



MAXIMUS Federal Services, Inc. (MAXIMUS) is the national leader in the provision of government agency independent review services. Since 1989, MAXIMUS has conducted more than 7.5 million independent reviews for more than 60 state and federal government agencies, including arbitration reviews for the New Jersey Department of Banking and Insurance, the Florida The Agency For Health Care Administration, the Health and Human Service Office of the Inspector General, and the Centers for Medicare & Medicaid National Correct Coding Initiative Medicare and Medicaid. We work only on behalf of government agencies and maintain no direct relationship with Third Party Administrators, Self-Insured Employers, provider groups or other commercial entities. We have the most complete and robust organizational conflict of interest measures in the industry. This commitment to avoiding conflicts allows us to insulate risk for our government clients and fully protect the integrity of the arbitration review process for all parties. It also enables MAXIMUS to provide the most defensible review determinations that will hold up under public and legal scrutiny and result in increased stakeholder satisfaction in utilizing TX Out-of-Network Claim Dispute Resolution.

Joy Van Riper

Professional Experience

- MAXIMUS Federal Services, 8/15/17 - present
 - **Senior Consultant – Attorney Reviewer. Review decisions in Workers’ Compensation Review Contractor determinations of Medicare Set-Aside Arrangements for compliance with regulations and for legal issues. 2/20/18 to current.**
 - **Senior Consultant – Appeals (Independent Contractor, part-time). Reviewed Medicare as Secondary Payer Appeals for Part A West. Wrote decision letters, reviewed claims in the Medicare Appeals System, and performed legal research as needed. 7/1/16- 4/13/17.**
- Webber Law, 04/17/17 – 6/30/17
 - **Of Counsel. Prepared and reviewed documents related to real estate transactions, met with clients and attended real estate closings. 4/17/17- 6/30/17.**
- MAXIMUS Federal Services, 5/23/11 – 4/14/17
 - **Senior Consultant – Appeals. Reviewed Medicare as Secondary Payer Appeals for Part A East and West. Wrote decision letters, reviewed claims in the Medicare Appeals System, performed legal research as needed. 7/1/16 - 4/14/17.**
 - **Appeal Officer. Performed “triage” of newly opened cases. Reviewed case files and wrote decision letters in Medicare Part D reconsideration cases, including cost-sharing and Part B cases, obtained additional information from Medicare Part D plans, informed enrollees of decision in expedited cases. 5/23/11 – 6/30/16.**
- MAXIMUS Federal Services (contract: Med-Scribe, Inc.), 3/22/10 – 8/12/10
 - **Appeal Specialist. Reviewed case files and wrote decision letters in Medicare Part D reconsideration cases, obtained valid Appointment of Representative documents, obtained additional information from Medicare Part D plans, informed enrollees of decision in expedited cases.**
- Thomas & Solomon, 12/15/09 – 3/15/10
 - **Legal Assistant/Contract Attorney. Interviewed clients, performed legal**



research and citation checking.

Education

- J.D., June 2009, School of Law, SUNY at Buffalo. Health law concentration.
- M.L.S., 1986, School of Information and Library Sciences, SUNY at Buffalo.
- B.A., 1983, Keuka College

Certifications

- Medicare Set-Aside Certified Consultant, March 2018
- New York State Bar, admitted February 24, 2010
- Public Librarian's Professional Certificate, No. 13171, October 1986, Education Department, University of the State of New York

Professional Organizations

- New York State Bar Association