

Senior Consultant - Quality, Clinical and STARS Solutions (1099/Independent Contractor)

Job Description

The Senior Consultant participates in various consulting engagements and other projects by utilizing and applying their subject matter expertise with respect to Medicare, Medicaid, and other health care related programs for research, data analysis, report development, audits and presentations while maintaining the GHG standards for optimum accuracy and efficiency in alliance with GHG strategic goals.

This position is responsible for the participation in and coordination of client clinical projects, meeting outlined initiatives, and strategies aimed at measuring, analyzing and improving the MAPD Star Rating measures, HEDIS measures and other metrics as agreed upon with the client.

Duties and Responsibilities

- Leading GHG clients' departments / staff and operational areas in the CMS Star Ratings mandate under the direction of the GHG SVP of Clinical Services.
- Serve as a resource for team members and clients on various projects involving topics such as, but not limited to, compliance, operational processes and management analysis.
- Identify and define problems, collect relevant data, establish facts, and draw valid and innovative conclusions.
- Interact with the client's decision-makers, working cooperatively to achieve the project goals.
- Promoting and supporting correct documentation in compliance with CMS Star Rating measure source guidelines, and current federal, state, and plan guidelines and regulations. The consultant will also ensure the accuracy and completeness of information used for measuring and reporting performance outcomes.
- Managing and monitoring outreach and intervention activities related to GHG project strategies surrounding the Star Ratings Improvement and other projects as assigned. This may include intervention / outreach development, outcomes analysis, data trending, and program planning.

Abilities

In this role, the Senior Consultant will be expected to be able to:

- Perform complex conceptual analyses.
- Utilize effective efficient analytic techniques to analyze data.
- Contribute / participate on identified projects with project leads and other team members.
- Present analytic summaries to leadership on complex results.
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- Document engagement activities and conclusions
- Prepare and present as requested to client leadership team
- Develop innovative approaches / solutions to analytics.
- Be a resource for analytic tools.
- Develop and drive affordability opportunities.
- Perform cost benefit analysis.
- Communicate clearly with internal partners and external regulatory agencies and effectively represent the client's and GHG's interests.
- Establish positive partnerships across business groups both inside and outside of the organization.

- Work across all levels of management, be team focused and at ease working in a large organization with an attitude of group achievement as the primary goal.
- Work well in a matrix environment.
- Work independently with minimal supervision.

In this role, the Senior Consultant will also be expected to have knowledge of:

- Medicare Stars Program- Develop, manage and coordinate clinical and non-clinical HEDIS and Stars-related activities.
- HEDIS-Data collection and auditing processes and technical specifications.
- HCC Risk Adjustment.
- Special Needs Plan Requirements including Model of Care Development, leading mock audits and CMS audit preparation.
- Health Plan Quality Improvement.
- NCQA Accreditation Requirements.
- Medicare Health Plan Operations Knowledge/Experience.
- CMS Regulatory Compliance Requirements for Medicare/Medicare Advantage.

Minimum Requirements

The ideal candidate possess an active RN License, BSN or related degree, Graduate degree preferred or equivalent experience. At least 10 years prior clinical or Medicare plan experience; at least 5 years quality improvement experience and 3 years management experience with NCQA/URAC and health plan operations. At least 2 years supervisory or management experience. Experience in leading diverse teams. Proficiency in Microsoft office, Outlook, Word, Access, Visio and Project Management. This position requires excellent organizational and managerial skills; excellent communication (written and oral) and analytical skills; the ability to work in a fast paced environment; and ability to work in a virtual office and virtual teaming experience. This position requires significant travel and telecommuting.

Company Description

Gorman Health Group, LLC (GHG) is a national health care and federal programs consultancy staffed by subject matter experts, former health plan executives, and seasoned regulators. We serve over 50 clients each year in the Medicare managed care space alone. Our mission is to improve the quality of healthcare offered to the nation's consumers. For over 20 years, hundreds of clients serving millions of healthcare consumers have leveraged GHG's strategic counsel and technology solutions to achieve growth objectives, maintain compliant operations, improve market position, advance profitability, and serve beneficiaries.

Learn more at www.gormanhealthgroup.com. Apply today at jobs@gormanhealthgroup.com.