

A Family of Companies



JOB DESCRIPTION

JOB TITLE: Program Manager HEDIS & Quality COMPANY: IHP

Performance Reporting and Analytics

REPORTS TO:

DIRECT NA

REPORTS:

STATUS: Full-time SALARY RANGE:

OUTSIDE 25% SCHEDULE: WORK CONDITIONS: Remote/Home

TRAVEL: 9/80 Office

**The salary range provided is the annual base salary for California residents: \$-\$ depending on experience*

This job description is intended to be a general statement about this job and is not to be considered a detailed assignment. It may be modified at any time, with or without advance notice, to meet the needs of the organization.

JOB SUMMARY

The Program Manager, HEDIS & Quality Improvement Analytics, will manage all levels of Healthcare Effectiveness Data and Information Set (HEDIS) data management functions including data collection and submission, quality assurance, governance, reporting and analysis in support of health plan quality performance programs. This position serves as the network quality measurement subject matter expert and will prepare supplemental data from network data systems in partnership with health centers and payers to ensure integrity of the required data, train stakeholders on data standards and measurement specifications, and lead primary source verification efforts across the network.

ESSENTIAL JOB FUNCTIONS

- Manages the HEDIS data submission process coordinating efforts with multiple network stakeholders and data sources including IHP's population health analytics platform.
- Participate in primary source verification audits from health plans.
- Responsible for educating providers and their staff on quality measure specifications to ensure accurate documentation protocols to close care gaps.
- Trains staff to optimize the utility of network technology platforms to improve quality measure rates, e.g., EHRs, population health data aggregation platforms, etc.
- Identify and recommend clinical documentation improvement opportunities in health center electronic health record systems to increase the integrity of data connectors impacting clinical measure performance and improve gap closure opportunities.

- Train providers and staff on health plan P4P incentive programs, track progress and make recommendations for success.
- Collects medical records and reports from health centers based on open member care gaps.
- Works directly with health center quality teams as well as health plan staff to monitor gap closures and improvement activities.
- Coordinate quality initiative projects for various stakeholders and perform follow up and outcome determination.
- Submit actionable work plans to health plans and track progress.
- Additional data management tasks as directed.

QUALIFICATIONS

Skills

- Effective verbal and written communication skills
- Excellent interpersonal skills
- Ability to multitask in a busy department
- Innovative critical thinker
- Ability to work independently and productively in remote setting
- Able to manipulate and analyze large files and data sets.
- Excellent project management and organizational skills
- Intermediate to advanced skills with Microsoft Office Products (particularly with Word and Excel)
- Experience with population health data aggregation platforms is a plus

Education/Experience

- Bachelor's degree in health science, quantitative social science, public health, health services research or business preferred or combination of equivalent experience.
- At least 3 years of health plan quality program performance analysis at a health plan or health center
- Experience with various EHR platforms and clinical data documentation workflows
- Working knowledge of HEDIS and STARs technical specifications
- Current CA driver's license
- Willing to travel to provider offices throughout San Diego and the Inland Empire

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.

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.
- Upon hire and annually attend HCP's HIPAA training and sign HCP's Confidentiality & Non-Disclosure Agreement and HIPAA Privacy Acknowledgment

- Upon hire and annually read and acknowledge understanding of HCP's HIPAA Security Policies and Procedures
- Adhere to HCP's HIPAA Security Policies and Procedures and report all security incidents to HCP's Privacy & Security Officer

I acknowledge that I have read and understand this job description. My signature below certifies
that I am able to perform the essential duties and responsibilities of this position. I have also
discussed any accommodations that I feel I might need to allow me to perform these essential
functions. Additionally, I agree to abide by the policies and procedures established by Health Center
Partners of Southern California.

Date

Employee Name (please print)

Signature