Position Title: ACCREDITATION MANAGER
Position Status: Exempt
Reports To: Quality Improvement Director
Effective Date: 02/03/2015
Revised Date:

SUMMARY DESCRIPTION: Under direction, this position:

1) Leads regulatory survey readiness program planning to support the organization’s mission, values, and business objectives;
2) Establishes mechanisms for proactive identification and correction of regulatory issues;
3) Conducts training and coaching to facilitate understanding of accreditation standards and requirements and supervises assigned staff; and
4) Performs other duties as assigned.

DUTIES AND RESPONSIBILITIES:

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<th>% of Time</th>
<th>Essential:</th>
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<td>50%</td>
<td>1) Leads regulatory survey readiness program planning to support the organization’s mission, values, and business objectives with duties including but not limited to:</td>
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<td>• Facilitating survey readiness activities to comply with regulatory and contractual requirements, including the National Committee for Quality Assurance (NCQA) accreditation, State, or Federal audits;</td>
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<td>• Developing work plans, timelines, and gap analysis to assess survey readiness for NCQA accreditation;</td>
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<td>• Interpreting applicable regulatory standards and guides improvement activities for compliance;</td>
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<td>• Collaborating with stakeholders to identify organizational gaps for survey readiness, implementing processes to meet standards, and monitoring progress for completion;</td>
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<td>• Developing an organized system to assess, collect, and document each department’s level of compliance with applicable standards;</td>
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<td>• Participating in program management, analysis, and evaluation of the Healthcare Effectiveness Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey;</td>
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<td>• Actively preparing and participating in on-site surveys, including coordination of agendas, assigning tasks, tracking activities, and communication plans for internal and external stakeholders;</td>
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<td>• Facilitating mock surveys and developing plans for improvement;</td>
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<td>• Participating in the development of corrective action plans, monitoring plan, and closure within defined timeframes; and</td>
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<td>• Participating in departmental and organizational meetings for survey readiness.</td>
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<td>30%</td>
<td>2) Establishes mechanisms for proactive identification and correction of regulatory issues with duties including but not limited to:</td>
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<td>• Collaborating with stakeholders to support a culture of continuous survey readiness;</td>
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• Acting as a resource for all staff in the organization on regulatory, accreditation, and survey readiness;
• Developing and revising policies and procedures to comply with NCQA guidelines and regulatory standards;
• Leading interdisciplinary teams using continuous quality improvement methods to achieve regulatory and accreditation compliance;
• Continually monitoring and tracking opportunities for improvement in an organized, systematic, and on-going basis;
• Reviewing corrective action plans for appropriateness, effectiveness, and completion;
• Interpreting and assisting in planning responses to new, revised, or upcoming regulations or standards;
• Providing feedback to external regulatory bodies to develop standards that promote high quality care, evidence based practices, and alignment with applicable regulations;
• Assisting and preparing departmental reports, studies and audits as needed;
• Ensuring accuracy of data analytics in the department both for internal use and public reporting as applicable;
• Utilizing performance improvement principles to create sustainable operational processes for survey readiness; and
• Remaining current and knowledgeable of all present and future quality mandates from regulatory bodies including NCQA, California Department of Health Care Services (DHCS), Centers for Medicare and Medicaid Services (CMS), the Department of Managed Health Care (DMHC), and other regulatory/accrediting bodies.

15% 3) Conducts training and coaching to facilitate understanding of accreditation standards and requirements and supervises assigned staff with duties including but not limited to:
• Developing presentations and effectively communicating survey readiness information to all levels of the organization;
• Developing internal and external communication related to accreditation and regulation information;
• Providing a learning environment to meet accreditation and regulatory requirements;
• Developing templates, tools, and processes to facilitate an efficient and effective means for regulatory compliance;
• Providing recommendations for training and development opportunities;
• Collaborating with internal and external stakeholders to proactively identify and define areas for improvement for survey readiness activities; and
• Hiring, training, supervising, and evaluating assigned staff.

5% Secondary:
4) Performs other duties as assigned.

EDUCATION AND EXPERIENCE:
• Bachelor’s degree or equivalent experience in nursing, public health, health administration, or health related field required. Master’s degree preferred;
• Minimum of three (3) years of experience with accreditation and regulatory survey process, development, and follow up of corrective action plans and two (2) years of experience in Quality Improvement, managed care, or an equivalent combination of education and experience which would demonstrate the required knowledge, skills and abilities may be qualifying;
• Prior NCQA or Joint Commission project lead highly desirable; and
• Previous supervisory experience preferred.

JOB SPECIFIC KNOWLEDGE, SKILLS AND ABILITIES:
• Knowledge of governmental & other regulatory standards, requirements, & guidelines related to quality improvement, such as NCQA, Medi-Cal regulations and standards and pre-paid health plans, Joint Commission, Knox-Keene Act, Federal HMO Act, and Title 22;
Knowledge of personal computers and software;
Knowledge of computerized drug programs;
Knowledge of principles of statistics, preferred;
Knowledge of drug utilization;
Knowledge of drugs and supplies required in the operation of a pharmacy;
Ability to maintain accurate records.

ALLIANCE STANDARD KNOWLEDGE, SKILLS AND ABILITIES:

- Ability to communicate effectively, both orally and in writing;
- Ability to establish and maintain effective and cooperative working relationships with Alliance staff and others contacted in the course of the work;
- Ability to assume responsibility and exercise good judgment in making decisions within the scope of authority of the position;
- Ability to think and work effectively under pressure and accurately complete tasks within established times;
- Ability to prioritize tasks and meet deadlines;
- Ability to maintain confidentiality; and
- Valid California Driver License, transportation and automobile liability insurance in limits acceptable to the Alliance.

WORK ENVIRONMENT AND PHYSICAL DEMANDS:

- Ability to sit in front of and operate a video display terminal for extended periods of time;
- Ability to travel to Alliance service areas, which includes Santa Cruz, Monterey, and Merced county; and
- Ability to bend, lift and carry objects of varying size weighing up to 10 pounds.

All Alliance employees are expected to:

- Comply with all Alliance safety requirements;
- Adhere to all Alliance policies and procedures.

The job duties, elements, responsibilities, skills, functions, experience, educational factors and the requirements and conditions listed in this job description are representative only and not exhaustive of the tasks that an employee may be required to perform. The Alliance reserves the right to revise this job description at any time.