

Human Resources  
750 S. Wolcott  
Room: G-50  
Chicago, IL 60612



Job Code: 8109  
Grade: 24

### Standard Job Description

**Job Title**

Director of Provider Network Management

**Department**

Administration

**Job Summary**

The Director of Provider Network Management will be responsible leading the development of a comprehensive provider network supporting the growth of Cook County Health & Hospitals System (CCHHS). Works with medical management and finance departments in developing actions plans to meet market growth and medical cost targets. Evaluates performance standards and selects the best course of action to address organization demands.

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

**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 CCHHS system rules, policies, procedures and provision of applicable collective bargaining agreements

*Supervision*

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

*Management*

- Contribute to the management of CCHHS staff and CCHHS' systemic development and success
- Discuss and develop CCHHS system policy and procedure

## **General Administrative Responsibilities continued**

- 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**

- Leads the development of a comprehensive provider network to support plan growth and medical cost targets.
- Provides oversight of physician and hospital, network development and provider relations functions for CCHHS.
- Works with multiple departments in developing action plans to meet market growth and medical cost objectives.
- Manages provider contracts and partners with physicians, hospitals and ancillary services to achieve quality and cost management objectives; evaluates provider performance standards and financial performance of contracts.
- Responsible for relationship management with providers to maximize their ability to effectively manage the cost of medical delivery.
- Ensures contractual compliance with government regulations and provides policy administration for providers.
- Ensures compliance with policies and procedures, state and federal laws, regulations and contracting standards.
- Participates in the interviewing, hiring, training, and development of staff.
- Analyzes cost and utilization data to develop specific actions to manage medical cost trends.
- Remains current on emerging trends and strategies impacting network participation including changes in reimbursement based on treatment protocol.
- Functions as a liaison between the network and health plan. Provides problem analysis and problem resolution at both a strategic and functional level
- Attends committee meetings to provide updates on corporate concerns at the system level
- Performs other duties as necessary

## **Reporting Relationships**

Reports to the Chief Executive Officer, Managed Care

## **Minimum Qualifications**

- Bachelor's degree from an accredited college or university
- Six (6) years of experience in Medicaid managed care/hospital/ancillary and network development in a healthcare environment
- Three (3) years of management experience supporting network development
- Intermediate proficiency using Microsoft Office

## **Preferred Qualifications**

- Masters' degree from an accredited college or university
- Six (6) years of work experience in healthcare sector at managed care or Preferred Provider Organization (PPO)

**Knowledge, Skills, Abilities and Other Characteristics**

- Strong knowledge of regulatory requirements concerning Medicare, Medicaid and commercial health insurance.
- 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 negotiation and customer service skills.
- Excellent analytical skills including ability to identify unusual variation in medical costs and to access impact of change.
- Strong demonstrated leadership skills to implement change and drive business results.
- Strong people management skills and facilitative skills.
- 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.**

Approval:

\_\_\_\_\_ Date  
James Kiamos  
Executive Director of Managed Care

Approval:

\_\_\_\_\_ Date  
Barbara Pryor  
Deputy Chief of Human Resources