

Job Description/Performance Evaluation

EMPLOYEE NAME: EMPLOYEE# XXXXX

◆ SECTION I: JOB IDENTIFICATION

Job Title: EVP Revenue Cycle XXXXX Classification:
Report to: EVP CFO/COO Job Code
Department Name: Admin/Finance Dept/CC#: XXXX
Section Name: Approval Date:
Salary Grade: x Exempt Non-Exempt

◆ SECTION II: SUMMARY OF JOB FUNCTION

The Revenue Cycle Vice President oversees multiple activities that improve hospital and physician revenue cycle operations and that favorably impact accounts receivable, cash acceleration and net revenue. This position is accountable for the success of the front-end revenue cycle processes and controls relating to scheduling, registration, charge capture, upfront collections, DNFB, Bill Holds and root cause analysis/correction of front-end billing errors/claim rejections/denials. Further responsibilities include participating in CHE revenue management teams, overseeing revenue cycle projects and their associated ROI, and acting as a single-point-of-contact for physician billing vendor(s) and the CHE NJ CBO. The EVP Revenue Cycle reports to the EVP CFO/COO.

◆ SECTION III: JOB QUALIFICATIONS

EDUCATION/TRAINING/CERTIFICATION/LICENSURE: This position requires a Bachelor's degree in business or health care field and seven (7) or more years of Hospital Revenue Cycle Experience or Revenue Cycle Consulting Experience. A Master's Degree is preferred

SPECIAL EQUIPMENT/SKILLS: Needs excellent interpersonal skills with the ability to interact with all levels of staff, management and administration.

WORK ENVIRONMENT AND HAZARDS:

WORK CONTACT GROUP:

SPECIAL PHYSICAL DEMANDS:

SUPERVISED BY: EVP CFO/COO

SUPERVISES: Director Revenue, Director Patient Access, Director HIM, Manager clinical Documentation Improvement, Manager Ambulance Transportation

◆ SECTION III: JOB QUALIFICATIONS – CONT'D

POPULATION SERVED:

Demonstrates the knowledge and skills necessary to provide care appropriate to the age of the patients served in the department.

Check all areas of competency that apply.

Infancy (birth – 1 year) _____ Adolescent (12 – 18years) _____ Oldest Adult (>80) _____

Toddler (1 – 3 years) _____ Young Adult (18 – 30 years) _____

Pre-School (3 – 6 years) _____ Middle Adult (30 – 60 years) _____

School Age (6 – 12 years) _____ Older Adult (60 – 80 years) _____

Demonstrates knowledge of the principles of growth and development over the life span.

◆ SECTION IV: APPROVALS

The above statements are intended to describe the general nature and level of work being performed by employees assigned to this job. They are not intended to be an exhaustive list of all responsibilities, duties and skills required of personnel so assigned.

PREPARED BY:

__ EVP Revenue Cycle _____ XX/13 _____
Name Title Date

DEPARTMENT HEAD:

__ EVP CFO/COO _____ XX/13 _____
Name Title Date

HUMAN RESOURCES REPRESENTATIVE:

Name Title Date

SUPERVISORY EMPLOYEE PERFORMANCE EVALUATION

Job Title: EVP Revenue Cycle

Evaluation Completed on: _____ Evaluation Period: From 2012__ to __2013__

Evaluation Interval: (check one) _____ Initial/Introductory ___x___ Annual _____ Re-evaluation

Employee Information (Complete this section only if label is missing or information needs updating)

Employee Name: _____ Employee # 1040292_____ Date of Hire _____

Position Title: EVP Revenue Cycle_____ Date of Class _____

Department: _Admin/Finance_____ Cost Center __4263_____

Introduction:

1. Review criteria standards from job description on this form. Appraise employee’s performance as measured against these standards through observation, test and or verbalization methods.
2. Assess the employee’s performance as measured by the criteria provided and place the number indication the performance rating in the column provided an complaints registered.
3. **Comments and an action plan must be made on rating levels for each criterion rated as needed improvement (2) or does not meet standard (1). Exemplary performance warranting documentation should be noted on the professional development page of this document as a specific contribution.**
4. **Calculating the score:** Sum the rating levels for each criteria and, Divide the total by the total number of criteria assessed. This will equal the average score for that section. This summary page will summarize the sum total for all sections.
5. **Signatures:** The appraisal form should be signed by the supervisor/manager performing the evaluation, the employee and the next level manager.
6. Provide the employee number(s) of the supervisor(s)/manager(s) who performed the evaluation in the signature section.

NOTE: Some facilities consider the self-rating by the employee being evaluated as a voluntary rather than mandatory component of the annual evaluation. Please follow your facility specific policy keeping in mind that an “employee self-evaluation” is recommended practice. If an employee is not completing a self-evaluation, place an “N/A” in the spaces under self-rating.

Rate each criteria object according to the following rating values:

Rating Values	
5	Performance and quality of work consistently exceed expectations.
4	Performance and quality of work above expectations.
3	Performance and quality of work meets expectations.
2	Performance and quality of work needs improvement.
1	Performance and quality of work do not meet expectations.

Section: 1 Job-Specific Criteria –

Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet

Leadership Competency Standards:	Self	Supervisor	Final	Complaint Received		Compliment Received		Action Plan Time Frame
				Yes	No	Yes	No	
1. RCM – ensures timely submission of hospital claims to CBO for billing								
2. RCM – ensures CDM is updated regularly consistent with internal policies and controls and is compliant with Federal Regulations								
3. RCM – Maintain percent of clean claims at acceptable levels								
4. RCM – maintain bill holds at acceptable levels based on site and system targets								
5. RCM – maintain DNFB at acceptable levels based on site and system targets								
6. RCM – maintain point of services collections at acceptable levels based on site and system targets								
7. RCM – monitor charge capture to reduce late charges and improve rate of clean claims								
8. RCM – chair multidisciplinary Revenue Cycle Committee.								
9. Med Rec – Monitor physician delinquencies and respond as needed								
10. Med Rec – monitor coding quality								
11. Med Rec – ensure ICD-10 readiness.								
12. Phys Billing – Oversee implementation of ambulatory EMR and billing systems								
13. Regulatory – monitor RCM compliance with Corporate Integrity Agreement requirements								
14. Regulatory – coordinate and respond to OIG OAS on-site audit								
15. Regulatory – Respond to requests for data and analysis from Legal and Compliance departments.								
16. Regulatory – ensure timely billing of Medicare claims to maintain PIP status								
17. Regulatory – develop process to respond to NJ Medicaid pre-pay audit requirement for re-delegation								
18. Admitting – ensure patient and physician satisfaction at highest levels								
19. Admitting – ensure accuracy of admission data								
20. Admitting – ensure proper bed management and patient throughput								
21. Admitting – Oversee Medicaid and Charity Care screening process								
22. CDI – Reorganize and reprioritize CDI program								

23. CDI – provide ICD-10 education to providers								
24. Mgd Care – provide insight and support during managed care negotiations								
25. Mgd Care – negotiate contracts on behalf of SMMC								
26. Mgd Care – Actively participate as a member of the HealthFirst board of directors.								
27. Denials – minimize administrative and clinical write-offs								
28. Denials – manage third party appeals vendor(s)								
29. Denials – improve payor relations to reduce denials and write-offs								
30. Ambulance Trans – manage outside vendor to ensure timely transportation of patients to and from SMMC								
31. RAC – monitor RAC activity and report RAC data to AHA timely								
32. Other - Monitors monthly expenditures of labor distribution reports to identify variance and ensure adherence to budgeting constraints.								
33. Other – compile and provide data for year 1 EH Meaningful Use Medicaid attestation and coordinate related validation audit								
34. Other – apply for out of state Medicaid provider status								
35. Other – additional projects as needed								

Section 1– Sum Final Rating Value: _____	Number of Standards: <u> 35 </u>
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Section: 2 Key Component: Unit/Department-Specific Competency Standards – Not Applicable

Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet
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Section: 3 Key Component: Management/Supervisory Competency Standards

Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet

Leadership Competency Standards:	Rating			Complaint Received		Compliment Received		Action Plan Time Frame
	Self	Supervisor	Final	Yes	No	Yes	No	
Planning/Execution of Plans/CQI								
1. Able to formulate and execute plans and sustain gains. Obtain positive results.								
2. Has met the annual performance goals established for the department/division; obtained results expected, e.g., service and productivity ,targets								
3. Knows how to obtain resources and support for initiatives, decisions, and strategies.								
4. Identifies key areas for continuous performance improvement utilizing all available mechanisms, shows and sustains improvement gains.								
Business/Financial Acumen								
5. Read, understands and draws accurate conclusions from financial and numerical data								
6. Applies financial principles and practices to the preparation and management of a budget								
7. Able to see the “big picture” and his/her contribution to it.								
People Management								
8. Establishes clear and specific performance standards and expectations for staff members.								
9. Follows through on requests and inquires from staff members and responds to them in a timely manner.								
10. Is visible and accessible to staff, management, physicians, and patients. Conducts frequent staff meetings.								
11. Applies policies and procedures consistently for all staff members.								
12. Conducts staff performance appraisals on time in accordance with policy timeframe.								
Resource Management								
13. Effectively allocates and schedules resources.								
14. Able to project and appropriately staff the unit/department to effectively function to demand								
15. Utilizes resources, both labor and non-labor to maximize efficiency and quality.								

Section 3– Sum Final Rating Value: _____

Number of Standards: 15

Section: 4 Key Component: Attendance and Reliability Standards								
Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet								
Competency Standards:	Rating			Complaint Received		Compliment Received		Action Plan Time Frame
	Self	Supervisor	Final					
				Yes	No	Yes	No	
1. ATTENDANCE: <u>Total Hours</u> <u>Rating</u> 0 – 7.5 5 15.0 – 22.5 4 30.0 – 37.5 3 45.0 – 52.5 2 60.0 or more 1								
2. PUNCTUALITY: <u>Total Occurrences</u> <u>Rating</u> 0 – 3 5 4 – 6 4 7 – 10 3 11 – 14 2 15 or more 1								
3. Gives proper notification for absence or tardiness. As per policy								
Sum Final Rating Values – Attendance Reliability								

Section: 5 Key Component: Universal Competency Standards								
Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet								
Competency Standards:	Rating			Complaint Received		Compliment Received		Action Plan Time Frame
	Self	Supervisor	Final					
				Yes	No	Yes	No	
PATIENT SATISFACTION / CUSTOMER SERVICE								
1. Promotes a compassionate and supportive environment. Demonstrates prompt and consistent service.								
2. Provides for the confidential treatment of all communications and records and the proper management of staff and/or patient information.								
3. Incorporates patient's rights into all aspect of job performance								
Sum Final Rating Values – Patient Satisfaction / Customer Service								

Section: 5 Key Component: Universal Competency Standards (cont'd)

Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet

PROFESSIONALISM AND COMMUNICATIONS								
Competency Standards:	Rating			Complaint Received		Compliment Received		Action Plan Time Frame
	Self	Supervisor	Final	Yes	No	Yes	No	
4. Listen and explores information from staff, patients, family and visitors before expressing an opinion or drawing conclusions								
5. Participates in meetings (speaks opinions, respects differences, listens carefully, stays on topic, works toward realistic compromises).								
6. Professionally addresses others (co-workers and internal/external customers), e.g., smiles, handshake, eye contact, voice, posture, grammar, grooming and dress, including I.D. badge.								
<i>Sum Final Rating Values – Prof & Comm.</i>								
TEAMWORK								
7. Supports teamwork when appropriate by researching and sharing information, cooperatively solving problems, and helping out when time permits.								
8. Demonstrates ability to work with others effectively within and outside the department. Participates in activities, committees, projects and on teams, and department staff meetings.								
<i>Sum Final Rating Values - Teamwork</i>								
QUALITY/PERFORMANCE IMPROVEMENT								
9. Contributes to improving quality services and productivity (takes the initiative to continually evaluate one's work, report problems, suggest solutions, and try new ideas). Utilizes principles of continuous quality improvement.								
10. Takes an active role in improving Patient Satisfaction and other customer survey scores and improvement initiatives.								
<i>Sum Final Rating Values – Q/PI</i>								

Section: 5 Key Component: Universal Competency Standards (cont'd)

Rating Value Key: (5) Exceeds (4) Above (3) Meets (2) Needs Improvement (1) Does Not Meet

WORK HABITS								
Competency Standards:	Rating			Complaint Received		Compliment Received		Action Plan Time Frame
	Self	Supervisor	Final	Yes	No	Yes	No	
11. Selects priorities and organizes work and time to meet them.								
12. When delegating or accepting a task, clarifies the instructions, schedule, resources, and supervisory support before proceeding. Seeks guidance and direction as appropriate for the successful completion of job responsibilities.								
13. Helps people anticipate delays or changes by keeping them informed of progress.								
14. Arrives at conclusion and decisions that are timely and consistent with department.								
15. Supports cost containment through efficient use of equipment, supplies and other pertinent resources.								
16. Accepts and profits from constructive criticism								
17. Adheres to both organizational and departmental policies and procedures.								
Sum Final Rating Values – Work Habits								
JOB AWARENESS/PROFESSIONAL GROWTH								
18. Reviews posted changes, programs and processes, i.e., advanced technology, new equipment, changes in policies and procedures and minutes of staff meetings. Signs off and acknowledges review. Participates in ongoing education and additional certifications as appropriate.								
19. Attends 80% of department and scheduled organizational meetings.								
20. Understands the business and how he/she impacts the overall operation & success of the organization								
Sum Final Rating Values – Job Awareness/Growth								

Check the appropriate box. Place an "N/A" in any box which is not applicable							
Competency Standards:	Met	Not Met	Complaint Received		Compliment Received		Action Plan Time Frame
			Yes	No	Yes	No	
1. Recognizes and responds to safety responsibilities, e.g., fire drills, disaster drills, etc							
2. Demonstrates knowledge of codes.							
3. Documents staff/patient incidents and notifies individuals of events.							
4. Utilizes appropriate infection control practices, such as hand washing, glove disposal, etc.							
5. Identifies and reports potential infection-prone situations. Adheres to isolation protocols.							
6. Demonstrates correct operation of equipment and understands rationale for use.							
7. Demonstrates ability to troubleshoot equipment when difficulties are experienced, reports malfunctioning/broken equipment and removes from service.							
8. Responds appropriately to emergency situations							
9. Utilizes & adheres to proper precautions with hazardous materials and proper waste disposal.							
10. Maintain proper body mechanics in the performance of job duties.							

Check the appropriate box. Place an "N/A" in any box which is not applicable							
Adherence to Compliance Guidelines:	Met	Not Met	Complaint Received		Compliment Received		Action Plan Time Frame
			Yes	No	Yes	No	
1. Observes all applicable federal, state and local laws and regulations							
2. Observes all Saint Michael's Medical Center and applicable subsidiary policies and procedures including Code of Conduct.							
3. Observes all Saint Michael's Medical Center Corporate Compliance policies by reporting any concerns about compliance or business practices to his or her immediate supervisor, appropriate management, Corporate Compliance Office or Compliance Hotline at 1-877-707-SMMC (1-877-707-7662)							
4. Participates in mandatory compliance related education							
5. Where applicable, participates in development an implementation of compliance work plan applicable to specific area of responsibility							
6. Where applicable promotes and adheres to relevant elements of Saint Michael's Medical Center compliance program							
7. Where applicable, instructs department colleagues regarding compliance and maintains policies and procedures reasonably necessary to provide for compliance with applicable laws and regulations							

5 Exceeds Expectations 5.00 – 4.46	4 Above Expectations 4.45 – 3.46	3 Meets Expectations 3.45 – 2.80	2 Needs Improvement 2.79 – 1.90	1 Does not meet expectations 1.89 & Below
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OVERALL (Check one)

	Performance and quality of work consistently exceeds expectations.
	Performance and quality of work above expectations.
	Performance and quality of work meets expectations.
	Performance and quality of work needs improvement.
	Performance and quality of work do not meet expectations.

Note: In cases in which the employee receives an overall rating of “needs improvement” or below, a reevaluation must be conducted within 30 days of the review date. Where applicable, clinical duties must be restricted until a minimum rating of “meets expectations” is achieved.

Reevaluation date scheduled for: 2014

Signature of the Evaluator: _____

Date: _____

Signature of the Employee: _____

Date: _____

Discussed with Employee on: _____

Date: _____

Signature of Next Level Manager: _____

Date: _____

Received in Human Resources on: _____

Date: _____

Employee Name: _____

Date: _____

PROFESSIONAL DEVELOPMENT

The following questions should be completed by the associate and discussed with the supervisor during the performance review. Please summarize discussions and plans of action as appropriate.

EMPLOYEE COMPLETES

- 1. Can you recommend any changes, which would help you, do your job? If yes, please specify:

- 2. Do you possess skills and aptitudes, which are not fully utilized, in your present position? If yes, please specify:

- 3. Do you need any training and development to do a better job in your current position? If yes, please specify.

- 4. My job description has been reviewed with me and is current:
() Yes () No, if no, please update job description and attach a copy to this evaluation
- 5. Goals:

SUPERVISOR COMPLETES

- 1. Comment on specific contributions the employee has made.

- 2. Comment on specific areas where improvement is needed (include time frame for completion).

- 3. Goals Jointly Formulated by Supervisor & Employee (including time frame for completion):

Employee Signature _____ Date _____ VP's Signature _____ Date _____