



Compliance Officer/Quality Improvement Manager

Job Summary:

Under general direction, an employee in this role has two primary responsibilities: 1) acting as the agency's health care compliance officer and 2) directly managing and supervising the Quality Improvement Department, including responsibility for the coordination and operations of projects related to service program and infrastructure department accountability, quality improvement, and the maintenance and utilization of clinical health records to ensure the highest quality of clinical health records and to ensure that all documentation and billing is compliant in order to avoid reduction in revenue due to deficiencies in either documentation or other non-compliant practices.

Essential Duties and Responsibilities:

As Compliance Officer:

- Hold primary responsibility for implementing and maintaining an effective healthcare compliance plan, complying with all federal and state regulations.
- Educate the management team and staff about compliance, operational compliance issues, risk issues related to the agency's lines of business and appropriate details of the compliance program.
- Serve as the agency's HIPAA Privacy and Security officer.
- Create and maintain documentation systems and processes as needed to track, trend and manage compliance notifications, issues, corrective action plans, audit results, etc.
- Convene the agency's Critical Incident Review Committee when needed and take primary responsibility for any needed investigation and reporting.
- Ensure corrective actions are adequate and have been implemented for all identified compliance deficiencies.
- Maintain a detailed knowledge of contractual requirements and state and/or county contract requirements.
- Ensure that our billing programs are in compliance with federal and state law and that they are designed to prevent and detect and correct any associated fraud, waste and/or abuse.
- Ensure that all systems are up to date in diagnostic and service code billing practice.
- Handle records compliance: be knowledgeable about state and federal regulations around health and school records.
- Ensure that the Board of Directors, management and employees are in compliance with the rules and regulations of regulatory agencies.
- Promote compliance through effective policies designed to maintain an ethical culture at CHC.
- Coordinate responses to regulatory inquiries.
- Implement and conduct specifically tailored compliance education sessions to address key issues, train new staff and keep senior management and all other relevant employees apprised of changes to the regulatory environment.
- Participate in other project management and compliance activities as assigned to meet agency objectives and requirements.
- Responsible for implementing policies and procedures, developing training programs and auditing/monitoring compliance related matters.
- Promote awareness related to information privacy and security and enforce compliance with applicable state and federal laws.



As Quality Improvement Manager:

- Support quality improvement in analyzing, developing, implementing and coordinating the agency's quality improvement program designed to deliver high quality mental health programs and educational services consistent with the agency's clinical and educational frameworks, established practices and systems, contract requirements and financial goals.
- Support best practice consultation and supervision for direct service staff.
- Provide expertise concerning evidence-based clinical and educational practices and contribute to the continuous development and implementation of improvement activities for clinical and school operations including:
 - Education and training
 - Internal audit/chart review and other internal monitoring processes
 - Measuring client outcomes, satisfaction surveys, program evaluation and other quality indicators
- Manage agency-wide policies and procedures (with the exception of HR policies and procedures).
- Manage agency-wide training and re-training related to the use of EHR.
- Provide expertise concerning the application of EHR-held data to agency business and service practices.
- Perform other related duties as required and assigned.

Accountability:

- Success in this position will be measured by ensuring compliance with Federal, State and County healthcare regulations and that the agency is able to recognize the maximum revenue possible through compliant documentation and billing practices.

Qualifications/Guidelines:

- Minimum of three years of directly relevant experience in health care compliance and/or audit, preferably in CA health care organization.
- Three years of leadership/management experience.
- Two or more years working full time in a mental health setting strongly preferred.

Knowledge/Ability/Skills:

- Psychometric aspects of testing and computer applications used in technical writing, budgeting and data analysis. SPSS or other statistical analysis database experience required.
- Understanding of methods of communication among community-based agencies and private practices on a countywide, regional and state basis.
- Thorough knowledge of healthcare compliance.
- Avatar EHR system knowledge strongly preferred.
- Strong knowledge of EHR systems and ability to become a super-user of CHC's Avatar EHR system.
- Ability to maintain confidential information.
- Excellent customer service skills.
- Demonstrated excellence in written and verbal communication.



Children's Health Council

Education/Training:

- Bachelor's degree required; master's or higher degree in law, business, healthcare preferred.
- HCCA membership
- Active CHC certification

To apply, please email your cover letter and resume/CV to jobs@chconline.org in Microsoft Word or PDF format.