistics.
- You thrive on making sense of insurance details and translating them into actionable steps.
- You enjoy building out efficient processes (e.g., templated scripts, provider checklists) to streamline medical research.

Your Availability:

This contract role allows you to work flexible hours, with the expectation that you'll maintain core business-hour availability for provider coordination. Compensation is based on hours worked; most specialists perform 10–20 hours per week. Note this is a contract position.