

Job Description

Title **Director, Risk Adjustment**

Department(s) **Consulting Services**

Reports to **Senior Vice President, Risk Adjustment**

Job Summary

This management position is responsible for the execution and oversight of risk adjustment projects, enhancing client communications through webinars and other tools, and providing ideas to better service and grow our client base. Director is expected to keep abreast of industry developments by reviewing Health Plan management System (HPMS) memos, Centers for Medicare & Medicaid Services (CMS) guidance, and industry updates to maintain his/her risk adjustment industry knowledge. Business focus is currently on Medicare risk adjustment with plans to expand to Commercial and Medicaid risk adjustment over time.

Summary of Essential Duties and Responsibilities

- Responsible for project planning and execution of client projects, including projects not directly managed
- Responsible for the development of new scopes of work and refinement of existing scopes of work to ensure they meet the industry's current needs
- Provide day-to-day oversight of assigned project managers and consultants
- Assist in the development of consultant training programs
- Provide guidance and information, when requested, as an internal resource
- Identify and assist, as needed, in the development of tools, including policies and procedures (P&Ps) and webinars for clients
- Provide industry guidance to staff within the Risk Adjustment consulting practice area and to other project-related GHG staff, as needed
- Ensure skill sets of assigned staff match with client needs and are up-to-date and at the highest level of industry standards

Minimum Requirements and Abilities

- BS degree in Business, Healthcare, or Information Systems
- Combined 4-7+ years of experience in the Medicare Managed Care environment and risk adjustment
- Strong knowledge of Medicare risk adjustment, including technical requirements as well as challenges health plan and provider clients may have in meeting reporting requirements
- Understanding of applicable CMS Medicare Part C & D reporting requirements, including manuals, review guides, and Code of Federal Regulations
- Ability to interact with internal and external customers at all management levels

- Project management and/or consulting experience a plus
- Strong problem-solving ability and a customer-centric focus
- Be team focused with an attitude of group achievement as the primary goal
- Highly organized with strong attention to detail
- Demonstrated leadership and management skills
- Ability to travel 50% of the time
- Ability to work in a virtual office and virtual teaming experience
- Effective collaboration skills and experience
- Adept in working across a heavily matrixed organization
- MS Office proficiency
- Strong oral and written communication skills, including presentation skills

Disclaimer

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 to be construed as an exhaustive list of all responsibilities, duties, and skills required of personnel so classified. All personnel may be required to perform duties outside of their normal responsibilities from time to time as needed.