



Job Code: 7802

Grade: 24

HCWR: N

Job Title

Director of Program Management & Performance Excellence, Health Plan Services

Department

Managed Care

This position is exempt from Career Service under the CCH Personnel Rules.

Job Summary

The Director of Program Management & Performance Excellence, Health Plan Services (Director) is an essential position for system transformation and performance excellence. The Director, under the supervision of the Chief Operating Officer, Health Plan Services (COO), will be responsible for leading all aspects of accreditation and Medicare Star Ratings program. The Director ensures timely and effective communications across multiple departments and functions. The Director is also responsible for managing, developing and coaching other program and accreditation managers.

General Administrative Responsibilities

Collective Bargaining

- Review applicable Collective Bargaining Agreements and consult with Labor Relations to generate management proposals
- Participate in collective bargaining negotiations, caucus discussions and working meetings

Discipline

- Document, recommend and effectuate discipline at all levels
- Work closely with labor relations and/or labor counsel to effectuate and enforce applicable Collective Bargaining Agreements
- Initiate, authorize and complete disciplinary action pursuant to CCH system rules, policies, procedures and provision of applicable collective bargaining agreements

Supervision

- Direct and effectuate CCH management policies and practices
- Access and proficiently navigate CCH records system to obtain and review information necessary to execute provisions of applicable collective bargaining agreements



General Administrative Responsibilities

Management

- Contribute to the management of CCH staff and CCH' systemic development and success
- Discuss and develop CCH system policies and procedures
- Consistently use independent judgment to identify operational staffing issues and needs and perform the following functions as necessary; hire, transfer, suspend, layoff, recall, promote, discharge, assign, direct or discipline employees pursuant to applicable Collective Bargaining Agreements
- Work with Labor Relations to discern past practice when necessary

Typical Duties

- Collaborates with the COO to develop a strong operational structure for executing on accreditation and Medicare Star Rating programs
- Directs and provides enhancements to business processes, policies and infrastructure to improve performance
- Identifies opportunities for performance improvement and establishes best practices and action plans to drive results and excellence
- Conducts gap analysis, identifies risks and opportunities, and presents findings to senior leadership
- Leads cross functional teams to assist business units in integrating quality and process improvement into strategic and operational plans
- Leads processes to determine the appropriate application, resources and methodologies.
- Works collaboratively with the COO and Senior Leadership to develop the health plan's strategy related to accreditation and Medicare Stars program goals to include, functional planning, operations management, project oversight, progress monitoring, risk management, and issue remediation activities
- Supports quality initiatives that drive outcomes and support the Managed Care operations and CCH strategy
- Understands all business functions such as Clinical Services, IT, Finance, Network Management, Call Center, Enrollment, Claims, etc.
- Assists on executing key performance indicators (KPI) measuring the effectiveness of service operations management, including the third party administrator (TPA), PBM, other strategic partners, and outputs that align with state and Centers for Medicare and Medicaid Services (CMS) regulatory metrics.
- Ensures compliance with policies and procedures, state and federal laws, regulations and contracting standards.
- Participates in the interviewing, hiring, training, and development of staff.
- Functions as a liaison between the TPA, business partners, vendors and the health plan.
- Performs other duties as assigned.

Minimum Qualifications

- Bachelors' degree in health services, business administration, public health or related discipline from an accredited college or university



Minimum Qualifications

- Six (6) years of experience in Medicaid managed care and other government programs lines of business (i.e., Medicare)
- Three (3) years of management experience supporting managed care operations and project delivery Experience launching Medicaid and Medicare products
- Intermediate proficiency with Microsoft Office products (Word, Excel, Access, PowerPoint, and Visio, etc.) and other project tracking software tools
- Experience leading teams and/or organizations through significant process design and improvement
- Proven track record to improve operational efficiency, service delivery, and information management across

Preferred Qualifications

- Masters' Degree from an accredited college or university in health services, business administration, public health or related discipline

Knowledge, Skills, Abilities and Other Characteristics

- Strong knowledge of regulatory requirements concerning government products (i.e. Medicaid and Medicare)
- Excellent verbal and written communication skills necessary to communicate with all levels of staff and a patient population composed of diverse cultures and age groups.
- Strong demonstrated leadership skills to implement change and drive business results.
- Strong people management skills and facilitative skills.
- Strong problem-solving skills used to anticipate and identify issues and to develop and implement appropriate solutions related to complex administrative processes.
- Strong interpersonal skills are critical as this position works closely with the TPA, other external partners, and internal members of the Managed Care leadership team, and other members of CCH leadership.
- Ability to improve operational efficiency, service delivery, and information management across
- Ability to influence others in a desired direction towards the achievement of profitable and rewarding objectives
- Ability to maintain a professional demeanor and composure when challenged.
- Ability to prioritize, plan and organize projects and tasks.

Physical and Environmental Demands

This position is functioning within a healthcare environment. The incumbent is responsible for adherence to all hospital and department specific safety requirements. This includes but is not limited to the following policies and procedures: complying with Personal Protective Equipment requirements, hand washing and sanitizing practices, complying with department specific engineering and work practice controls and any other work area safety precautions as specified by hospital wide policy and departmental procedures.



The above statements are intended to describe the general nature and level of work being performed by people assigned to this classification. They are not intended to be construed as an exhaustive list of all responsibilities, duties and skills required of the personnel so classified.

For purposes of the American with Disabilities Act, “Typical Duties” are essential job functions.