



## SENIOR RISK ADJUSTMENT DATA ANALYST

**Position Status:** Exempt  
**Reports To:** Risk Adjustment Director  
**Effective Date:** 04/09/25  
**Revised Date:**  
**Job Level:** P3

### POSITION SUMMARY

Under direction, this position:

1. Performs complex analytical data mining and reporting in support of the Risk Adjustment Department
2. Leads initiatives, provides program support, and performs project management related to data gathering and analysis
3. Acts as a subject matter expert and resource regarding risk adjustment data
4. Performs other duties as assigned

### RESPONSIBILITIES

1. Performs complex analytical data mining and reporting in support of the Risk Adjustment Department, with duties including but not limited to:
  - Performing strategic data analysis, data mining, and research to support Risk Adjustment activities
  - Researching, assessing, and developing advanced tools, models, reports and approaches to increase accuracy and timeliness of data-driven work projects
  - Compiling, analyzing, and interpreting healthcare data, including member information, claims data, and medical records, to assess patient risk profiles
  - Designing, developing, implementing, and maintaining report suites and dashboards to track the effectiveness of initiatives
  - Utilizing data mining and analytical tools to gather information and develop recommendations
  - Requesting data from application users across the organization for the purpose of creating reports
  - Developing financial models and reports to support provider contract negotiations
  - Collaborating with the Data Warehouse team to design and recommend improvements to the data warehouse
  - Developing and maintaining risk adjustment models and monitoring and tracking risk adjustment performance metrics
  - Analyzing trends and patterns within risk adjustment data to identify areas of risk and opportunities for improvement
  - Researching and recommending areas for improvement related to data quality and reporting
  - Identifying gaps in the claims encounter reconciliation process and providing insights to educate providers
  - Utilizing data visualization to transform complex data into easily understandable visuals, such as charts and graphs
  - Preparing narrative and statistical reports, correspondence, and other program materials
  - Developing medical expense, revenue and enrollment projections to support the budget process

- Ensuring the accuracy and completeness of risk adjustment factor (RAF) calculations used to predict healthcare costs and resource utilization
  - Preparing complex monthly revenue valuation analysis, identifying and attributing proper credit to all initiatives
  - Applying advanced data and industry knowledge to develop recommendations related to data governance and improve advanced analytical capabilities
  - Providing recommendations on the data source, analytical approach, and validation process
  - Ensuring data accuracy, prioritization, and visibility and distinguishing between true and false data outcomes
  - Ensuring data integrity of all analytical tools and reporting
  - Obtaining data, directing, and executing reporting and analysis, performing interpretations, developing options and conclusions, and preparing recommendations
  - Performing drill-down analysis to proactively identify specific variances in medical cost and utilization
  - Leading or supporting the translation of business requirements and unstructured business issues into analytic data problems
  - Conducting research studies involving the collection of data from various sources, analyzing, trending, and presenting the findings, and making recommendations to management
  - Ensuring accuracy of all monthly and supplemental data feed extracts
  - Assisting in preparing for and supporting regulatory audits
2. Leads initiatives, provides program support, and performs project management related to data gathering and analysis, with duties including but not limited to:
- Collaborating with internal departments and external vendors on risk adjustment projects
  - Leading discussions related to project scope, data source, and reporting metrics and format
  - Monitoring project progress toward objectives while minimizing exposure to risk
  - Presenting risk adjustment analysis findings to leadership and cross-functional groups
  - Developing return on investment (ROI) and business case analyses for risk adjustment vendors, projects, and program initiatives under consideration by management
  - Supporting regulatory reporting across the organization
  - Maintaining knowledge of Centers for Medicare & Medicaid Services (CMS) regulations and guidelines related to risk adjustment
  - Working with vendors on the submission of proprietary claims information to CMS and on electronic medical record (EMR) interface with providers
  - Performing analyses and developing processes to improve risk adjustment program performance and data accuracy
  - Leading or participating in projects, workgroups, and internal and external meetings
3. Acts as a subject matter expert and resource regarding risk adjustment data, with duties including but not limited to:
- Acting as a risk adjustment data resource to staff across the organization
  - Providing technical support to leadership on prospective risk adjustment programs
  - Providing subject matter expertise, support, and analyses around risk adjustment
  - Providing support for provider contract negotiations, assessing actuarial rate development studies, participating in annual budgeting functions, and providing ad-hoc analytic support as needed
  - Assisting with the development of policies and procedures related to risk adjustment activities
4. Performs other duties as assigned

## EDUCATION AND EXPERIENCE

- Bachelor's degree in Finance, Business, Information Technology, or a related field and a minimum of five years of experience performing health care finance reporting and analytics, including a minimum of three years of experience working in a Medicare environment (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 quantitative data analysis methodologies and analytical tools related to risk adjustment reporting and analysis
- Thorough knowledge of data modeling techniques and business analytical and data mining tools, including SQL, and data visualization tools, such as Tableau
- Thorough knowledge of data warehouse, data mart, and dimensional data modeling technologies
- Thorough knowledge of Enterprise Data Warehouse (EDW) and data dictionary, including an understanding of the methods of searching for tables and fields
- Thorough knowledge of descriptive statistical techniques and terminology
- Thorough knowledge of and proficiency with Windows based PC systems and Microsoft Word, Outlook, PowerPoint, and Excel (including pivot tables), and report-generating software
- Working knowledge of the Medicare program and related regulations
- Working knowledge of Medicare (Hierarchical Condition Categories) risk adjustment models
- Working knowledge of the principles and practices of project management
- Working knowledge of the methods and techniques of developing and delivering data management strategies that support contract analysis, trend management, budgeting, forecasting, strategic planning, and healthcare operations
- Working knowledge of healthcare industry specific terms and healthcare related data types and structures, including member, claims, clinical, and provider types
- Working knowledge of financial analytical and complex abstract reasoning concepts
- Working knowledge of file formats utilized for state and federal reporting
- Ability to collect, interpret, and evaluate data, detect patterns, brainstorm solutions, consider multiple factors when making decisions, and project consequences of recommendations
- Ability to perform technical and non-technical troubleshooting and diagnose and resolve complex problems, including problems that may have multiple variables and may not have obvious solutions
- Ability to perform detailed quantitative analysis up to and including identifying key drivers and outcomes
- Ability to develop data-driven and outcome-based initiatives to improve business decision making
- Ability to calculate and communicate forecasts and projections
- Ability to create repeatable and automated report suites and dashboards using a business intelligence tool
- Ability to learn and understand all areas of the business and operational processes relevant to risk adjustment projects and activities
- Ability to create systems to monitor data errors
- Ability to write reports and provide analytical conclusions of data
- Ability to create effective and compelling charts and slide decks
- Ability to manage multiple projects simultaneously, organize work, ensure accuracy of data,

- maintain accurate records, and achieve goals and timelines
- Ability to interpret and apply rules, regulations, policies, procedures, and guides
- Ability to act as a technical resource, provide guidance related to area of assignment, and explain related regulations, processes, and programs
- Ability to make presentations in a clear and understandable manner utilizing methods appropriate to various forums
- Ability to lead and facilitate meetings
- Ability to work collaboratively and productively with diverse project teams in order to achieve efficient and timely solutions
- Ability to work collaboratively with individuals at all levels of the organization while supporting multiple stakeholders
- Ability to demonstrate flexibility and creativity, identify improvements to existing practices, and effectively adapt to change
- Ability to ensure confidentiality and privacy on all external communications
- Ability to work independently with minimal supervision and as a member of a team

#### DESIRABLE QUALIFICATIONS

- Master's degree in Finance, Business, Information Technology, or a related field
- Thorough knowledge of managed care, industry specific terms, payment methods, and revenue cycle
- Working knowledge of Medicaid/Medi-Cal, entitlement programs, and related regulations
- Working knowledge of provider analytics
- Working knowledge of the ETL data integration process
- Working knowledge of statistical software, such as SAS/R/Python, and modeling techniques
- Working knowledge of Current Procedural Terminology (CPT), Resource-Based Relative Value Scale (RBRVS), and International Classification of Diseases (ICD) codes
- Some knowledge of Medicaid and commercial risk adjustment models

#### 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
- Ability to travel to different locations in the course of work

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*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.*