FLSA: Exempt

Manager, Provider Contracting
Job Description

Position Summary:
Under the direction of the VP, Network Management and Reimbursement, the Manager, Provider Contracting is responsible for managing all aspects of the Network Contracting and Reimbursement functions for the Network Management Department. This includes negotiating contracts for the provider network (hospitals, physicians and ancillary groups) yielding a competitive, stable network that produces an affordable and predictable product for customers and business partners. The Manager, Provider Contracting is also tasked with developing and maintaining strong business relationships with Hospitals and Providers and has management oversight of the provider contracting and reimbursement teams.

Specific Duties and Responsibilities:
- Develops and manages provider contracting efforts and partnerships to achieve quality, cost management and strategic business development objectives.
- Responsible for annual review process that ultimately determines network contracting strategy each year, which includes establishing a detailed plan for each major contracting strategy and entity.
- Leads negotiations for key contracts and assures all contracting strategies are being executed timely and appropriately.
- Monitor local market trends relative to provider contracting and reimbursement, make recommendations to modify current processes and lead or assist with implementing changes as necessary.
- Maintains a pulse on industry trends, including research, review and consideration of innovative reimbursement models to extend cost containment for Clients.
- Responsible for system maintenance and reimbursement properly maintained and managed; oversight to ensure accurate implementation of complex contracts with hospitals and other key providers.
- Develop and maintain process, systems and explicit measures that ensure timely and accurate execution of contracting objectives.
- Responsible for market intelligence oversight, assuring it is being gathered and reported timely as well as using results to the company’s benefit in contract negotiations.
- Effectively promotes MedCost strengths to the Provider community whenever possible and represents the organization with integrity.
- Utilizes creative and innovative approaches in introducing new processes or evaluating existing activities.
- Responsible for ongoing communication to VP, Network Management & Reimbursement about key projects, goals, challenges and barriers to assure timely and effective issues escalation.
- Participate in the annual strategic planning process and develop and meet performance goals relative to the strategic plan.
- Develops and implements reimbursement strategies by utilizing reports, reimbursement summary documents, and industry information to conduct review and analysis of unit price, and coding practices.
- Manage the implementation of new network products or options to include the assessment of action items to facilitate needed changes.
- Assist with marketing and sales efforts to include engagement in assertive “fight the fight” interactions needed to retain or gain business.
• Responsible for proactive collaboration with other internal departments on resolution of escalated or complex issues, complaints, grievances or risk issues.

• Responsible for financial management of Network Contracting department budget and corporate fiscal responsibility.

• Direct the efforts of the Network Contracting Representatives to ensure strategies are being deployed and progress is being realized.

• Direct the efforts of the Network Operations Reimbursement/Analytics Team to ensure reimbursement is properly maintained and managed; oversight to ensure accurate implementation of complex contracts with hospitals and other key providers and/or vendors.

• Responsible for supervision of direct reports to include performance management and evaluations.

• Lead by example encouraging a positive working environment and a “team” attitude.

• Support staff and provide the tools and resources they need to accomplish their goals which includes ensuring staff understand their roles and support staff in addressing issues that arise.

• Responsible for hiring, developing, training, mentoring and retaining high quality, productive employees.

• Develop and maintain relationships with professional organizations such as HFMA, NCHA, SCHA.

Personal Qualities:
• Strong work ethic
• Strong management and leadership skills
• Strong communicator
• Ability to solve problems and drive issues or projects to conclusion
• Ability to function at a tactical level with a “hands on style”
• Highly motivated, self-directed leader
• Ability to work collaboratively across the organization
• Ability to translate policies into daily routine operations
• Integrity
• Ability to effectively delegate

Minimum Job Requirements:
• Bachelor’s Degree in Business, Finance or a related field; or a minimum of 10 years’ provider contracting experience to include hospital contracting
• A minimum of 5 years’ progressive contracting experience utilizing financial models and analysis in negotiating complex hospital contracting methodologies with providers
• Comprehensive knowledge of advanced managed care principles including risk contracting, value-based contracting, and capitation.
• Expert level of knowledge of Medicare reimbursement methodologies such as Resource Based Relative Value System (RBRVS), DRGs, Ambulatory Surgery Center Groupers, etc.
• Solid leadership/management experience including supervisory and teambuilding
• Strong financial acumen with proficiency in analyzing and interpreting financial trends in the provider contracting arena
• Excellent verbal and written communication skills; ability to speak clearly and concisely, conveying complex or technical information in a manner that others can understand, as well as ability to understand and interpret complex information form others
• Value Based contracting experience a plus.
Access to Protected Health Information
This position will require the employee to handle Protected Health Information (PHI) for duties related to provider credentialing, complaints and grievances, customer service inquiries, and claim issues. Access to the PHI contained in the claims, customer service, and provider credentialing systems is necessary for this staff member.

Privacy and Security Responsibilities
Understand HIPAA security policies, procedures, expectations, and professional responsibilities related to area and staff.
Proactively monitor staff compliance and evaluate staff compliance on an individual basis for annual performance reviews.
Take appropriate steps (e.g. training, disciplinary action, reporting incidents, etc.) in response to staff compliance failures or security breaches.
Support staff reporting of suspected and actual security incidents (e.g. protects “whistleblowers”) and refrains from retaliation.

Essential Job Functions

<table>
<thead>
<tr>
<th>Physical Requirements:</th>
<th>Less than 35% of the time</th>
<th>From 35% to 65% of the time</th>
<th>More than 65% of the time</th>
<th>Does Not Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standing</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Walking</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sitting</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Bending</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reaching with Arms</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger and Hand Dexterity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talking</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Seeing</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lifting/Carrying/Pushing and/or Pulling:</th>
<th>Less than 35% of the time</th>
<th>From 35% to 65% of the time</th>
<th>More than 65% of the time</th>
<th>Does Not Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Light Work - Lifting 20 lbs. Maximum</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Medium Work - Lifting 50 lbs. Maximum</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Heavy Work - Lifting 100 lbs. Maximum</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Work Environment: (Check all that apply) (√)

- √ Clean, well-lit environment
- √ Subject to frequent interruptions
- √ Close proximity to office equipment
- √ Office with natural lighting and fluorescent
  Cubical with primarily fluorescent lighting
- √ Phone center environment
- √ Open work area with multiple employees
- √ Quiet environment, easy to concentrate
- Other: