MEDICARE COMPLIANCE MANAGER

The Health Plan of San Mateo (HPSM), a managed care health plan, seeks a full time Medicare Compliance Manager to ensure organizational compliance for HPSM’s programs for members with both Medicare and Medicaid insurance coverage (i.e., dual eligibles). These programs include a Medicare Advantage Special Needs Plan and a Duals Demonstration Medicare-Medicaid Plan (also known as the Medicare Financial Alignment Demonstration and as Cal MediConnect and the Coordinated Care Initiative in California). This position will report to the Compliance Officer/Director of Compliance and Regulatory Affairs.

**Primary duties:**
- Analyze legislative, regulatory, and contractual requirements for organizational impact and implementation; Help develop internal policies as they relate to the external regulatory and contractual environment.
- Help lead implementation of regulations, legislation, and contracts related to compliance with Medicare-Medicaid programs.
- Help prepare and lead HPSM through audits related to the Medicare-Medicaid lines of business; ensure timely and accurate reporting to state and federal agencies for Medicare-Medicaid programs.
- Act as resource to HPSM staff on regulatory and compliance issues; and Maintain positive relationships with regulators.
- Medicaid analyze all documents and communications received from the Centers for Medicare and Medicaid Services (CMS), its designees, or state agencies overseeing Medicare-Medicaid plans, and communicate internally and externally as necessary.
- Prepare organizational responses to meet Medicare-Medicaid regulatory requirements.
- Distribute communications to internal business owners and support and monitor impacted areas to ensure compliance.
- Coordinate organizational response to audits by regulatory agencies responsible for the oversight of HPSM’s Medicare-Medicaid products, including CMS, the State Department of Health Care Services (DHCS), and the State Department of Managed Health Care (DMHC).
- Prepare and/or oversee the preparation of corrective action plans as required and monitor their implementation.
- Submit complete, thorough and timely documents, including reports, filings, and applications to the Compliance Officer for review prior to submitting to regulators.
- Serve as a resource on relevant laws and regulations and stay current with changes that may affect HPSM’s Medicare-Medicaid programs.
- Develop and deliver compliance training program for staff to promote awareness and understanding of Medicare-Medicaid program compliance issues, applicable laws and regulations, reporting requirements, and consequences of noncompliance.
- Monitor Medicare-Medicaid delegated entities and First Tier, Downstream, and Related Entities (FDRs) in collaboration with HPSM Provider Services.
- Assist the Compliance Officer in overseeing an internal audit program to investigate adherence with policies, procedures, and legal/regulatory requirements in order to identify and evaluate exposures and to correct deficiencies.
- On an interim basis, supervise internal audit and reporting staff.

**Requirements:**

**Education and Experience:** Equivalent to a Bachelor’s Degree; advanced degree in public health, policy, or administration preferred. Minimum of five (5) or more years related experience in government programs, particularly Medicare and in managed care environment.

**Knowledge of:** Managed care and strong familiarity with the health care field. General knowledge of regulatory and or compliance processes impacting managed health care. Principles and methods of planning, directing and maintaining compliance with regulatory standards. Personal computers and proficiency in Microsoft Office Suite applications, including Outlook, Word, Excel, and PowerPoint. Managerial/Supervisory principles and practices as well as techniques and methods to organize and manage a department. Principles and practices of managed care health care systems, medical administration and NCQA accreditation standards.

**Ability to:** Display professional communication skills (both written and oral) and possess a high level of attention to detail. Demonstrate superior organization, facilitation, and presentation skills. Build and maintain strong relationships within and outside HPSM. Possess critical thinking, listening, time management, decision making, and problem solving skills; maintain confidentiality. Think and work effectively under pressure and accurately complete tasks within established times; prioritization and meeting critical deadlines. Work independently and within a team environment as well as work collaboratively across functional areas in a matrix structure. Demonstrate effective training and customer service skills in accordance to various audiences and comprehension levels. Possess strong interpersonal skills including coaching staff, and handling conflict resolution.

**Benefits Information:** Excellent benefits package offered including HPSM paid premiums for employee's coverage in the medical HMO plan and majority of PPO medical cost. Employee pays a small portion of the dependent premiums for medical and dental benefits. Additional HPSM benefits include fully paid vision, life, AD&D, STD, and LTD insurance; 457 Plan in lieu of social security (7.5% of salary/HPSM paid); retirement plan (10% of salary for compensation/HPSM paid); holiday and vacation pay; tuition reimbursement plan; and more.

**Application Process:** To apply, submit a resume and cover letter with salary expectations to: Health Plan of San Mateo, Human Resources Department, 701 Gateway Blvd., Suite 400, South San Francisco, CA 94080. or via Email: careers@hpsm.org or via Fax: (650) 616-8039 File by: Continuous until filled. EOE