

Director, Risk Adjustment & Encounter Data

Position Title: Director, Risk Adjustment & Encounter Data
Position Type: Full Time
Location: Westminster, CA or Arcadia, CA
Reports To: CFO

About Clever Care Health Plan

Clever Care Health Plan is a newly founded Medicare Advantage health plan, will serve Medicare beneficiaries in Southern California. Our employees are passionate in providing the best services to our members and healthcare providers partners. Two office locations are at Arcadia, Los Angeles county and Westminster, Orange county. To learn more, please visit **CleverCareHealthPlan.com**.

Job Summary

This position, with minimal supervision, is responsible the efficient operation of all processes designed to improve Centers for Medicare and Medicaid Services (CMS) Risk Adjustment Payment System (RAPS), as well as the Encounter Data Processing system (EDPS). This position will manage the technical, business operations of Medicare payment systems with interface with the Finance department. This position is also responsible for maintaining an effective working and oversight relationship with downstream vendor(s) engaged in these processes. This position interfaces closely with the Quality Manager Director, Chief Financial Officer and Vice President, Operations and IT and will be responsible for ensuring that FDRs and other vendors comply with federal statues, state regulations, contractual agreements and Compliance policies and procedures relating to Risk Adjustment and Encounter Data submissions.

Responsibilities:

- Collaboration/coordination with Centauri, vendor for risk adjustment/encounter data submission and Network Management team
- Manages personnel tasked with repair of CMS rejected encounter data
- Coordinates the production and distribution of provider facing reporting related to Risk Adjustment.
- Coordinates the receipt and performs quality control of 837 file submission to Centauri for generation of encounter data MAO-002 files to be submitted to CMS.
- Performs analysis of data to identify opportunities for improvement and facilitates efforts to implement processes and process changes to promote positive advances.
- Creates and maintains tracking and reporting system that documents key performance metrics and provides mechanism for evaluation of activities coordination with Centauri, Episource, OfficeAlly and effectiveness related to risk adjustment activities.
- Leads various campaigns for Annual Wellness Visits (AWVs), Diagnostic Gap Closure via Chart Chase and Chart Review in collaboration with Network Management, MSOs (Management Service Organizations) and IPA partners.

- Validates risk score projections/financial accruals from risk adjustment/encounter data submission vendor by weighting risk scores from both V22 & V24 HCC models run.
- Reviews CMS Quarterly Report Cards, Annual Performance Report and Data Exchange Report to identify rejection error trend and the frequency of Encounter Data submission to ensure compliance with CMS anti-dumping rules.
- Develops interrelationship among partners who have involvement in activities and manages those relationships to assure collaboration of efforts.
- Creates presentations and/or reports for management involving significant analysis of multiple or complex data sources.
- Provides education and support to both internal and external associates as needed to accomplish project goals and objectives.
- Develops and monitors oversight of downstream vendors involved in risk adjustment.
- Creates suspect list by comparing historical diagnosis data against MOR/MODD files to identify diagnosis gaps.
- Oversees and understand vendor contract compliance that includes FDR oversight and offshore coding requirements.

Performs all functions according to established policies, procedures, regulatory and accreditation requirements, as well as applicable professional standards. Provides all customers with an excellent service experience by consistently demonstrating our core behaviors each day.

Qualifications:

- Bachelors of Arts or Bachelors of Science degree required.
- Excellent working knowledge of typical word processing, spreadsheet and database applications is required.
- Strong organizational skills, as well as, good oral and written communication.
- Ability to simultaneously manage several multifaceted projects with diverse timelines.
- Thorough understanding of HEDIS, CAHPS, and HOS, Risk Adjustment, EDS and Star programs as defined by CMS.
- Basic understanding of Medicare Program requirements for Advantage Health Plans

Required Job Skills

- Knowledge of Microsoft Office Products – Word, Access, Excel, PowerPoint
- SAS programming skills
- Competency in Project Management
- Proficient in Excel and fundamental database management
- Good communication skills
- Technical skills
- Required Experience and Professional Competencies
- At least one year experience in project management with demonstrable results.

- At least three years' experience working in either Risk Adjustment/Encounter Data/HealthCare Informatics/HealthCare Economics departments at a Medicare Advantage Health Plan
- Working knowledge of RAPS, EDPS process measures/requirements
- Thorough understanding of the CMS Risk Adjustment Model V22 and V24. Working knowledge with applicable CMS reports (i.e. Monthly Membership Report File (MMR), Model Output Response (MOR) Files, MODD, MAO-002 and MAO-004 files

What's in it for you?

1. A competitive compensation and benefits program.
2. Generous paid-time-off (PTO).
3. Ten paid holidays per year.
4. Excellent 401k saving plan, employer provides up to 4% match and employer contribution match is 100% immediately vested.
5. A work-life balance and much more!

Please email your resume directly to hr@ccmapd.com

Clever Care Health Plan Inc. is an equal opportunity employer and it is our policy to abide by all federal, state, and local laws prohibiting employment discrimination. All qualified applicants will receive consideration for employment.