**Position Title:** Chief Compliance Officer  
**FLSA Status:** Exempt  
**Department:**  
**Salary Grade:**  
**Supervisor’s Title:**  
**Revision Date:**

**Position Summary:**
The Chief Compliance Officer’s primary duty is planning, implementing and monitoring the Compliance Program. The Compliance Program includes activities that involve enterprise risk management, HIPAA Privacy, program integrity and delegation oversight. In addition, the Chief Compliance Officer is the Culture Leader and the Custodian of Records.

**Essential Functions:**

**Compliance Accountabilities:**
- Oversee and monitor the implementation of the Compliance Program.
- Report to the Chief Executive Officer and Board of Directors on a regular basis to review progress on program implementation and assist with establishing improvement plans.
- Periodically revise and update the compliance program.
- Review associate conflict of interest statements and make determinations about the handling of potential or actual conflicts of interest.
- Develop and implement a compliance training program.
- Assist the Finance Department in coordinating internal compliance review and monitoring activities.
- Investigate complaints and coordinate action plans with other departments.
- Develop policies and programs that encourage staff to report suspected fraud or impropriety without fear of retaliation.
- Develop and communicate the objectives of the Compliance Program and report accomplishments ongoing.
- Maintain a log of communications relevant to compliance.
- Compile reports of calls received, investigations conducted, findings and recommendations developed, action plans established, and progress noted.
- Establish and communicate reporting procedures and reporting modules available (e-mail, voice mail, suggestion box, etc.).
- Conduct random audits and internal compliance reviews.
- Analyze compliance related metrics and develop action plans, if necessary.
- Conduct unannounced mock surveys, inspections, audits and investigations periodically to assess staff readiness and to specifically identify where corrective actions are needed.
- Re-evaluate areas of previous deficiency to identify improvements.
- Present written evaluations and reports to the CEO, Board of Directors, Passport and Board Compliance Committees, Board Audit Committee, Board Finance Committee, Board Nominating and Governance Committee Partnership Council at least annually.

**Risk Management Responsibilities:**
- Establishes the Enterprise Risk Management architecture for the company.
- Monitors and analyzes risks within the company’s business units and reports on these risks to the Board and applicable Board committees.
- Oversee the enterprise risk management process and ensure alignment with company mission, vision, values and strategic plan.
- Authority to make decisions or risk management issues that directly impact the strategic direction of the company.
- Sets the strategic risk management vision and is charged with delivering that strategy to the company using leadership skills, network or internal and external alliances and highly developed business skills. Possesses an intimate knowledge of internal business processes and the company’s industry.
- Exhibits business process knowledge, possesses a broad based operations perspective and provides solutions for
non-insurance related business risk issues.

- Coordinates and collaborates with Chief Financial Officer regarding insurance coverage to protect the company and spread risk appropriately.
- Ensures the company's risk management policies and strategies are in compliance with applicable state and federal laws.
- Seeks ways to optimize risks in the company as a competitive business advantage.

Culture Responsibilities:

- Plays a central role in the growth and development of the culture of the company.
- Ensures the culture is envisioned and aligned to the company's mission, vision, values and strategy.
- Ensures enterprise-wide alignment to an overall culture strategy, spreading culture related outcomes throughout the company.
- Develops a roadmap for the culture that includes appropriate milestones, tasks, dependencies, and assumptions that will get the company from the current state to the future state.
- Fosters an innovative, high-performing work environment that supports creativity and learning among associates.
- Helps shape the messaging of the company to build a strong brand.
- Ensures that the culture message and plan is embedded in the company and transmitted to new hires.
- Works collaboratively with the Executive and Senior Management Teams, Human Resources and Mission Integration and other business unit leaders, as necessary, to improve and advance the company's culture.
- Assists with the development, review and implementation of the associate engagement survey so that staff can evaluate the state of the culture, identify culture opportunities and address culture issues.

- Serves as the Winning Ways Executive Sponsor.

Custodian of Records Responsibilities:

- Ensure that all records used by Passport are up-to-date and available for inspection.
- Maintain an accurate and up-to-date filing system so that records can be located quickly.
- Manage and enforce the records retention schedule and deal with archiving, storage and destruction of obsolete records.
- Act as the Passport signatory stating that records in question are accurate and have been filed properly.

Perform other duties and projects as assigned.

Core Competencies:

**Collaboration**

The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

**Customer Service Orientation**

The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

**Mission/Vision/Values (MVV)/Culture**

The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

**Professionalism/Communication**
The manner in which one communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

**Management Capabilities**
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

**Fairness and Consistency**
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

**Leadership**
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

**Job-Based Competencies:**

**Adaptability**
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

**Quality of Work**
Has established a track record of producing work that is highly accurate, demonstrates attention to detail and reflects well on the organization. Is personally committed to high quality work and encourages others to have similar standards.

**Results Orientation**
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

**Technical Skills**
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

**Analytical Thinking**
Breaks down problems and issues into sub-components and then assesses the costs, benefits and risks of various options prior to selecting a particular approach.

**Relationship Building/Networking**
Builds rapport and develops alliances with a broad range of people. Adjusts communication style to meet the needs of individuals at various organizational levels and to meet the needs of clients. Forms alliances by demonstrating concern and respect for others, as well as by highlighting common interests and aspirations. Leaves others feeling that he/she will be a trusted ally and is careful to act in ways that reinforce that trust over time.

**ADA Physical Demands:**
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.
Passport Health Plan

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**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- Bachelor’s degree required
- Minimum of 12 years of relevant work experience in compliance, management of a compliance program, and at least 5 years related to federal or state regulatory/compliance activities required.
- Skills and experience sufficient to identify potential issues within a variety of company department and business units required.
- Experience leading cross functional and matrix teams required.
- Knowledge of health insurance regulatory standards required.
- Experience managing a Compliance Program for a health insurance or healthcare company preferred.
- Strong knowledge of managed care operations preferred.
- Familiarity with federal and state Medicaid and Medicare regulatory environment preferred.
- Professional work experience with or for federal and state agencies preferred.
- Experience conducting complex compliance investigations preferred.

**Licenses, Registrations or Certifications:**
- N/A
**Position Title:** Behavioral Health Director  
**FLSA Status:** Exempt

**Department:**  
**Salary Grade:**

**Supervisor’s Title:**  
**Revision Date:**

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### Position Summary:

This position is responsible for planning, coordination, and managing of overall behavioral health services; including provider identification, provider quality measures and service functions. This position will provide oversight of regulatory compliance with applicable laws, regulations, and policies that govern behavioral health aspects of Medicaid and will act as the behavioral health leadership for the organization, assuring excellent customer service and provider relations.

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### Principal Accountabilities:

Sets strategic and operational goals for Behavioral Health and Foster Care/Guardianship/Adoption benefits in accordance with the organization-wide clinical and business initiatives.

Oversee program operations and the administration of the behavioral health benefits including, but not limited to:

- Clinical programming including medical management;
- Care coordination and case management including integrated rounds;
- Member communication including DMS approval process;
- Conduct provider training and ensure timely and accurate communications;
- Level of care utilization management including authorization process;
- Coordination of provider network, provider contracting, and provider rates and reimbursement to ensure accurate loading of rates for reimbursement;
- Identification and measurement of quality indicators in accordance with NCQA accreditation standards and identified performance improvement targets;
- Reporting on contractually mandated standards for behavioral health;
- Provide 24/7 behavioral health hotline for member and provider services;
- Investigate quality of care concerns and provide regular chart reviews of providers to ensure quality;
- Regular communication with providers to problem solve for issues related to claims processing and payment;
- Prepares responses to inquiries from oversight agencies including the Department of Medicaid Services, Department of Insurance, or other Departments within the Cabinet of Health and Family Services;
- Coordination of the Psychotropic Drug Intervention Program to facilitate the exchange of information among providers to reduce inappropriate under or over-use including sub-optimal dosing of psychotropic medications and adverse drug reactions;
- Provide Psychiatric Decision Support Service for Primary Care Providers;
- Provide embedded utilization reviewer/care coordination in largest volume inpatient psychiatric facility;
- Submission of encounters; and
- Provide ad-hoc reporting.

Provides guidance and consultation in the development of behavioral health network with the provider network management team including contracting, training, and expertise with regard to subject matter.

Establishes guidelines, policies, and procedures to ensure accessibility, availability, referral, and triage to effective physical and behavioral health care, including emergency behavioral health services, (i.e. Suicide Prevention.)

Identifies gaps in health care continuum and opportunities for enhancement of existing services or implementation of evidence-based interventions to improve health.

- Determine and prioritize targeted health issues
- Works with providers to increase access to identified services and programming;
- Utilizes available data, as well as benchmarks against competitive and marketplace requirements including HEDIS
and quality outcomes;
• Explores alternative payment models to incentivize desired quality outcomes;
• Works with providers to improve the experience of care, improve member health, and reduce the per capita costs of healthcare;
• Pursues learning collaborations and develops pilot programs as appropriate, and
• Measures outcomes and shares result.

Identifies a method to evaluate the continuity and coordination of care, including member-approved communications and encourages coordination of the exchange of information and integration of care between behavioral health providers and primary care providers.

Works with Director of Pharmacy to monitor drug utilization patterns of psychotropic medications. Share joint oversight of the Behavioral Health Work Group/Behavioral Health Pharmacy and Therapeutics Subcommittee.

Coordinates with community providers including, but not limited to the, Community Mental Health Centers (CMHC), and inpatient psychiatric providers and nursing facilities regarding admission and discharge planning, treatment objectives, and projected length of stay including those Members committed by a court of law to the state psychiatric hospitals.

Act as a liaison with the Department of Medicaid Services and sister agencies within the Cabinet for Health and Family Services regarding the behavioral health needs of members including the Department of Behavioral Health, Intellectual, and Developmental Disabilities, the Department of Community Based Services, and the Department of Aging and Independent Living.

Participate in interagency meetings to aid in the exchange of information and coordination of services to impact the care provided for members.

Represent Passport Health Plan in a variety of forums. Provide testimony and other presentations as needed for legislative committees and other parties regarding the behavioral health benefit. Participate in governmental relations planning team at Passport Health Plan.

Provides fiscal oversight of departmental budget. Participates in analysis of behavioral health benefit utilization and financial trends to identify areas for optimization and improvement.

### Key Competencies/Success Factors:
- Lives the values: Integrity, Community, Collaboration and Stewardship, as defined in the performance appraisal.
- People leadership and management.
- Corporate Financial Performance – Assists in the establishment and achievement of business objectives for the area of responsibility based upon company’s overall strategic plan and operating goals.
- Job Knowledge – Maintains current knowledge of and applies all applicable licensing, regulatory, and industry standards. Keeps abreast of current industry trends.
- Communication Skills – Writes, speaks and presents clearly and concisely. Is thoroughly prepared prior to beginning any negotiation or conflict resolution process.
- Regulatory Compliance – Assess department’s work quality and develops/implements process improvements to improve and achieve regulatory and oversight compliance.
Passport Health Plan

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- Strong functional and technical knowledge of healthcare delivery.
- Demonstrated people management and facilitative skills.
- Excellent interpersonal skills and demonstrated ability to influence internal and external constituents.
- Proven analytical and financial skills
- Experience in an operational, clinical, and political setting.

ADA Physical Demands:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

Work Environment:
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- The position requires that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

Position Qualifications/Requirements:

Education and Training:
- M.S. in Nursing, MBA, MPH, MHA, Ph.D. or MD required.
- 7-10 Years of clinical experience.

Finishing Touches (Preferred)
- Doctoral degree preferred.
- 5-7 Years of Experience as a Behavioral Health Director or comparable experience preferred.
- Experience implementing Behavioral Health Programs in a public health setting preferred.

Licensed, Registrations, or Certifications:
- Licensed Psychologist, Licensed Clinical Social Worker, Licensed Marriage and Family Therapist, or Licensed Professional Clinical Counselor Preferred
- M.S. in Nursing with Psychiatric Experience acceptable
- Must possess a current, active, state license to practice authorized behavioral health discipline
Position Summary:
This position is responsible for providing strategic vision, oversight and organization leadership for all areas of Passport Health Plan.

Principal Accountabilities:

Planning and Business Orientation – Sets objectives based upon company strategic and operating plans, with emphasis on identifying resources requirements. Acquires, applies and maintains knowledge of organization-wide business issues that impact all major business lines. Possesses a strategic understanding of business operations and customer service.

- Maintains contacts with regulatory and legislative bodies to assure compliance with established procedures.
- Provide leadership direction and oversight as needed to achieve desired results as outlined in business plan and/or budgets for Passport Health Plan
- Provide strategic input to assist in successful negotiations with DMS/State of Kentucky with respect to capitation rates and funding of existing or new programs/lines of business; which includes functioning as a registered lobbyist with the Executive Branch
- Develop and provide continuing leadership for provider reimbursement strategies, including Provider Rewards Program components; oversee implementation of programs/strategies, including all sub-contractors (PBM, dental, vision & 24/7 triage line)

Leadership and Management/Aligning – Institutionalizes the vision; creating the focus, ownership and commitment to achieve it. Ensures that direct reports are engaged in activities based on organizational need and their technical skills and capabilities. Ensures internal resources and practices stimulate rather than inhibit highly effective and responsive performance.

- Fosters positive professional relationships between the plan and its providers.
- Provide leadership direction, including agenda preparation/monitoring and facilitation as needed, for multiple meetings, work groups and health plan committees

Teamwork/Communication & Mission/Vision – Leads teams to obtain organizational results and works in partnership with others to achieve business objectives. Communicates strategy and vision, performance expectations. Understands and applies Mission and Values to daily work.

- Supports the continued growth and development of all employees to promote competence and develop/maintain skills necessary to enhance continued business growth.
- Demonstrates Passport Health Plan’s philosophy and values and ensures that philosophy and mission drive the day-to-day operating environment.
- Provides resources to encourage fiscally sound activities that encourage the care, education and dignity of the poor.
- Provide administrative review/approval of external communication vehicles as needed for member newsletters, provider newsletters, provider manuals and member handbooks, etc.

Measuring/Monitoring & Quality – Systematically measures performance versus plan; results versus expectations. Is dedicated to providing the highest quality products and services, which meet the needs and requirements of internal and external customers.

- Monitors financial performance and the achievement of financial objectives. Ensures financial and quality performance of the organization.
- Establishes procedures for monitoring and evaluating the quality and effectiveness of processes or methods.
- Identify areas for improvement in health plan and create/oversee corrective action plans as needed to achieve
desired outcome

- Provide direction and leadership as needed to ensure achievement of NCQA accreditation status as required in state contract/RFP

**Governance – Reports/Communicates to the Board, Partnership Council and all other state and regulatory agencies as appropriate.**

- Report to owner board & partnership council monthly
- Provide leadership direction and oversight as needed to ensure successful compliance with terms of State Contract/RFP
- Provide leadership direction and oversight as needed to ensure successful outcomes for external reviews by DMS, CMS, HCFA, EQRO and other regulatory bodies
- Represent health plan administration as needed in meetings with external organizations, including DMS, CMS, EQRO and other regulatory agencies
- Oversee preparation of all “non-financial” statutory reports required in RFP/Contract.
- Identify issues and make recommendations and presentations to UHC Finance Committee and UHC Board as needed.
- Participates in legislative activities; includes testifying and presenting to various legislative committees.

**Key Competencies/Success Factors:**

- Lives and leads the values: Integrity, Community, Collaboration and Stewardship.
- Proven ability to effectively manage diverse groups.
- Strategic orientation, strong organizational and budgetary skills.
- Demonstrated strong problem solving and management capabilities.
- Logical and analytical thinker.
- Excellent verbal and written communication skills.
- Excellent management and strategic planning skills.
- Advanced interpersonal skills.
- Advanced financial and analytical skills.
- Strong negotiation skills.

**ADA Physical Demands:**
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment
are moderately quiet.
- The position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- Bachelor’s degree in Business or Healthcare or related field required.
- 10-14 years of business experience including HMO and managed care.
- Minimum of 14 years progressively responsible managerial experience, with 7 of those years being at the senior management level.

**Finishing Touches (Preferred):**
- Master’s degree in Business Administration or related field preferred.
- Medicaid managed care plan experience preferred.
- 10+ years of experience in health plan financial management, with significant experience as a health plan CFO preferred.
- HIPAA, NCQA and HEDIS experience preferred.

**Licenses, Registrations or Certifications:**
- CPA preferred.
Position Title: Chief Financial Officer

FLSA Status: Exempt

Department: 

Salary Grade: 

Supervisor’s Title: 

Revision Date: 

Position Summary:
This position is responsible for directing the fiscal functions of the company in accordance with generally accepted accounting principles issued by the Financial Accounting Standards Board, the Securities and Exchange Commission, Kentucky Department of Insurance other regulatory and advisory organizations and in accordance with financial management techniques and practices appropriate within the industry.

Essential Functions:

Strategic and Operational Leadership:
- Provides leadership for all PHP and Kentucky SKY program financial operations (accounting, budgeting, finance, long range and capital planning, financial reporting). Development and coordination of financial management systems necessary to achieve PHP’s financial goals.
- Oversees the budgeting, long range and capital planning, financial, and metrics reporting functions of PHP to ensure management has appropriate financial information to make informed decisions and can monitor progress toward PHP goals. Identifies opportunities for improvement and communicates these to senior leadership. Accountable for the profitability of PHP in conjunction with the CEO and executive team.
- Develops and maintain effective relationships with key contacts at applicable regulatory agencies; function as primary contact for all financial related inquiries, including, but not limited to: Department for Medicaid Services (DMS), Department of Insurance (DOI), and the Center for Medicare and Medicaid Services (CMS).
- Plans and coordinates all aspects of PHP Finance Committee meetings.
- Develops and presents financial reports as needed to present financial results to key audiences (PHP owners, PHP Board, DMS, DOI, CMS, management, legislators).
- Participates on PHP’s negotiating team for annual State contract renewal and interim rate increases; work with actuaries to develop appropriate rate proposals by category of aid.
- Participates in contract negotiations related to regional expansion in Kentucky.
- Prepares annual PHP financial plan based on input form actuaries and other members of the management team; present plan to Finance Committee and the board.
- Creates cost benefit analyses to support business, including but not limited to: provider rate negotiations, subcontractor rate negotiations, financial proformas, and provider incentive programs.
- Develops and administers PHP financial policies and procedures.
- Coordinates preparation of monthly financial statements.
- Ensures required financial reports are filed with appropriate state agencies in a timely, accurate manner.
- Provides support to external auditors for annual audit of PHP.
- Coordinates the approval and processing of PHP operating expenses in accordance with guidelines approved by Finance Committee.

People Leadership:
- Establishes credibility throughout the organization with management and the employees in order to be an effective listener and problem solver of people issues.
- Performance Management – Develops specific and measurable performance standards for all direct reports. Holds self and others accountable to goals and standards of department and company.
- Employee Training & Development – Guides and encourages career development, conducts timely performance evaluations and provides open/ongoing constructive feedback to all direct reports.
- Leadership Skills – Leads by example: Sets an example of personal performance, which encourages excellence and integrity. Advocacy, Competence, Dignity, Stewardship, care of the Poor, Hospitality, Compassion and Diversity. Role models Mission and Values and promotes excellence in customer service through personal actions.

Perform other duties and projects as assigned.
Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

Customer Service Orientation
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

Mission/Vision/Values (MVV)/Culture
The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

Professionalism/Communication
The manner in which one communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

Management Capabilities
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

Fairness and Consistency
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

Leadership
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

Job-Based Competencies:

Adaptability
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

Quality of Work
Has established a track record of producing work that is highly accurate, demonstrates attention to detail and reflects well on the organization. Is personally committed to high quality work and encourages others to have similar standards.

Results Orientation
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

Technical Skills
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.
### Analytical Thinking
Breaks down problems and issues into sub-components and then assesses the costs, benefits and risks of various options prior to selecting a particular approach.

### Initiative
Recognizes opportunities and initiates actions to capitalize on them. Looks for new and productive ways to make an impact. Demonstrates this characteristic when it comes to generating new ideas or processes, capitalizing on new business opportunities, seeking out and taking on increasing responsibility or resolving problems as they occur. Uses sound judgement about when to take action and when to seek guidance or permission.

### ADA Physical Demands:
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- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

### Position Qualifications/Requirements:

#### Education, Training and Experience:
- Bachelor’s degree in Business required. Master’s degree in Business Administration or related field preferred.
- Ten or more years of experience in health plan financial management, with significant experience as a health plan CFO preferred.
- Medicaid managed care plan experience preferred.

#### Licenses, Registrations or Certifications:
- CPA preferred.
Position Summary:
Reporting to the Chief Executive Officer, the President and Chief Operating Officer is responsible for providing direction and strategic vision for all operational and medical management functions, oversight of subcontracted entities and leadership of both the Passport Health Plan and the Passport Advantage line of business. The COO is also responsible for providing strategic leadership for the company by working with the CEO, Board of Directors and executive management to establish long-range goals, strategies, plans and policies.

Essential Functions:

Strategic and Operational Leadership:
- Provide leadership, direction and oversight as needed to achieve desired results as outlined in business plan and/or budgets for Passport Health Plan.
- Provide leadership, direction and oversight as needed to ensure successful compliance with terms of State Contract, DMS, CMS, QIO, IPRO, NCQA and other regulatory body requirements.
- Represent PHP as needed in meetings with external organizations, including DMS, CMS, IPRO and other regulatory agencies.
- Supports and participates in strategic medical management activities and leads sub-teams.
- Responsible for successful achievement of all CMS regulations and requirements regarding Passport Advantage contract. Provides leadership direction and oversight as need to ensure successful compliance with terms of CMS and PHP contracts.
- Develops and designs programs to ensure implementation of and compliance with contracts and regulations including State, CMS, QIO, NCQA and Federal. Assures processes in place to achieve successful audits.
- Keeps abreast of public policy and legislative issues related to Medicaid and Medicare managed care. Represents PHP to outside entities including government, advocates and providers.
- Communicates effectively with executive management of health plan on relevant issues.
- Displays effective human & interpersonal relation skills in the implementation of teamwork, partnership and empowerment of staff.
- Identify areas for operational improvement and create/oversee corrective action plans as needed to achieve desired outcome.
- Provide direction and leadership as needed to ensure achievement of NCQA accreditation status as required in state contract.
- Identify issues and make recommendations and presentations to UHC Finance Committee and UHC Board as needed.
- Ensure staff compliance with policies and procedures within the requirements of Kentucky's laws and regulations, the UHC contract, and the Kentucky Medicaid Partnership Contract. Ensures compliance with CMS regulations and contractual responsibilities.
- Participates in Partnership Council and physician committee meetings.

People Leadership:
- Establishes credibility throughout the organization with management and the employees in order to be an effective listener and problem solver of people issues.
- Performance Management – Develops specific and measurable performance standards for all direct reports. Holds self and others accountable to goals and standards of department and company.
- Employee Training & Development – Guides and encourages career development, conducts timely performance evaluations and provides open/ongoing constructive feedback to all direct reports.
- Leadership Skills – Leads by example: Sets an example of personal performance, which encourages excellence and
Passport Health Plan

Position Title: Chief Operating Officer  
FLSA Status: Exempt

Department: Executive Office  
Salary Grade: EXEC

Supervisor’s Title: Chief Executive Officer  
Revision Date: 06/08/2018

integrity. Advocacy, Competence, Dignity, Stewardship, care of the Poor, Hospitality, Compassion and Diversity. Role models Mission and Values and promotes excellence in customer service through personal actions.

Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

Customer Service Orientation
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

Mission/Vision/Values (MVV)/Culture
The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

Professionalism/Communication
The manner in which one: communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

Management Capabilities
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

Fairness and Consistency
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

Leadership
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

Job-Based Competencies:

Adaptability
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

Quality of Work
Has established a track record of producing work that is highly accurate, demonstrates attention to detail and reflects well on the organization. Is personally committed to high quality work and encourages others to have similar standards.

Results Orientation
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

**Technical Skills**
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

**Initiative**
Recognizes opportunities and initiates actions to capitalize on them. Looks for new and productive ways to make an impact. Demonstrates this characteristic when it comes to generating new ideas or processes, capitalizing on new business opportunities, seeking out and taking on increasing responsibility or resolving problems as they occur. Uses sound judgement about when to take action and when to seek guidance or permission.

**Organizational Awareness**
Understands the internal climate of the organization, including the most productive channels of communication, and makes use of the appropriate communication channels to achieve goals and objectives. Has learned about both formal and informal communication channels and understands when to stick to the formal hierarchy of reporting relationships. Understands unwritten protocols and the political aspects of how communication takes place. Avoids errors in judgment when selecting strategies for accomplishing tasks.

**ADA Physical Demands:**
The physical demands described here are representative of those that must be met by an employee to successfully Perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

**Position Qualifications/Requirements:**

**Education and Training:**
- Bachelor’s (Master’s preferred) degree in business or health related discipline such as Healthcare Administration or Healthcare Management or substantially equivalent experience required.

**Experience:**
- Minimum 15 years progressive experience in Business, preferably Healthcare.
- Minimum 10 years management experience required, preferably Healthcare.
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- Minimum 8-10 years Managed Care experience required.
- Minimum 4 years Quality experience including HEDIS, CAHPS
- Medicaid Managed Care experience preferred.
- Medicare Advantage experience required.
- HIPAA and NCQA experience.
## Position Summary:
The Dental Director will lead the clinical oversight for all aspects of the dental program including plan design, review of new methodologies, and appropriateness of care. The Dental Director will be authorized and empowered to represent Avēsis regarding clinical issues, Utilization Review and quality of care inquiries. Will review policies and procedures, guidelines and clinical protocols relative to the dental program.

## Principal Accountabilities:

### Leadership
- Establish both short and long-term (6 months- 3 years) forward thinking strategies and implementation plans for responsible areas.
- Interacts internally and externally with executive level management.
- Uses skills to contribute to development of company objectives, principles and strategies to achieve goals in creative and effective ways.
- Acts independently to determine methods and procedures on new or special assignments.
- Recruits, hires, coaches and provide appropriate training for staff.

### Dental Team Leadership
- Leads dental staff in coordination of quality, cost effective dental care and provides clinical expertise and business direction for dental management program.
- Responsible for the success of all dental clinical programs. Partner with medical management in program development and implementation of integrated medical/dental care delivery
- Oversight for professional aspects of provider recruitment contracting provider relations and credentialing, dental UM programming and initiatives, Dental QI programs and initiatives, Dental Quality Assurance and Dental Advisory Committees, dental policy and procedure management and development, including new technology assimilation.
- Participates as dental representative in corporate QI, UM, Credentialing, and Advisory Committees.
- Oversight of on-site office visit, chart review, and provider audit activities in coordination with quality management department, subcontractor operations department and dental administrator.
- Represents Passport dental program in internal and external meetings and initiatives with State and Federal government representatives, as well as private entities.
- Coordinates with subcontractor operations and delegation oversight to oversee the dental plan administrator, and participates in activities to ensure compliance with contract.
- Oversees financial performance of dental plan, and works with Finance to facilitate attainment of goals
- Responsibility for oversight of State contract on all aspects pertaining to dental care including EPSDT and regulatory reporting

### People Leadership
- Performance Management – Develops specific and measurable performance standards for all direct reports. Holds self and others accountable to goals and standards of department and company.
- Employee Training & Development – Guides and encourages career development, conducts timely performance evaluations and provides open/ongoing constructive feedback to all direct reports.
- Leadership Skills – Leads by example: Sets an example of personal performance, which encourages excellence and
integrity. Advocacy, Competence, Dignity, Stewardship, care of the Poor, Hospitality, Compassion and Diversity. Role models Mission and Values and promotes excellence in customer service through personal actions.

**Key Competencies/Success Factors:**

- Lives and leads the values: Integrity, Community, Collaboration and Stewardship, as defined in the performance appraisal.
- Effective judgment skills and high level of integrity.
- Demonstrates the ability to lead cross-functional teams.
- Demonstrates the leadership ability to manage and motivate a team with no direct authority for the team.
- Demonstrates effective written and verbal communication skills.
- Analytical, data-driven approach and ability to gather, manipulate and analyze data from multiple sources preferred. Proven ability to make intelligent decisions quickly and fairly.
- Must be able to prepare updates and presentations tailored to the requesting audience.
- Ability to manage multiple priorities simultaneously.
- Excellent analytical skills and strong attention to detail.
- Strong problem-solving capabilities; ability to address problems in a logical manner by conducting thorough research, identifying alternatives, and developing meaningful resolutions. Maintains adaptability/process in a continually changing, high-growth environment.
- Excellent written, verbal and interpersonal communication skills. Must be able to communicate effectively within all levels of the organization.

**Position Qualifications/Requirements:**

- Bachelor’s Degree required
- DDS or DMD
- Completion of credentialing process following NCQA guidelines
- Minimum of 10 years of experience required

**Finishing Touches (Preferred)**

- A minimum of 5 years of dental/medical management experience in a managed care environment, prior experience as a Dental Director in a Managed Care Plan preferred
- Utilization management or dental claim/authorization review experience preferred

**Licenses, Registrations or Certifications**

- Licensed in the Commonwealth of Kentucky
Position Title: Director Provider Network Management  
FLSA status: Exempt  
Department:  
Salary Grade:  
Supervisor’s Title:  
Revision Date: 

Position Summary:  
This position is responsible for providing leadership and direction to Provider Contracting and Provider Network Management.

Principal Accountabilities:  
Strategic and Operational Leadership
- Sets and executes goals for self, departments, and staff.
- Leads team in strategic design development, implementation and ongoing improvement of network development and contracting, future expansion projects.
- Leads provider contracting: including improving provider satisfaction, achieving operational excellence, delivery of administrative goals, achieving exceptional scores on NCQA review, maintaining full compliance with DMS and CMS contract requirements, initiatives pertaining to the provider committees, and strategic contract design for expansion activities.
- Designs, develops, implements and improves provider relations and programs to facilitate access to care for members and establishes mechanisms to assure the accessibility of primary care and behavioral health services.
- Formulates and maintains minimum five year contracting and provider program strategies. Considers both strategic and tactical aspects within development to achieve maximum outcomes in provider satisfaction and administrative efficiency. Supports the corporate medical management strategy and creates contracting strategies that factor into consideration medical cost savings based on MLR (medical loss ratios) and PMPM (per member per month) costs.
- Builds financial and operational business case for change in contracting strategy as appropriate and develops tools to assist PHP in timely and well thought decision making associated with change.
- Conducts ongoing analysis of membership to assure network adequacy to meet the members’ cultural, linguistic, ethnic and race needs.
- Responsible for identification, development and implementation of rural provider strategy to assure accessibility to health care services and to achieve provider strategy as required by PHP as well as conducts ongoing analysis of network compliance with ratio of providers to members and develops recruitment and retention strategies address opportunities.
- Responsible for the analysis of provider reimbursement and for correct reimbursement to providers.
- Reviews and executes all provider contracts and amendments for physicians, hospitals and ancillary providers.

Communication
- Develops and creates internal and external communication, including: written and on-line communications to physicians, hospitals, and ancillary providers, provider administrative and billing manuals, and production of the quarterly provider newsletter.
- Represents PHP as the face of provider contracting and network management; developing and maintaining relationships to achieve successful partnerships.
- Plans and participates in physician committee meetings in consultation with medical staff. Communicates effectively with executive management of health plan on relevant issues.
- Responsible for all service and education visits to providers.
- Responsible for resolution of issues identified through provider satisfaction surveys and development of a proactive plan to increase satisfaction trends.
- Responsible for identification and implementation of improved technology for providers.
- Ensures effective provider communication according to PHP policies and procedures and coordinates revision of
Passport Health Plan

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- Assures effective Provider communication according to PHP policies and procedures and coordinates revision of policy statements with internal departments and external agencies.

People leadership
- Performance Management – Develops specific and measurable performance standards for all direct reports. Holds self and others accountable to goals and standards of department and company.
- Employee Training & Development – Guides and encourages career development, conducts timely performance evaluations and provides open/ongoing constructive feedback to all direct reports.
- Leadership Skills – Leads by example: Sets an example of personal performance, which encourages excellence and integrity. Advocacy, Competence, Dignity, Stewardship, care of the Poor, Hospitality, Compassion and Diversity. Role models Mission and Values and promotes excellence in customer service through personal actions.

Financial Management
- Develops and oversees preparation of annual budget; including resource planning and staffing.

Perform other duties and projects as assigned.

Key Competencies/Success Factors:
- Lives and leads the values: Integrity, Community, Collaboration and Stewardship.
- People leadership and management
- Corporate Financial Performance – Assists in the establishment and achievement of business objectives for the area of responsibility based upon company’s overall strategic plan and operating goals.
- Job Knowledge – Maintains current knowledge of and applies all applicable licensing, regulatory and industry standards. Keeps abreast of current industry trends.
- Communication Skills – Writes, speaks and presents clearly and concisely. Is thoroughly prepared prior to beginning any negotiation or conflict resolution process.
- Regulatory and Delegation Compliance - Assess departments work quality and develops/implements process improvements to improve and achieve regulatory and oversight compliance.

ADA Physical Demands:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

Work Environment:
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.
### Position Qualifications/Requirements:

**Education, Training and Experience:**
- Bachelor’s degree in business or health related discipline such as Healthcare Administration or Healthcare Management required.
- Minimum 10-12 years progressive experience in Business, preferably Healthcare.
- Minimum 6-8 years Managed Care experience, including Provider Contracting, and Provider Relations experience.
- Minimum 7-10 years managing teams/project management.

**Finishing Touches (Preferred)**
- Master’s Degree preferred.
- Medicaid Managed Care experience preferred.
- Medicare experience preferred.
- HIPAA/Facets and NCQA experience preferred.

**Licenses, Registrations or Certifications:**
- N/A
Position Title: Director, Population Health Management  
FLSA Status: Exempt

Department:
Salary Grade:

Supervisor’s Title:
Revision Date:

Position Summary:
This role includes developing and driving an annual clinical initiative plan, monitoring key program and population metrics, participating in quality improvement efforts and working directly with the care management staff including RN care managers, PCPs, community health workers, health coaches, behavioral health specialists, social workers, and pharmacists, in delivering optimal results. In addition, this individual will contribute to the ongoing development of clinical guidelines and protocols used in delivery of population health services, as well as the ongoing design and commercialization of the company’s integrated population analytics and care management workflow technology platform.

Essential Functions:
As a Director in this role, you will lead the strategy/product development. A high-level overview of responsibilities are included below:

- Lead product development for CNP PHM NSSM models including developing a new job description for PHMs, as well as an addendum that supports specific roles and responsibilities that provide standardization and role consistency.
- Facilitate the development of metrics to identify return on investment and return on value opportunities that clearly delineates the value of PHM roles to the organization and its client partners.
- Lead monthly NSSM PHM meetings across markets to share best practice and drive role definition and improvements.
- Facilitate and co-lead annual PHM education and training seminar by bringing in guest speakers to build on skill development for all PHMs within the organization and their client partners.
- Conduct site visits at every market where PHMs are staffed.
- Perform PHM hiring support to all markets by working closely with HR to screen candidates and conduct screening interviews. Working closely with market leadership to find the best candidates for their operational needs.
- Create an onboarding and training program for PHMs. Facilitate onboarding for all new PHM hires, including shadowing and on-line learning modules.
- Work with market leadership to implement a LEAP 2.0 program to support education and training for practices and providers.
- Lead PHM Sub-Committee to develop ongoing content and requirements for the evolving role.

Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

Customer Service Orientation
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

Mission/Vision/Values (MVV)/Culture
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The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

**Professionalism/Communication**
The manner in which one communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

**Management Capabilities**
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

**Fairness and Consistency**
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

**Leadership**
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

**Job-Based Competencies:**

**Adaptability**
Adapts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

**Quality of Work**
Has established a track record of producing work that is highly accurate, demonstrates attention to detail and reflects well on the organization. Is personally committed to high quality work and encourages others to have similar standards.

**Results Orientation**
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

**Technical Skills**
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

**ADA Physical Demands:**
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while...
### Position Qualifications/Requirements:

**Education, Training and Experience:**
- Bachelor’s degree required.
- 3-5 years of experience in healthcare change management/process improvement, outpatient-focused operations or other relevant experience required.
- Strong ability to analyze and evaluate relevant data and apply it to diverse market needs related to savings initiatives and TME reduction.
- Demonstrated ability to develop contextually rich and visually compelling presentations to communicate complex concepts related to PHM roles.
- Ideal candidate will possess strong orientation toward value-based care principles and the health policy landscape and will be hypothesis driven to identify trends, predict issues, highlight critical areas, and develop corrective action plans.

**Finishing Touches (Preferred):**
- Master’s degree is public health, public policy health administration, or other related healthcare field preferred.
Position Title: Director, Utilization Management  
FLSA Status: Exempt  
Department:  
Salary Grade:  
Supervisor’s Title:  
Revision Date:  

Position Summary:  
This role is responsible for overall management of the activities relating to the strategy, tactics, policies, and programs that drive utilization for plan sponsor network providers and members. This is a critical role in the growing Evolent Health organization in that it will be responsible for developing out new capabilities within Evolent Health and in working closely with partner organization to develop efficient and effective programs that achieve cost and quality goals in a way that is integrated into the local delivery system.

Essential Functions:
- Monitoring the utilization management of resources of client network and implementation of initiatives and educational processes to achieve targeted utilization management results established by the client;
- Developing systems and processes for the assumption of utilization management responsibilities by the provider network to create alignment and accountability.
- Responsible for overall direction of activities related to medical review; development of on-site processes where indicated; and telephonic review process of all necessary utilization management components;
- Monitoring the timeliness and accuracy of utilization management data and reporting to meet requirements of applicable regulatory agencies;
- Development and implementation of appropriate utilization management programs and policies;
- Leadership of utilization management activities including design, and implementation of Utilization Management Program Description goals and related activities.
- Responsible for ensuring rigorous, consistent, and disciplined design and execution of integration with the Evolent Health Quality Management program
- Using data analysis to identify opportunities for quality improvement;
- Developing and adopting best practice methodologies and training programs for utilization management tools and techniques;
- Responsible for directing activities related to special projects for utilization management and use of project resources.
- Development of budgets, staffing plans, and assuring adequate allocation of resources;
- Assisting to build utilization management initiatives and tools to support Evolent Health and its partners in constant expansion;
- Responsible for developing business requirements in collaboration with the IT and analytics teams for the development of required utilization management monitoring, predictive modeling initiatives, patient engagement and other outcomes initiatives;
- Enhancing relationships with providers, facilities, plan sponsors, clients, regulatory agencies, and partners.
- Responsible for monitoring member and provider satisfaction survey results and creating necessary changes where indicated.
- Working collaboratively with other functional areas that interface with the utilization management department including provider services, member services, benefits, claims management, contracting, healthcare and medical delivery services.
- Responsible for providing appropriate, timely management of complex clinical issues.
- Promoting a positive work environment by providing timely, specific and constructive performance feedback.

Core Competencies:  
Collaboration  
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business
partners, direct reports and/or co-workers of all levels.

**Customer Service Orientation**
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

**Mission/Vision/Values (MVV)/Culture**
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**Professionalism/Communication**
The manner in which one: communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

**Management Capabilities**
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

**Fairness and Consistency**
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

**Leadership**
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

**Job-Based Competencies:**

**Adaptability**
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

**Results Orientation**
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

**Technical Skills**
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

**ADA Physical Demands:**
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.
**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- Five to ten years of progressive experience in utilization management and/or healthcare financing.
- Associate's Degree in Nursing
- Ability to effectively and persuasively communicate at all levels of the organization.
- Demonstrated ability to collaborate with and influence others and resolve conflict.
- Strong organizational and project management skills.
- Demonstrated ability to drive and deliver results.
- Ability to travel to customer and prospect sites.

**Finishing Touches (Preferred):**
- Master’s degree in Nursing, Business Administration/Hospital Administration/Public Health strongly preferred.
- Experience working within a provider owned health plan or a risk bearing provider organization preferred;

**Licenses, Registrations or Certifications:**
- Active license as Registered Nurse (RN, RNC).
**Position Title:** Manager, Enrollee Services  
**FLSA Status:** Exempt  
**Department:**  
**Salary Grade:**  
**Supervisor’s Title:**  
**Revision Date:**

### Position Summary:
This position is responsible for Enrollee Services and tracking and reporting on issues and problem resolution for Kentucky SKY Enrollees. Also, implementing new procedures within the department, keeping up to date on Medicaid and Medicare changes within the state, investigating issues for the Director and troubleshooting issues.

### Essential Functions:
- Manage the operational and fiscal activities of the department to include: staffing levels, budgets, key performance indicators and financial goals.
- Plan and develop procedures to improve the operating quality and efficiency of the department.
- Analyze and document business processes and problems. Develop solutions to enhance efficiencies.
- Coordinate and implement solutions from process analysis and general department projects.
- Direct staff in the development, analysis, and preparation of reports.
- Assist the Supervisor in coaching and providing career development advice to staff.
- Assist the Supervisor in employee goals and conduct employee performance reviews.
- Assist staff to resolve complex or out of policy operation problems.
- Responsible for meeting department productivity and quality goals.
- Communicate with Supervisor and Director on Department operations.
- Complete human resource paperwork.
- Responsible for assuring NCQA standards are met.
- Participant in after hour’s meetings QMAC.
- Budgetary Responsibility – Develop and maintain department budget. Seek opportunities to contain costs appropriately.
- Analyze data to make sound, logical and timely decisions. Establish priorities and sets long and short-term goals.
- Design, develop and implement projects to address financial, quality and service improvements.
- Analyze existing and potential workflows, processes, supporting systems and procedures and identify improvements.

### Core Competencies:

**Collaboration**  
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

**Customer Service Orientation**  
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

**Mission/Vision/Values (MVV)/Culture**  
The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

**Professionalism/Communication**  
The manner in which one: communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

**Management Capabilities**
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

**Fairness and Consistency**
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

**Leadership**
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

**Job-Based Competencies:**

**Adaptability**
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

**Quality of Work**
Has established a track record of producing work that is highly accurate, demonstrates attention to detail and reflects well on the organization. Is personally committed to high quality work and encourages others to have similar standards.

**Results Orientation**
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

**Technical Skills**
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

**ADA Physical Demands:**
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.
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**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- Bachelor’s degree preferred.
- Minimum of 6-8 years in customer services preferred.
- 3-5 years of experience in a supervisor position preferred.
- 3-5 years of managed Medicaid experience preferred.
- 3-5 years of experience as a Manager Customer Service or comparable experience preferred.
- Proficient experience using Outlook, Word, Excel and PowerPoint in a Windows operating system.
- Maintains current knowledge of and applies all applicable NCQA, licensing, regulatory and industry standards.
- Keeps abreast of current industry trends.
# Passport Health

## Position Title:
Early and Periodic Screening Diagnostic, and Treatment (ESPDT) Coordinator

## FLSA Status:

## Department:

## Salary Grade:

## Supervisor’s Title:

## Revision Date:

## Position Summary:
This position is responsible for managing the day-to-day operations of the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) outreach program.

## Essential Functions:

- Responsible for the day-to-day operations of the EPSDT outreach program.
- Oversight of the method to identify and stratify member non-compliance with EPSDT screenings.
- Plans and organizes targeted member outreach campaigns.
- Plans, organizes, and collaborates with both internal and external customers to promote improved member compliance with EPSDT screenings.
- Educates both members and providers regarding age-appropriate EPSDT screenings.
- Identifies opportunities for improvement.
- Assists the Director in strategic departmental planning.
- Coordinates and implements all aspects of the EPSDT Home Visit Outreach Program, including supervision and training of internal staff and providers.
- Oversees coordination of tracking system to document EPSDT service outreach and track member adherence with all components of EPSDT health screening and follow-up.
- Coordinates, develops and implements departmental policies and processes related to EPSDT activity and initiatives.
- Coordinates, establishes and monitors achievement of departmental goals and objectives related to EPSDT activity and initiatives.
- Provides subject matter expertise internally for development of member and provider materials that explain EPSDT preventive health screening services and EPSDT Special Services.
- Collaborates with Community Engagement to provide education at health fairs, community events, and other onsite activities.
- Collaborates with Provider and Network Management to provide education at various provider events.
- Monitors and assures departmental compliance with all applicable State, Federal and contractual obligations.
- Accountable for successful results with EPSDT-related audits, including the coordination and resolution of recommendations and findings.
- Establishes and maintains positive communication and professional demeanor with PHP employees, providers, EQRO, Department of Community Based Services, Commission for Children and the State. Acts as liaison with outside entities as required.
- Maintains current and develops new collaborative projects in order to promote EPSDT and member health outcomes.
Passport Health Plan

Position Title: Early and Periodic Screening Diagnostic, and Treatment (ESPDT) Coordinator

FLSA Status:

Department:
Salary Grade:

Supervisor’s Title:
Revision Date:

Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

Customer Service Orientation
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

Mission/Vision/Values (MVV)/Culture
The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

Professionalism/Communication
The manner in which one: communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.

Job-Based Competencies:

Adaptability
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

Results Orientation
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

Technical Skills
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.
### Position Title:
Early and Periodic Screening Diagnostic, and Treatment (ESPDT) Coordinator

### FLSA Status:

### Department:

### Salary Grade:

### Supervisor’s Title:

### Revision Date:

#### ADA Physical Demands:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

#### Work Environment:
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

#### Position Qualifications/Requirements:
**Education, Training and Experience:**
- Bachelor’s Degree in Health Care or Equivalent required.
- 3-5 years’ experience in healthcare or managed care setting.
- 3-5 years’ experience working with Medicaid population.
**Position Summary:**
This position is responsible for identifying, assessing, planning, coordinating, and implementing appropriate cost-effective healthcare services for individuals identified as residing in Out of Home Placement.

**Principal Accountabilities:**

Acts as Liaison with the Department for Aging and Independent Living (DAIL)
- Serves as primary contact to DAIL.
- Requests service plans, reviews service plans and researches to verify member is receiving appropriate care, and signs each service plan, indicating agreement with the plan. Follows up with DAIL Worker or supervisor as necessary.
- Meets monthly with DAIL supervisors or workers in each region statewide to review service plans for DAIL members and to identify and resolve healthcare issues in order to meet the needs of Guardianship members.
- Works in collaboration with DAIL Supervisors and Workers to identify DAIL clients for Case Management Services.
- Maintains a current knowledge base with regards to rules, regulations, policies, and procedures relating to Medical Management. Regularly reviews and monitors compliance with PHP policies and procedures.
- Attends statewide Regional Transition Meetings when possible.

Coordinates Out of Home Placement
- Communicates with the Department of Medicaid staff in regards to Guardianship Members.
- Assists with tracking, analyzing and reporting services specific to members in assigned populations such as complaints, grievances, and/or satisfaction with care.
- Is knowledgeable of appropriate alternative delivery settings and interventions for assigned populations.
- Maintains records of all community activities.
- Performs root-cause analysis and correction of the operational processes related to daily operations for assigned populations.

Serves as a primary contact for DAIL, Personal Care Homes, and other entities serving assigned populations
- Maintains and submits reports within 30 days of the end of each quarter detailing the number of service plan reviews conducted for Guardianship members, including outcome decisions such as referral to Case Management and rationale for decision.
- Maintains a report of issues encountered by members in assigned populations; suggests solutions to recurring problems, working with other Passport employees and teams as needed.

Care Coordination
- Conducts and documents the care coordination processes, focusing on the whole health needs of all assigned members, and including assisting in resolving issues encountered by members related to accessing needed care and treatment.
- Acts as a liaison between member, provider and health plan to assure healthcare services are provided in the most clinically appropriate and cost effective manner.
- Facilitates accesses to entitlement programs and/or community resources. Assists in the planning of health care services which will provide a continuum of care to meet the identified needs of the member.
- Follows up regularly with Guardianship members and/or Guardianship Workers (at least quarterly) to ensure members’ care needs continue to be met appropriately.
Position Title: Guardianship Liaison  
FLSA Status: Exempt  
Department:  
Salary Grade:  
Supervisor's Title:  
Revision Date:  

- Maintains documentation of care coordination activity in appropriate system.
- Initiates face-to-face contact as needed with members and with providers/community resources in members’ communities and documents activity in appropriate system.

Identifies and corrects problems with assigned populations including Guardianship, Interim Settlement Agreement, member residing in Personal Care Homes, and other populations as assigned. Demonstrates a broad knowledge of PHP, Medicaid benefits, services, and requirements.

Assists with developing and updating policies and procedures as needed or requested.

Provides coverage and assistance when needed for other Out of Home Care team members, including the Foster Care Liaisons.

Key Competencies/Success Factors:
- Lives the values: Integrity, Community, Collaboration and Stewardship, as defined in the performance appraisal.
- Communicates effectively both written and orally.
- Listens attentively to others.
- Seeks creative problem solving in order to develop a suitable situation for all parties involved.
- Cooperates with others to achieve departmental goals, interdepartmental relations, and public relations.
- Adapts to change of unusual circumstances in a way that promotes cooperation with minimal disruption of departmental activities.
- Maintains cooperative relationships with all departmental staff.
- Displays willingness to work as a team at all times and capable of working independently when necessary.
- Demonstrates knowledge of NCQA, HEDIS®, and program goals.
- Proficient experience using Outlook, Word, Excel and PowerPoint in a Windows operating system.

ADA Physical Demands:
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- Stationary position: Must be able to remain in stationary position 75% of the time.
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- Communicate: Frequent verbal and written communication.

Work Environment:
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- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
- The position requires that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.
## Position Qualifications/Requirements:

### Education, Training and Experience:
- Master's degree in Social Work preferred.
- 3+ years of experience in Healthcare preferred.
- 3+ years of experience with Foster Care clients preferred.
- 3+ years of experience with case management or care coordination preferred.
- Managed care experience preferred.

### Licenses, Registrations or Certifications
- Licensed Behavioral Health Professional preferred.
Position Title: Management Information Systems Director and Chief Information Officer

FLSA Status: 

Department: 

Salary Grade: 

Supervisor’s Title: 

Revision Date: 

Position Summary:
This position is responsible for providing leadership, vision, and management to the technology and analytics team. The focus of this role is to map technology, reporting and data science capabilities to strategic priorities, serve as the executive sponsor for technology process innovation, develop and administer the technology and analytics project portfolio, measure new efficiencies and ROI, and to replace manual processes with technology to drive both cost savings and revenue generation.

Essential Functions:
- Provides leadership, vision, and management to the technology and analytics team
- Map technology, reporting and data science capabilities to strategic priorities.
- Serve as the executive sponsor for technology process innovation.
- Develop and administer the technology and analytics project portfolio.
- Measure new efficiencies and ROI. Replacing manual processes with technology drives both cost savings and revenue generation.
- Be the “executive intermediary” during delivery. This often means enlisting involvement from other executives, re-establishing priorities, acting as a coach, or serving as tiebreaker during the rollout of technology capabilities.
- Effectively works with all internal and external business customers in a collaborative and supportive fashion.
- Ensures network infrastructure in place and functional to support business operations.
- Ensures appropriate information security procedures are in place to maintain secure information and resources.
- Develops, reviews, and certifies all back-up and disaster recovery procedures and plans.
- Ensures continuous delivery of IT services through oversight of service level agreements with end users/departments and monitoring of IT systems performance.
- Provides the study, creation, and implementation of Business Intelligence and Analytics to improve insight and understanding of health plan performance and opportunities for improvement.
- Establishes IT department goals, objectives, operating procedures, and service level agreements (SLAs) consistent with the strategic plan including Mission, Vision, and Values.

Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

Customer Service Orientation
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

Mission/Vision/Values (MVV)/Culture
The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).
### Management Capabilities
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

### Fairness and Consistency
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

### Leadership
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

### Job-Based Competencies:

#### Adaptability
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

#### Results Orientation
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

#### Technical Skills
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

#### Strategic Thinking
Can analyze organizational strengths and weaknesses and then combine these with knowledge of the industry, market and organization to develop long-term strategy.

### ADA Physical Demands:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

### Work Environment:
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
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- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

**Position Qualifications/Requirements:**  
**Education, Training and Experience:**  
- Master’s degree preferred.  
- Minimum of 7 years progressive healthcare and/or IT project management experience.  
- At least six (6) years directing, managing and leading an Information Technology team.  
- 5-7 years of experience as a Director of Information Technology or comparable experience preferred.
Position Title: Manager, Claims  
FLSA Status: Exempt  
Department:  
Salary Grade:  
Supervisor’s Title:  
Revision Date:  

Position Summary:
The Claims Manager is responsible for management, oversight, and development of the Claims Department to ensure employees are engaged to complete timely and accurate adjudication of claims for health care services, received from contracted and non-contracted providers and to ensure all Federal, State and Client requirements are met timely and efficiently in accordance with regulations and client guidelines.

Essential Functions:
- Manage the operational and fiscal activities of the department to include: staffing levels, budgets, key performance indicators and financial goals.
- Leads team in a manner conducive to ongoing growth and expanded knowledge and effectiveness of associates.
- Coaches team members in the use of data and appropriate analytical tools that support improved quality and efficiency.
- Supports team members in the identification and creative problem resolution for improved processes and expanded use of technology.
- Supports collaborative team efforts that produce effective working relationships and trust.
- Displays willingness to work with staff to promote staff development to full potential.
- Keeps staff informed of policy and procedural changes affecting program and administrative operations.
- Regularly suggests innovative means of structuring operations in a fashion that increases efficiency and ensures the optimal utilization of resources.
- Create and manage productivity, quality and inventory reports.
- Create and maintain policies and procedures.
- Manage and execute projects.
- Define and manage staffing needs including recruitment.

Core Competencies:

**Collaboration**
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

**Customer Service Orientation**
The level of commitment to meeting customer needs. Personally demonstrates that the needs of Passport’s internal and external customers are a high priority. (Note: In this evaluation, the term CUSTOMER may include (but is not limited to): members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels). **Mission/Vision/Values (MVV)/Culture**
The level in which one supports and promotes Passport’s Mission (to improve the health and quality of life of our members), Vision (to be the leading model for collaboration and innovation in health care), Values (Integrity, Collaboration, Community and Stewardship), and Culture (Winning Ways).

**Professionalism/Communication**
The manner in which one: communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.
## Passport Health Plan

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### Management Capabilities
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

### Fairness and Consistency
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

### Leadership
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

### Job-Based Competencies:

#### Adaptability
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

#### Results Orientation
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

#### Technical Skills
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

### ADA Physical Demands:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

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### Work Environment:
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**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- Extensive experience in health insurance claims processing with a minimum of 3-5 years management experience.
- HMO Claims or managed care environment preferred across multiple product lines such as Medicaid, Medicare, Exchange, and employer groups.
- In-depth knowledge of medical billing and coding, benefits and provider contracts.
- Strong leadership and management skills and direct supervisory experience. Ability to motivate and lead others to achieve individual and team objectives.

**Finishing Touches (Preferred):**
- Associate’s or Bachelor’s degree preferred.

**Licenses, Registrations or Certifications:**
- N/A
Position Title: Manager, Provider Services  FLSA: Exempt

部 门:  工资等级: 

Supervisor’s Title:  修订日期: 

**Position Summary:**
This position is responsible for implementing new procedures within the department, keeping up to date on Medicaid and Medicare changes within the state, investigating issues for the Director and troubleshooting issues.

**Principal Accountabilities:**
- Manage the operational and fiscal activities of the department to include: staffing levels, budgets, and financial goals.
- Supervises staff in accordance with company policies and procedures.
- Plan and develop procedures to improve the operating quality and efficiency of the department.
- Analyze and document business processes and problems. Develop solutions to enhance efficiencies.
- Coordinate and implement solutions from process analysis and general department projects.
- Direct staff in the development, analysis, and preparation of reports.
- Assist staff to resolve complex or out of policy operation problems.
- Responsible to meet department productivity and quality goals.
- Communicate with Director on Department operations.
- Complete human resource paperwork.
- Responsible for assuring NCQA standards are met.
- Perform other duties and projects as assigned.

**Key Competencies/Success Factors:**
- Lives and leads the values: Integrity, Community, Collaboration and Stewardship, as defined in the performance appraisal.
- Budgetary Responsibility – Develop and maintains department budget. Seeks opportunities to contain costs appropriately.
- Performance Management – Develops specific and measurable performance standards for all direct reports. Holds self and others accountable to goals and standards of department and company.
- Employee Training & Development – Guides and encourages career development, conduct timely performance evaluations and provides open/ongoing constructive feedback to all direct reports.
- Leadership Skills – Leads by example: Sets example of personal performance, which encourages excellence and integrity. Advocacy, Competence, Dignity, Stewardship, Care of the Poor, Hospitality, Compassion and Diversity. Role models Mission and Values and promotes excellence in customer service through personal action.
- Job Knowledge – Maintains current knowledge of and applies all applicable NCQA, licensing, regulatory and industry standards. Keeps abreast of current industry trends.
- Communication Skills – Writes, speaks and presents clearly and concisely. Is thoroughly prepared prior to beginning any project, meeting.
- Analytical Skills – Analyzes data and makes sound, logical and timely decisions. Establishes priorities and sets long and short-term goals.
- Excellent written and verbal communication skills.
- Ability to design, develop and implement projects to address financial, quality and service improvements.
- Ability to analyze existing and potential workflows, processes, supporting systems and procedures and identify improvements.
- Proficient experience using Outlook, Word, Excel and PowerPoint in a Windows operating system.
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- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

**Work Environment:**
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.

**Position Qualifications/Requirements:**

**Education, Training and Experience:**

- Bachelor’s degree preferred.
- Minimum of 6-8 years in customer services preferred.
- 3-5 years of experience in a supervisor position preferred.
- 3-5 years of managed Medicaid experience preferred.
- 3-5 years of experience as a Manager Customer Service or comparable experience preferred.

**Licenses, Registrations or Certifications:**

- N/A
Position Title: Medical Director

FLSA Status: 
Department: 
Salary Grade: 
Supervisor’s Title: 
Revision Date: 

Position Summary:
This position is responsible for providing organization leadership in the operational areas of Medical Management, Quality Management, and related policy and practice initiatives. This position will serve as a lead physician on the medical management team working closely with the Medical Directors, other physician reviewers, the Director of Quality/Medical Management, Manager of Utilization Management, Manager of Case Management, Manager of Quality Management, Manager of Mommy & Me, the Pharmacy Director, and other Managers/Directors as needed.

Essential Functions:
- Oversees Utilization Management decisions
- Oversees Clinical Management Department to ensure level of care criteria is being met.
- Provides supervision to all Physician Advisors and training regarding clinical care.
- In conjunction with the other clinical management, develops clinical trainings and education to all clinicians to assure solid clinical judgment is being taught and used.
- Leads and participates in clinical rounds to highlight best practice and improvements.
- Oversees NCQA accreditation process
- Facilitates and reviews all Clinical Policies and Procedures
- Participates in Provider Advisory Council, UM Committee, Credentialing Committee and other internal or external bodies as needed.
- Participates in Executive Council.
- Provides clinical input to senior management team regarding UM decisions and plans for the future
- Leads and assists in provider trainings
- Develops affiliation with local and national academic communities to develop research opportunities.
- Represents Beacon at local and national conferences
- Other duties assigned

Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and co-workers of all levels).

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The manner in which one: communicates with others honestly and respectfully/conducts themselves when interacting with others both verbally and nonverbally.
Management Capabilities
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.

Fairness and Consistency
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

Leadership
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

Job-Based Competencies:
Adaptability
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

Quality of Work
Has established a track record of producing work that is highly accurate, demonstrates attention to detail and reflects well on the organization. Is personally committed to high quality work and encourages others to have similar standards.

Results Orientation
Achieves results within established timelines. Understands and demonstrates that intentions, activities and results are not the same. Expects that obstacles will occur and refuses to use them as an excuse for not achieving results.

Technical Skills
Possesses the technical skills and knowledge required to perform essential tasks in an efficient and effective manner. Adheres to laws, regulations, guidelines and specifications relevant to our business.

ADA Physical Demands:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Stationary position: Must be able to remain in stationary position 75% of the time.
- Use of hands: Continuous use of computer, telephonic and other electronic equipment.
- Communicate: Frequent verbal and written communication.

Work Environment:
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- This position primarily works in a climate controlled based setting. The noise level and the work environment are moderately quiet.
<table>
<thead>
<tr>
<th><strong>Position Title:</strong></th>
<th>Medical Director</th>
<th><strong>FLSA Status:</strong></th>
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<tbody>
<tr>
<td><strong>Department:</strong></td>
<td></td>
<td><strong>Salary Grade:</strong></td>
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<tr>
<td><strong>Supervisor’s Title:</strong></td>
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<td><strong>Revision Date:</strong></td>
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- This position may require that the associate commute to off-site locations to complete PHP business. The associate may be exposed to outside weather conditions during these commutes.

**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- A medical degree (M.D. or D.O.)
- Minimum five years of progressive business experience.

**Finishing Touches:**
- A minimum of 5 years of medical management and general management experience in a managed care environment is preferred.
- Primary care discipline, prior experience as Associate Medical Director (or equivalent) or physician reviewer in a Managed Care Plan preferred.
- Utilization management experience preferred.

**Licenses, Registrations or Certifications:**
- Board Certified Physician.
- Must possess a current, active, state license to practice medicine.
Position Title: Pharmacy Director, KY  

FLSA Status: Exempt

Department: 

Salary Grade: 

Supervisor’s Title: 

Revision Date: 

Position Summary: 
This position will function as the delegated Director of Pharmacy for client health plans including Medicaid and Medicare including SNP plans). The Pharmacy Director, KY will provide pharmacy subject matter expertise during the start-phase (e.g., Ongoing Medicaid operations, interactions with the State as well as Medicare Advantage application & submission process, state-regulatory application process for Commercial health plans) of client health plan operations. As a member of the pharmacy services leadership team, the Director will also cross collaborate with PBM Operations and Clinical Product Development to build and lead a highly effective, integrated pharmacy services platform.

Essential Functions:
- Create and enhance State-specific programs such as lock-in, provider outreach, and quantify the value of those initiatives.
- Collaboratively participate in development & maintenance of the Drug Formulary(s) with PBM Operations and our key business partners.
- Oversee (and participate as needed) in client-specific communications process to ensure effective change management.
- Establish and maintain effective, collaborative working relationships with PBM Operations, our key business partners, the Market Leadership, and contracted vendors.
- Be the main account management point of contact between the client and organizational teams.
- Ensure management of pharmacy department activity with emphasis on the quality of care, accessibility, financial impact and regulatory compliance.
- Develop initiatives to identify, track and monitor pharmacy utilization and opportunities for cost savings, trend management, and/or quality improvement.
- Provide joint oversight for pharmacy analytics and modeling assure best in class trend management, clinical outcome achievement, and client service support.
- Contribute to the design, execution and leadership of a comprehensive specialty pharmacy strategy.

Core Competencies:

Collaboration
The level of commitment to collaborative teamwork, sharing of expertise/best practices/resources, and efforts to break down barriers between teams (defined as co-workers, direct reports and/or associates). Collaboration is also seen in the ability to work effectively with customers (defined as members, providers, advocates, vendors, the State (DMS), business partners, direct reports and/or co-workers of all levels).

Customer Service Orientation
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Professionalism/Communication
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Management Capabilities
The manner in which managers set expectations for, delegate to, mentor, develop and evaluate their direct reports. This includes general timekeeping, timely completion of performance reviews, and human resource management.
Passport Health Plan

<table>
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<th>Pharmacy Director, KY</th>
<th>FLSA Status:</th>
<th>Exempt</th>
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**Fairness and Consistency**
The degree in which managers treat subordinates with fairness and consistency. The manager is highly aware of the need for consistency and an even-handed approach when it comes to decisions affecting education and training opportunities, distribution of work assignments, access to privileges or visibility, credit for accomplishments, etc.

**Leadership**
Articulates a vision that others choose to follow. Models behavior expected of others and inspires others to undertake challenging tasks and projects.

**Job-Based Competencies:**

**Adaptability**
Adjusts quickly and effectively to changing conditions and demands. Discusses change as a necessary and inevitable aspect of organizational life as well as an opportunity to learn new things. Has a similar view and approach to potentially stressful situations. Invests personal energy toward accepting and adapting to change that others use toward resisting or resenting it.

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**Work Environment:**
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Position Qualifications/Requirements:

Education, Training and Experience:
- Pharmacy degree required; either BS Pharmacy or Pharm D.
- Advanced “business” degree (e.g., MBA, MHA) preferred.
- 2+ years as health plan pharmacy director or PBM clinical operations leadership experience preferred.
- 2+ years Medicare Advantage health plan pharmacy experience preferred.
- 3+ years of PBM account management experience.
- 5-10 years of Medicaid experience.
- Pharmacy benefit & pharmacy health plan operations experience including area such as health plan pharmacy leadership, clinical utilization management, and/or benefit consulting.
- Start-up experience with Medicare Advantage, Medicaid and/or Commercial plans preferred.
- Knowledge of polypharmacy patterns related to the Kentucky SKY populations required.

Licenses, Registrations or Certifications:
- Active Pharmacy License in the Commonwealth of Kentucky required.
### Position Summary:

This position assists in the development and implementation of key metrics for the PIU operational reporting and oversight measures for internal and external (client) purposes, assists with audits, case investigations, provides guidance, direction to FWA Investigators. Implements appropriate claims-based algorithms to proactively identify potential cases of FWA. Manages the day to day workload of PIU staff and Investigators, Works to continually improve a monitoring system which tracks and oversees FWA issues or violations. Monitors and oversees Program Integrity subcontractors. Oversees interactions and relationships with the Kentucky Department of Medicaid Services (DMS) and other State and Federal Agencies, as needed. Identifies potential areas of compliance vulnerability and risk and works with management to address the issues.

### Essential Functions:

- Pull and analyze data on member and provider allegations to determine if additional investigation is needed
- Create subcontractor fraud, waste, and abuse referrals and follows up with subcontractors for status updates
- Assist with meeting Program Integrity responsibilities concerning Medicaid Program Violations (MPV) and Program Integrity as required by the Department for Medicaid Services, State and Federal law and regulations
- Coordinate with other departments to ensure that documents are gathered to meet OIG Regulatory Requests
- Prepares agendas, packets and minutes for Program Integrity meetings
- Serve as back-up for Auditor, Program Integrity for hotline calls and emails regarding fraud, waste and abuse
- Reviews and closes out administrative member fraud, waste and abuse cases
- Analyze and compile claims information to create spreadsheets, reports, and other documents related to provider overpayment and recoupment.
- Submit recoupment requests to Passport subcontractors, including preparing the required forms and spreadsheets.
- Review and approves subcontractor recoupment demand letters.
- Oversee and act as a point of contact for Passport subcontractors’ recoupment activities.
- Track disputes and appeals related to program integrity recoupment demands and ensures compliance with the appeal decision deadlines.
- Prepare monthly and quarterly recoupment-related reports.
- Develop, implement, and maintain a tracking system for recoupment activities.
- Perform regular audits of subcontractor recoupment efforts to ensure compliance with state and federal law and Passport’s policies and procedures.

### Core Competencies:

#### Collaboration

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members’ homes. The associate may be exposed to outside weather conditions during these commutes. Members homes may have cleanliness or safety concerns.

**Position Qualifications/Requirements:**

**Education, Training and Experience:**
- 3-4 years of compliance experience
- Knowledge of investigative practices and law
- General knowledge of health insurance, managed care, benefit design, Kentucky revised statutes, Kentucky administrative code and federal regulations
- Proficient in Microsoft office

**Finishing Touches (Preferred)**
- Bachelor’s degree
- 3-5 years of experience as a Compliance Coordinator or comparable experience
Position Title: Quality Improvement (QI) Director  
FLSA Status:  
Department:  
Salary Grade:  
Supervisor’s Title:  
Revision Date:  

Position Summary:
This position supports the quality functions for he/she (1) designs, builds and manages health plan quality programs that meet CMS and NCQA requirements; and (2) sets strategy, monitors, and optimizes QI initiatives for performance-based payment programs, such as Medicare Advantage Stars Ratings and CMS ACO Shared Savings Program; (3) coordinates care gap closure efforts with other physician-facing initiatives. The Director, Quality Improvement plays a key role in creating infrastructure required for performance monitoring and quality improvement purposes, as well as strategies for raising performance on national measures of population health management. Drives the customization, launch and ongoing operations of the Proactive Care program, a multi-pronged approach to identifying and closing important gaps in care for patient populations.

Essential Functions:

- Identify and prioritize key quality and utilization measures critical to client success under its performance based payment programs (e.g., achieving >=4 star rating or higher for MA plans, exceeding target benchmarks for CMS ACO shared savings, etc.)
- Work closely with the market team’s Medical Director, Senior Director of Clinical Operations, and other key leadersto support Proactive Care program’s outreach to physician practices through customization of measures tool/report and collection and analysis of physician feedback data.
- Introduce processes to track measure performance toward goals, and based on findings, engage Evolent and client clinical leadership in discussion of potential improvement interventions
- Collaborate with Evolent clinical leadership, Program Innovations team, Clinical Informatics, and Reporting to operationalize care gap closure efforts for the client
- Manages the health plan quality improvement program description (QIPD) the annual evaluation and workplan.
- Prepare and present reports for internal and external client committees (e.g., QIC, Credentialing); prepare and maintain minutes; maintain, review and participate in the revision of departmental and corporate policies, procedures and protocols.
- Manage the implementation and successful completion of Medicare and Medicaid quality improvement program projects including, but not limited to HEDIS, Chronic Care Improvement Program (CCIP) and Quality Improvement Projects (QIP), and other performance improvement initiatives and CMS-mandated projects.
- Oversee the tracking, trending and reporting of internal and external quality management data for client health plan
- Assure initial and on-going compliance with state and federal quality improvement requirements; specifically from Chapter 5 of the Medicare Managed Care Manual.
- Assist in the implementation of review/audit plans, self-assessments and other activities to monitor and track ongoing compliance with NCQA standards, federal and state laws, and Medicare/Medicaid rules and regulations.
- Coordinate aspects of the audit program, including maintaining audit files, developing an audit timeline, analysis of audit data, and accurate reporting of all audit results.
- As needed, facilitate NCQA readiness review activities to ensure all accreditation requirements are met.
- Coordinate activities between RAF and Proactive Care to ensure seamless, efficient experience for participating physicians

Core Competencies:
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### Position Qualifications/Requirements:

**Education, Training and Experience:**
- 5+ years clinical and/or health care management experience, with general understanding of performance measures (e.g., NCQA/HEDIS measures, MSSP measures, etc.)
- Bachelor’s Degree in Health Care or Equivalent required
- Experience working with Medicaid population
- Training and experience in rapid cycle improvement required
- Experience in strategic planning, foster care and juvenile justice systems and trauma-informed Care
- Knowledge of QI/CQI principles, CMS requirements and regulations, and NCQA standards and regulations
- Experience with analyzing HEDIS, CAHPS, HOS and Medicare Star rating data.
- Excellent analytical, verbal, written, organizational and interpersonal skills.
- Intermediate level proficiency with Microsoft Office applications and data management reporting.

**Finishing Touches (Preferred)**
- Master’s degree in health-related field desirable
- Past health plan or managed care environment highly preferred, including minimum of two years Medicare and/or dual eligible quality management experience in a managed care setting