

CORPORATE DIRECTOR OF MDS, DOCUMENTATION AND MEDICARE

GENERAL PURPOSE:

Oversee the facility development, completion of the resident assessment process, Medicare coverage and documentation in accordance with the requirement of the Federal and state regulations as well as Company policy and procedures.

This position is a member of the Reliable Health Care Management Corporate Team providing the expertise, guidance, advocacy, training and information to our facilities, our facility staff and our goal being to ensure appropriate services delivered to our residents.

QUALIFICATIONS:

1. Must be a active licensed Registered Nurse in the State of Georgia . BSN and AANAC Certification strongly preferred but not required
2. Excellent leadership skills and problem solving ability
3. Must have strong knowledge of the RAI/MDS process, Medicare, PPS, case mix, therapy utilization and state reimbursement systems.
4. Minimum of five years of clinical experience with long term care nursing providers
5. Must be able to communicate verbally in a positive and professional manner with a positive caring attitude
6. Must possess strong leadership and management talent, analytical, organizational skills with ability to train.
7. Computer skills: Knowledge of MDS software, Excell, Power Point, Word proficiency
8. Must have ability to adapt to new situations, identify and prioritize MDS issues and be a self starter.
9. Must be flexible and able to travel to the extent required
10. Prior experience with electronic medical records is a plus

ESSENTIAL JOB FUNCTIONS

The primary function is to provide leadership in the MDS/RAI process to Reliable Health Care facilities MDS Coordinators and corporate staff. Work in conjunction with the Corporate Clinical Director, Clinical Reimbursement team to evaluate education needs within the facilities to improve MDS/RAI process and accuracy. Monitor Regulatory compliance through the Quality Validation Process, assist the facility Management Team in providing facilities with consultation, assessment training, survey and crisis management and identify strengths and weakness within the facilities clinical operations.

Review clinical record documentation to determine appropriate MDS coding and provide training within facility as required. Review documentation for compliance with corporate protocols and standard skilled service that meet Medicare's requirements.

Provide support for facility personnel to assist them in determining appropriate coverage, documentation, accurate assessment, timely transmissions and maximum utilization.

To assist in the improvement of supportive documentation, reimbursement and accuracy as it relates to the MDS/RAI process and Medicare coverage.

Provide consistence in expectations and knowledge (related to the RAI/PPS process) throughout the corporation and facilities.

Provide assistance in case of a vacancy or caseload increase within the facilities. Creating and maintaining a partnership with the Interdisciplinary team (Administrator, MDS Coordinator, Therapy dept, etc) in each facility.

Follow up with plans of correction; Assist facilities with the development and implantation of corrective action plans to address issues identified during clinical reviews, including state and federal surveys in conjunction with the Corporate Clinical Director and facility management staff.

Work collaboratively with the facilities to ensure that all new MDS Coordinators are knowledgeable of the RAI process and receive all the appropriate training.

Must stay abreast of MDS process, Medicare, Regulatory guidelines