

Job Description

Job title: Practice Transformation Specialist
Reports to: Director, Practice Transformation
Department: Practice Transformation
Hours: Full-time, Exempt
Performance Review Period: Calendar Year
Revision Date: January 20, 2015

Purpose of the Position

Facilitates measurable performance improvement at assigned practices through application of defined optimization processes and by creating intrinsic motivation to continuously improve the value delivered to patients and payers

Responsibilities & Duties

- Identifies most important improvement opportunities at assigned practices
 - Engenders practice accountability for change and improvement
 - Identifies process changes or capability adoption to drive improvement
 - Facilitates process and technology improvement and work flow changes in practices
 - Facilitates small group collaboratives on process and performance improvement
 - Engages medical directors for counseling and corrective action process as required
 - Audits practice attestations on PCMH and PCMH-N capabilities
 - Staff support for regional, specialty steering committee, and office manager meetings
 - Participates in development of best practice documentation, process improvement work flows, and other performance improvement job aids
-

Qualifications

- Fundamentals of lean process improvement (including value stream mapping, cause and effect or 5 why diagrams, A3 presentations, PDCA cycles, 5S process and sources of waste)
- Moderate analytic knowledge (including pivot tables, Pareto analysis, sources of errors in data, risk adjustment, price/volume variance analysis, application of benchmarks, coefficient of variance)
- Understanding of specifications of quality, use and financial metrics used by national agencies and local payers
- PCMH, population health, clinical integration, chronic care model theory and application
- Experience with ambulatory practice management
- Moderate project management skills (including ability to map dependencies, identify critical path)

- Familiarity with use of Wellcentive and most common EMRs in population health management
- Customer service principles (including AIDET)
- Knowledge of CPT, ICD, and HCPCS coding
- Knowledge of DRG, RBRVS, APC reimbursement methodologies, including application of outliers, copays and deductibles, allowed versus paid
- Valid driver's license and reliable transportation
- Bachelors Degree in business, health care administration, nursing, health information technology or related field

Performance Skills

- Balances identified performance challenges with practice priorities and interpersonal relationships to build ever increasing momentum towards transformation
- Listens and seeks to understand and articulate values and interests of all individuals at client practices
- Comfortable independently demonstrating qualifications in group settings
- Ability decompress conflict by acknowledging source of conflict and refocusing on improvement principles and objectives
- Ability to identify priorities and stay on schedule, and help clients do the same
- Demonstrates relentless and unjustified optimism

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 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.