



JOB DESCRIPTION

Medical Director, Integrated Health Partners of Southern California

We are the region's leading clinically integrated primary care network. Our core values are Humanity, Leadership, Excellence, Courage and Trust. Integrated Health Partners (IHP) brings together 10 community health center members representing over 632,000 patients, including 470,000 Medi-Cal patients in San Diego and Riverside Counties. Acting as a powerful advocate for primary health care service providers who serve underserved communities, we seek to improve the quality of health care outcomes by better preparing our members to meet the future needs of their patients and evolving demands of the health care industry

CORE VALUES

Humanity | Leadership | Excellence | Courage | Trust

BENEFITS

- Company Paid Dental Coverage
- Company Paid Vision Coverage
- Company Paid Long Term Disability
- Company Paid Life Insurance \$50,000.00
- Health Savings Account (HSA) Contribution of \$1000 per Year
- 403(b) -Company Match
- 13 Paid Holidays (Company Paid Closure from Christmas Eve to New Year's Day)
- Accrue 3 Weeks Paid Time Off - first year of hire
- Medical and Dependent Flexible Spending Account (FSA) options
- 100% remote work schedule
- Alternate Friday Off Schedule
- Aflac Plans
- Pet Insurance
- Volunteer Time Off
- Legal Shield Protection

JOB SUMMARY

Health Center Partners and its family of companies is seeking an experienced Medical Director experienced in working in a leadership role as either a Medical Director or Physician Executive in a health care organization, provider network, managed care plan or community health center setting. Ability to apply knowledge of laws and regulations, government (Medicare, Medi-Cal, Commercial, etc.) and insurance benefits to clinical strategic initiatives, policies, and/or utilization management processes. Highly effective communication skills with clinicians, staff, and leadership essential. Minimum 10 years clinical experience with board certification. Minimum five years managed care,



provider network and/or health system, hospital medical staff, health center setting leadership experience preferred. Physician leadership experience in performance improvement across total cost of care settings preferred. Work with diverse populations with health disparities and/or Federally Qualified Health Center experience preferred.

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Strategic Clinical leadership. Provide medical and population health leadership in the development and implementation of the strategic priorities of IHP, as articulated in the strategic plan. Annually review and provide input into strategic plans and related initiatives, as needed. Meet with Medical Directors and/or CMOs of member community health centers, managed care payers, and MSO to determine specific areas of focus for performance improvement and strategic alignment.

Clinical Leadership for Quality Improvement and Quadruple Aim. Provide clinical leadership for care innovation and quality improvement, including leadership in the design and implementation of programs that improve health outcomes and increase quality, combined with smarter health care spending, for patients and communities served by our members. This position partners with health centers, MSO, payers, and the IHP team to achieve improvements in access and quality outcomes that transform care.

Value-Based Care/Payment Clinical Strategy. Partner with the clinical committee to align strategic clinical direction with value-based contracts, health outcome goals and performance metrics, and annual IHP performance improvement metrics and internal incentive pool distribution methodologies.

Value-Based Care / Payment Contract Performance. Serve as a direct interface with primary care physicians and/or specialists to encourage optimal utilization patterns. Actively review denials and modifications to monitor utilization patterns for appropriateness and conduct peer-to-peer discussions with health center CMOs/Medical Directors/or ordering clinician to provide education on clinical best practices and/or network policies.

Utilization Management Leadership. Partner with the MSO and Health Plan Utilization Management (UM) teams to review UM performance for ambulatory, ancillary, and facility-based activity for risk-based member lives and apply knowledge of laws, regulations, and/or insurance benefits to direct and guide UM decision making and/or process improvement efforts.

Communications. Provide a clinical voice to represent health centers in a variety of settings and with multiple audiences including health plans, hospitals, and other health care partners. Support health



center clinical leadership through ongoing communication and regular meetings with health center Chief Medical Officers/Medical Directors.

Payor/Provider Partnerships and Network Development. Provide strategic physician leadership in the development of payer partnerships as the network progresses to full professional risk or other alternative payment methodologies to ensure quality outcomes and effectively manage the total costs of care under managed care/value-based contracts.

Partnership Payer & Affiliation Support. Provide support to the EVP in discussions with health centers, managed care payers, or health systems in the development of programs that support health equity within communities.

Clinical Informatics and Technology Support. Provide subject matter expertise for the optimization on the Arcadia population health management network tool, review performance dashboards, and partner with the VP for Population Health to guide clinician/health center conversations related to the tool's optimization.

Clinical Support for IHP Staff. Become a clinical resource for the IHP team by providing clinical and population health management guidance for active network performance improvement efforts and departmental operations. Actively work with the Coding & Documentation Integrity, Patient Navigation/Care Management, and Clinical Quality Improvement Departments to provide clinical guidance on performance efforts.

Meeting and Committee Participation. Actively participate in IHP team meetings, committees, and board meetings as identified by the leadership team. Become an active leader and partner on the clinical committee with the direction of the clinical committee chair and vice chair.

Other Duties. Performs other duties as assigned.

EDUCATION/EXPERIENCE

- Possession of a valid license to practice medicine issued by the Medical Board of California or the Osteopathic Medical Board of California (Must be in good standing- Active, unrestricted Medical License)
- Possession of valid Board Certification in the appropriate medical specialty area for the assigned facility or division.
- Minimum 10 years clinical experience with board certification.
- Minimum 5 years managed care, provider network and/or health system, hospital medical staff, health center setting leadership experience preferred.



- Physician leadership experience in performance improvement across total cost of care settings preferred.
- Ability to apply knowledge of laws and regulations, government (Medicare, Medi-Cal, Commercial, etc.) and insurance benefits to clinical strategic initiatives, policies, and/or utilization management processes.
- Experience working in a leadership role as either a Medical Director or physician executive in a health care organization, provider network, managed care plan or community health center setting.
- Highly effective communication skills with clinicians, staff, and leadership essential.
- Work with diverse populations with health disparities and/or Federally Qualified Health Center experience preferred.

HIPAA/COMPLIANCE

- Maintain privacy of all patients, employee and volunteer information and access such information only on as need to know basis for business purposes.
- Comply with all regulations regarding corporate integrity and security obligations. Report Unethical, fraudulent, or unlawful behavior or activity.

PHYSICAL REQUIREMENTS

- Ability to sit or stand for long periods of time
- Ability to reach, bend and stoop
- Physical ability to lift and carry up to 20 lbs.
- Hand and wrist dexterity to utilize a computer
- Voice and hearing required to use a computer and communicate during teleconferences
- Must possess a valid driver's license and certification of current auto insurance coverage