

Job Title: Director of Risk Adjustment	Department: Administration	Effective Date: January 27, 2022
Reports to: Vice President of Clinical Services	Direct Reports: Yes	FLSA: Exempt
Working Conditions: Normal, no adverse or hazardous conditions.		

Primary Purpose:

Successfully implement HCC initiatives by effectively interfacing with physician groups and senior HMO plans HCC and Encounter departments. Provide HCC and risk adjustment expertise, with an administrative oversight, to ensure successful integration of Physicians DataTrust HCC initiatives.

Principal Duties and Responsibilities (*= essential functions):

1. Manages assigned department staff ensuring timely and accurate completion of tasks.*
2. Correlate HCC activities, HCC Project Plan, & HCC results to evaluate outcomes. *
3. Gains insight to internal physician group HCC activities and incorporate into HCC project plan.*
4. Track all HCC activities for all assigned physician groups and insure that all tasks are completed in a timely manner. *
5. Works jointly with senior Health Plan teams to evaluate training tools and ensure appropriate training of physicians is in place. *
6. Works jointly with Encounter Data Team to ensure accurate encounter data transmission processes exists for all groups and their affiliated capitated hospitals. Provide solutions to any issue identified in the encounter data process in order to minimize or eliminate any negative impact to HCC results. *
7. Review members' medical records in the Physician, Specialist, and Inpatient facility office for additional HCC's not submitted by provider group. *
8. Takes initiative and is creative and innovative in solving or recommending ways to solve problems and issues. *
9. Develops annual programs to engage providers and members
10. Creates annual training materials and trains providers and office staff
11. Proficient in Cozeva to train, report and analyze the program

Job Specifications:

- Certified Coder or coding experience required.
- Understanding of Risk Adjustment model and HCCs.
- Minimum of five (5) years' experience in working with health care data such as claims, encounter data, and/or coding.
- Excellent analytical skills as it relates to health care data
- Must have strong management organization, communication, and decision-making skills
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Position Performance Criteria:

1. Superior organizational and problem solving skills; excellent leadership and management skills.
2. Proficient computer skills, master of excel
3. A self-starter and highly motivated individual who demonstrates the ability to exercise sound judgement and provide recommendations to management.
4. Must remain flexible and organized.

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5. Polished and professional written and verbal communication skills.
6. Demonstrates overall professionalism in attitude, demeanor and personal appearance.
7. Maintains confidentiality in all endeavors.
8. Will assist with other projects and duties as assigned.