



**Job Code:** 9783

**Grade:** 23

**HCWR:** N

**Job Title**

Senior Manager, Physician Revenue Cycle

**Department**

Finance, Revenue Cycle

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

**Job Summary**

The Senior Manager of Physician Revenue Cycle is responsible for ensuring the day-to-day assessment, which contributes to the accurate and efficient charge capture management and ensures of proper physician documentation of professional patient service revenue for Cook County Health (CCH). Works closely and collaboratively with the Revenue Cycle leadership to maintain effective and efficient workflows, while ensuring best practices in the improvement of the patient experience.

**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**

- Manages the day-to-day activities of the revenue cycle staff across the Ambulatory & Community Health Network (ACHN)
- Provides periodic reports to senior leadership on selected aspects of the revenue cycle, to drive process changes and opportunities to reduce cost or denial to increase revenue
- Monitors and oversees front-end improvements across ACHN clinics to achieve performance goals
- Partners with CCH operations management teams to conduct detailed reviews of facility-wide financial and operational metric performance
- Collaborates and communicates with other CCH departments on related projects and inter-departmental operations
- Leverages CCH technology to best serve ACHN clinics, i.e., data hub platform, EHR reporting, etc. · Mitigates end-to-end revenue leakage through change management, lean process improvement, making recommendations for innovative software development, and advanced qualitative analysis of core financial metrics
- Gain buy-in from diverse groups of stakeholders through techniques of influencing both with and without authority
- Performs other duties as assigned

### **Minimum Qualifications**

- Bachelor's degree or higher in business administration, health administration, or finance from an accredited college or university with Five (5) years of Revenue Cycle experience in financial management for an integrated health system
- Two (2) years of work experience in analyzing revenue cycle data
- Two (2) years of a supervisory and/or managerial experience
- Proficient in Microsoft Office (Word, Excel, PowerPoint, Outlook)
- Must be able to travel to Ambulatory and Community Health Network and Cook County Health work sites

### **Preferred Qualifications**

- Bachelor's degree in business administration, health administration, or finance from an accredited college or university



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

- Knowledge of areas within Revenue Cycle including patient registration, billing, accounts receivable, managed care billing practices, health insurance practices, business office operations, revenue cycle technology
- Knowledge and proficiency using Microsoft Office software (Excel, PowerPoint, and Word)
- Analytical skills, problem solving skills used to conduct financial analysis throughout the organization and to resolve problems that affect any area of revenue
- Strong interpersonal skills and team skills, strong leadership skills to lead and direct the entire Revenue Cycle team. Understanding of federal, state, local, and agency healthcare laws, standard, and financial regulations
- Financial management skills including ability to analyze data for operations, budgeting, auditing, forecasting, understanding market analysis, operational staffing, and general financial reporting. Strong organizational skills, with the ability to organize and maintain record keeping
- Strong interpersonal skills.
- Strong project management skills
- Ability to communicate well and build positive working relationships with employees at all levels of the organization Ability to demonstrate respect and sensitivity for cultural diversity, gender differences, and sexual orientation of patients and coworkers
- Ability to define process problems and recommend alternatives
- Attention to detail
- Ability to meet work deadlines
- Ability to handle confidential information
- Flexibility and adaptability in performing work duties

**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.**