Job Title: Vice President, Coding and Clinical Documentation Improvement

Location: Chicago, Dallas, NY preferred

Job Summary

IKS Health is looking for a leader that will be responsible for advancing our ProFee coding and CDI practice. An ideal candidate is an industry thought leader with demonstrated history of successfully managing coding and CDI engagements in various care settings. This role of Vice President will help deliver high levels of customer satisfaction and further organization's innovation around decreasing clinical burden while focusing on restoring the patient-physician intimacy. In addition, he/she will work with the selling organization and provide solutions support to ensure IKS maximizes revenue with the client. He / She will serve as the "voice of the customer" for IKS Health, and serve as the "voice of IKS" in the client organization.

Domestic and India travel will be involved.

Key Responsibilities

Manage the overall operational deliverables between IKS and the customer to ensure high levels of customer satisfaction and mutual success, by:

- Understanding client issues, concerns, priorities and ensure it is supported and implemented in the operational teams through a collaborative & immersive internal governance process
- Ensuring that operations are aligned to meet customer goals and success
- Working with the customer to resolve issues that are blocking IKS performance as requested by the operational teams
- Working with the delivery teams to resolve operational issues affecting the customer promptly and effectively
- Reporting performance metrics to the customer on a daily/weekly/monthly basis working closely with the IKS offshore delivery team
- Create/Review IKS Operating Documents to ensure that they are fit-for-purpose

Formally facilitate governance of the relationship with the client organizations to:

- Review the status of IKS Service Delivery and ensure it meets/exceeds contractual requirements with the client
- Identify delivery issues or areas of concern for the client; if any; work with the IKS delivery team and the client physicians to resolve concerns
- Recommend cost effective value-adds beyond the Statement of Work that will add value to a client o Proactively reduce escalations if any from the client

Proactively anticipate operational issues early and escalate within IKS before the client is aware to issues can be resolved. Work with the IKS delivery teams to:

- Identify and implement operational improvements (such as workflow changes, technology and automation, metrics and reporting) to ensure a high level of customer satisfaction and customer success.
- Provide the nuances of the client environment and ensure the delivery and measurements of success are representative of the client environment

- Understand and resolve issues with the client that are hindering IKS performance in the account

Key Measurements of Success
- Primary: High Customer Satisfaction & Success
- Primary: Ensure Business Metrics and value proposition is met and shared with the customer
- Secondary: Ensure Operational Metrics with regards to ensuring SLAs are exceeded
- Secondary: Reduce client escalations
- Secondary: Revenue growth for the client

Qualification Technical Skills / Competencies:
- Preferably a Physician/Clinical professional with extensive experience in Profee Medical Coding & Profee Clinical Documentation Improvement
- Must have strong critical thinking, data, financial and analytical skills, as well as an exceptional ability to integrate clinical, coding and reimbursement knowledge
- Must possess a thorough knowledge of ICD-9 / ICD-10 CM coding principles and applications as they relate to Physician Coding
- Knowledge and familiarity with HCC risk-adjustment model, AHRQ Quality Indicators (HACs and PSIs) and Bundled Payment models
- Demonstrated leadership in identifying opportunities for improvement, and partnering with Physicians, HIM leadership, Quality department, Finance management and Care Management coordinators for improved documentation for quality and reimbursement.
- Comfortable speaking to large audience to educate physicians and CDIs, in both remote and onsite settings
- 10-12 years of experience with a large/medium physician group/health system
- Ensure optimal reimbursement of all cases in compliance with CMS policies and procedures and Official Coding Guidelines
- Abide by the Standards of Ethical Coding as set forth by AHIMA and AAPC
- Ability to effectively utilize computerized encoder and/or other reference guides
- Ability to read, decipher and analyze all aspects of medical record documentation for accurate coding
- Knowledge of various clinical information systems, encoders and other technologies to facilitate a successful virtual work environment while maintaining maximum communication and adhering to HIPAA security standards
- Familiar with EHR Systems & Work Flow
- Licensure/Certification: MD, DO, CCDS, RHIA, RHIT, CCS, CPC credentials (AHIMA, AAPC, ACDIS) Participate in orientation training activities and review material provided

IKS Health offers a comprehensive benefits package including medical, dental, vision, life insurance, long term and short-term disability, AD&D, etc. For more information please reach out at ushr@ikshealth.com