



Position Title: Director, Managed Care Contracting
Reports To: President, Q Point
Division: Q Point
Department: Administration
Classification: Exempt
Revision Date: March 15, 2019

Position Summary:

Equality Health is an Arizona-based population healthcare company focused on improving care delivery for underserved populations through culturally-sensitive programs that improve access, quality, and patient trust. Our mission is to ensure diverse populations receive quality healthcare that improves and enriches their lives. We have developed our product portfolio around centralized technology, services and network designs intended to organize a better healthcare delivery system for cultures that have struggle with integrating into the tradition one-size-fits-all U.S. healthcare system.

The Director, Managed Care Contracting is primarily responsible for the day-to-day management all of activities related to contracted managed care organizations. This individual serves as the primary point of contact and resource for value-based contracts for Q Point Health, Equality Care Centers and Equality Medical Group. This responsibility includes oversight, direction, development, problem resolution and leadership for network, claims, quality management, and medical management teams. This individual ensures operational and department goals are achieved and strives to improve quality and business processes for assigned areas of responsibility.

Responsibilities:

- Responsible for overseeing contract operations across the organization to ensure Equality Health Network's growth, performance and excellence
- Responsible for implementation of new contracts across the organization, to include development and maintenance of a comprehensive implementation plan
- Develop and review policies and procedures for all aspects of contract operations
- Plan, direct and coordinate administrative activities across departments and within Q Point, external MSO and health plan partners
- Accountable for executing on Q Point's strategic plan and business operations
- Accountable for passing routine and ad hoc auditing from health plans
- Address corrective action plans should they arise
- Organize and prepare joint operations committees with health plan partners
- Develop and maintain effective working relationships across all levels for health plans, Equality Health and strategic business partners
- Lead multi-disciplinary work groups, including peer groups, outside of chain of command to effectively address managed care related issues and opportunities
- Serve as one of the company's managed care experts and provide content, insight, counsel and recommendations on industry and market dynamics
- Provide strategic leadership and direction to each Q Point departments to ensure safe, efficient, ethical and compliant operations



Required Knowledge, Education & Experience:

- Bachelor's degree in Business, Healthcare Administration or a related field of study; or, an equivalent combination of education and/or experience
- Minimum ten (10) years of experience in a directly related position within the healthcare industry
- Minimum five (5) years of leadership or management experience
- Experience leading company-wide initiatives, including the ability to bridge across divisions and between corporate office and remote/field teams
- Deep understanding and working knowledge of managed care industry, market trends, payer customer types, various reimbursement structures and associated dynamics (e.g., capitation, dual risk, shared risk and global risk)
- Proficiency with MS Office applications and web-based technologies

Knowledge/Skills/Abilities:

- Previously established relationships with major managed care organizations
- Able to work across strategic business units and strategic external business partners and vendors
- Strategic, action-oriented leader with strong communication skills
- Able to translate corporate and division level strategies into clear market level action plans with defined goals and objectives for MSO operations
- Experience in building sustainable partnerships between payers and providers