



## **Director, Operations Health Data Vision, Inc.**

### **About HDVI**

Health Data Vision, Inc., is a fast growing tech company that provides a SaaS-based healthcare analytics platform for medical records analysis and targeted solutions for HEDIS® Hybrid, Medicare and Exchange Risk Adjustment and comprehensive, year-round clinical data analysis efforts as well as RADV Audits. The platform provides flexible scalable workflows and automation for medical records-intensive project needs of health plans in the United States.

### **Job Summary:**

The Director of Operations will be located in our corporate headquarters in Burbank, CA and will report the Chief Operation Officer. The Director of Operations will have accountability for the management of all service operations areas including: Provider Services, Medical Record Intake and Medical Record Quality Assurance. Provider Service Leads (PSLs) will report directly to the Director of Operations. The Director of Operations will also play a critical role in providing technical and strategic guidance to the Software Development team concerning the refinement and maintenance of HDVI's industry leading chart retrieval and analysis workflow SaaS platform Risk Adjustment and HEDIS related project work.

The Director of Operations must have an extensive experience in hiring, training and monitoring the productivity of scheduling and chart quality assurance staff. The individual must be flexible, thrive in a fast-paced, entrepreneurial environment, be able to work within an interdepartmental team, be data driven, have a proven track record of implementing process improvement strategies, and have experience developing and overseeing processes that result in high levels of productivity in all teams and functions.

### **Responsibilities Include:**

- Responsible for the day-to-day operations of the Provider Services department.
- Oversee and manage the Provider Services and Medical Record Quality Assurance team to obtain optimal performance while achieving high levels of

- accuracy and completeness. This includes making appropriate changes and additions to meet the expanding needs of the organization while maintaining a positive working environment.
- Ensure operational processes are implemented, maintained and documented for the Provider Services department, including performance and quality standards and measures, and business process improvement strategies to ensure internal key performance metrics are met.
  - Maintain an ongoing internal training program to ensure a high level of productivity and adherence to HIPAA, HITECH and other regulations. This includes an onboarding program for new staff as well as an ongoing process.
  - Maintain project issue logs. Include the communication of issues and the resolutions to HDVI management and clients.
  - Maintain accounting of expenses related to chart retrieval in manner that will promote fast, accurate invoicing of clients for any pass through retrieval expenses.
  - Monitor production KPIs and implement corrective action plans when performance levels fall below acceptable limits.
  - Proactively identify, communicate and participate in applicable organizational initiatives related to business opportunities.
  - Maintains current information and knowledge of all applicable local, state and federal laws, regulations and accreditation standards related to risk adjustment.
  - Accountable for creating a culture of compliance, ethics and integrity.
  - Accountable for consistently demonstrating the knowledge, skills, abilities and behaviors necessary to provide superior and culturally sensitive service to each other and our clients.
  - Provide expert guidance and technical requirement related to scheduling and quality assurance software enhancements and improvements
  - Provide additional reporting detail and analysis as needed on productivity and project barriers.

**Required Skills:**

- Must have experience working with Medical Offices to acquire medical charts
- Must have experience managing a team of telephone outreach staff (call center).
- Prior management experience with Medical Chart Review Vendor organization a plus.
- Prior HEDIS data collection and/or chart collection for Medicare Risk Adjustment activities a plus
- Skill in developing policy and procedure documentation.
- Ability to adapt to constantly changing priorities in managing a wide range of projects.
- Must be able to work independently and in a team environment. Builds strong cross-functional and client relationships.
- Excellent written, communication and presentation skills with the ability to explain and write complex information.
- Strong decision-making skills. Converts strategic direction into specific action plans.

- Proficient/expert in using the following software applications: MS Word, Excel, PowerPoint, web-based/SaaS tools, encoder(s) and MS Outlook (email, calendar, etc.)
- Experience using automated scheduling software a plus.

**Required Experience / Education:**

- At least 2 years' experience in managing a department and demonstrated ability to lead, manage, train and motivate a large and growing operations team.
- Bachelor Degree required.

Interested Candidates should send a resume to: [careers@healthdatavision.com](mailto:careers@healthdatavision.com)