



PROVIDER NETWORK ANALYST

Position Status: Exempt
Reports To: Provider Quality and Network Development Manager
Effective Date: 01/01/19
Revised Date: 02/14/22
Job Level: P3

POSITION SUMMARY

Under direction, this position:

1. Leads and supports provider network evaluation and reporting
2. Initiates, coordinates, and analyzes the results of provider network surveys and ensures compliance with regulatory standards
3. Coordinates regulatory reporting, the submission of audit-related deliverables, and policy review
4. Performs other duties as assigned

RESPONSIBILITIES

1. Leads and supports provider network evaluation and reporting, with duties including but not limited to:
 - Analyzing the provider network to inform network development activities in response to member needs
 - Utilizing survey results and internal/external data sources to identify opportunities for improved access, quality, and compliance with regulatory requirements
 - Working with unit leadership to perform gap analyses and develop network expansion plans
 - Coordinating and utilizing data to develop recommendations regarding network expansion efforts, including identifying opportunities for innovation in access to care
 - Auditing reporting at the individual provider and network levels to evaluate the adequacy of the provider network and Alliance delegated networks and develop recommendations related to future network expansion efforts
 - Leading special projects and program activities, as assigned
2. Initiates, coordinates, and analyzes the results of provider network surveys and ensures compliance with regulatory standards, with duties including but not limited to:
 - Overseeing and coordinating the administration of provider network surveys, such as Provider Satisfaction, Provider Appointment and Availability, and Provider Appointment Monitoring surveys
 - Analyzing survey outcomes and identifying trends and opportunities for provider education and network expansion and providing relevant information to the Provider Relations team
 - Assessing key access indicators to ensure provider compliance with network adequacy standards and drafting corrective action plans, as required
 - Serving as departmental subject matter expert in the contracting process with survey vendors, including creating and managing scope of work and ensuring accuracy of information provided to vendors

3. Coordinates regulatory reporting, the submission of audit-related deliverables, and policy review, with duties including but not limited to:
 - Coordinating and executing regulatory reporting processes, including creation and review of deliverables for audits, the annual Medi-Cal network certification, and the Timely Access Filing
 - Drafting responses to comment letters from regulatory entities and conducting root cause analyses of any identified deficiencies
 - Coordinating and leading annual and ad hoc department policy review, including identifying opportunities for policy revisions and ensuring that policies meet regulatory standards
 - Responding to requests for policy review from other departments and summarizing changes and recommendations for department leadership
 - Assessing the impact of All Plan Letters and legislative items on Provider Services policies and procedures and recommending and drafting changes
4. Performs other duties as assigned

EDUCATION AND EXPERIENCE

- Bachelor's degree in Business, Public Administration, Economics, Healthcare or a related field and a minimum of five years of experience in a managed care environment which included a minimum of three years of experience related to data analysis and/or regulatory reporting (a Master's degree may substitute for two years of the required experience); or an equivalent combination of education and experience may be qualifying

KNOWLEDGE, SKILLS, AND ABILITIES

- Thorough knowledge of and proficiency in research, analysis and reporting methods
- Working knowledge of the healthcare industry and the principles of healthcare planning
- Working knowledge of and proficiency with Windows-based PC systems and Microsoft Word, Outlook, Excel, and PowerPoint
- Some knowledge of the California Medi-Cal program
- Some knowledge of the principles and practices of project management
- Ability to identify issues, conduct research, analyze and interpret data, reach logical and sound conclusions, and make recommendations for action
- Ability to translate a reporting need into detailed business requirements to inform data mining and report writing processes
- Ability to interpret policies, procedures, standards and guidelines
- Ability to manage multiple projects simultaneously, create project plans, organize work, identify and involve relevant stakeholders, and achieve goals and timelines
- Ability to understand, interpret and apply complex legislative and regulatory directives, policies, standards, and guidelines
- Ability to act as a technical resource and explain regulations, processes, and programs related to area of assignment
- Ability to exercise tact and diplomacy and demonstrate strong customer service skills
- Ability to exercise sound judgment, discretion, and problem-solving skills
- Ability to assist with the development and implementation of projects, systems, programs, policies, and procedures
- Ability to independently manage assigned workload, make decisions related to area of functional responsibility, and recognize issues requiring escalation

- Ability to prepare written and oral reports and make effective presentations
- Ability to develop and implement operational workflows
- Ability to identify needed system enhancements and evaluate and assist in the implementation of software solutions
- Ability to create datasets and build reports from datasets
- Ability to review data to ensure data integrity and quality and to identify data anomalies
- Ability to ensure accuracy, validation and standardization of reports
- Ability to interpret reporting requirements and ensure accuracy of data reported
- Ability to prepare a variety of documents, reports, policies, procedures, and other program documents
- Ability to produce organized, accurate, and detail-oriented work in a fast-paced environment and under the pressure of deadlines
- Ability to coordinate and facilitate meetings and foster effective working relationships and build consensus with individuals at all levels internal and external to the organization
- Ability to work independently with minimal supervision and as a member of a team

DESIRABLE QUALIFICATIONS

- Experience performing provider network development, evaluation, analysis, and related reporting
- Some knowledge of provider networks in Santa Cruz, Monterey and Merced counties
- Some knowledge of healthcare payment methodologies

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 travel to different locations in the course of work

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.