



MEDICAL DIRECTOR (MD / DO)

Position Status:
Reports To: Chief Medical Officer
Effective Date: 07/21/25
Revised Date:
Job Level: P5

POSITION SUMMARY

Under policy direction, this position:

1. Provides clinical leadership and oversight for key medical management functions, including Utilization Management (UM) and Potential Quality Issue (PQI), and Provider Disputes
2. Performs other duties as assigned

RESPONSIBILITIES

1. Provides clinical leadership and oversight for key medical management functions, including Utilization Management (UM), Potential Quality Issues (PQIs), and Provider Disputes, with duties including but not limited to:
 - Ensuring that medical decisions align with evidence-based guidelines, regulatory requirements, and applicable policies
 - Maintaining current knowledge of relevant federal and state laws, policies, and directives, and organizational policies and procedures
 - Serving as a liaison for network physicians who have questions, suggestions, feedback, or complaints
 - Consulting with department directors regarding the clinical direction of programs, studies, activities, and processes for all Health Services Departments
 - Participating in the development and implementation of clinical policies and programs
 - Supporting initiatives related to health equity, behavioral health and care-based incentives

Utilization Management (UM) Responsibilities:

- Providing clinical oversight for medical decisions regarding hospital Concurrent Review on Alliance inpatient members
- Reviewing Authorization Requests as referred by UM staff for approval or denial of requested services
- Ensuring that UM decisions are consistent with InterQual/Milliman Care Guidelines (MCG) and state/federal regulations
- Collaborating with UM Registered Nurses and other Physician reviewers to ensure timely and appropriate determinations
- Participated in inter-rater reliability and calibration activities
- Evaluating member requests for administrative membership categories
- Evaluating physician requests for member reassignment
- Participating in staged resolution of authorization appeals and communicating with providers and members regarding utilization management issues and questions
- Evaluating member and provider appeals related to UM

Potential Quality Issue (PQI) Responsibilities:

- Evaluating potential quality issues by reviewing and assessing PQIs to determine clinical appropriateness and potential impact on member safety
- Evaluating potential quality of care incidents, communicating with providers regarding such incidents, developing Corrective Action Plans (CAPs), and evaluating responses to CAPs
- Collaborating with QI staff to identify trends and making recommendations for corrective actions
- Participating in root cause analysis and QI initiatives stemming from PQI findings

Member Grievances and Provider Disputes Responsibilities:

- Evaluating member grievances and complaints
- Participating in the Alliance compliance and grievance resolution process, including State Fair Hearings
- Reviewing and resolving clinical aspects of provider disputes
- Serving as a subject matter expert in clinical policy interpretation and application
- Participating in provider education and feedback sessions to improve understanding of medical necessity criteria

2. Performs other duties as assigned

EDUCATION AND EXPERIENCE

- Doctor of Medicine or Doctor of Osteopathy from an accredited medical school and a current active and unrestricted license to practice medicine issued by the State of California, Board certification in a specialty recognized by the American Board of Medical Specialties, and a minimum of three years of experience working in medical programs administration, including experience with the peer review process; or an equivalent combination of education and experience may be qualifying.

KNOWLEDGE, SKILLS, AND ABILITIES

- Working knowledge of data collection and management practices, as related to utilization and quality of medical care
- Working knowledge of InterQual and Milliman Care Guidelines
- Working knowledge of the principles and practices of customer service
- Working knowledge of and proficiency with Windows-based PC systems and Microsoft Word, Excel, Outlook, and PowerPoint, and database systems
- Some knowledge of managed care, Medi-Cal, Medicaid, and Medicare programs
- Some knowledge of healthcare regulatory processes
- Ability to independently navigate complex systems to effectively and efficiently implement new programs in a timely manner
- Ability to communicate clearly and consistently and work collaboratively with stakeholders and partners, such as patients, community-based organizations, and healthcare providers
- Ability to evaluate, qualitatively and quantitatively, a broad variety of programs and processes and use these evaluations to ensure ongoing quality improvement
- Ability to demonstrate a collaborative management style, build rapport, and effectively manage internal and external business relationships

- Ability to build trust and rapport with the local provider community and other health plans
- Ability to gain and maintain knowledge of the medical communities within all Alliance service area counties
- Ability to act as a resource to clinical and non-clinical staff and explain complex laws, regulations, processes, and programs related to area of responsibility
- Ability to resolve complex problems with creativity and resourcefulness
- Ability to demonstrate sensitivity, empathy, and understanding to a culturally diverse member population
- Ability to make presentations and adjust communication style in order to facilitate collaboration and understanding

DESIRABLE QUALIFICATIONS

- Bilingual (English/Spanish or English/Hmong)
- Experience working with systematic quality assurance, quality improvement, and public health and epidemiology programs
- Experience working with healthcare partners and community partners
- Working knowledge and proficiency with Jiva
- Working knowledge of managed care, Medi-Cal, Medicaid, and Medicare programs
- Working knowledge of NCQA, DHCS and CMS requirements
- Working knowledge of safety net systems and the factors to consider when working with vulnerable populations
- Working knowledge of the principles and practices of program implementation, continuous process improvement, and systems thinking and design
- Some knowledge of the medical communities within the Alliance service area counties

WORK ENVIRONMENT

- Ability to sit in front of and operate a video display terminal for extended periods of time
- Ability to bend, lift, and carry objects of varying size weighing up to 10 pounds
- Ability to work effectively in a remote work environment

This position description, and all content, is representative only and not exhaustive of the tasks that an employee may be required to perform. Employees are additionally held responsible to the Employee Handbook, the Alliance Standard Knowledge, Skills and Abilities and the Alliance Code of Conduct. The Alliance reserves the right to revise this position description at any time.