



Compliance Auditor III

Job Location: Rancho Cucamonga, CA – Remote Options
Full Time

JOB SUMMARY:

The Compliance Auditor III is responsible to lead and conduct key activities of the IEHP Compliance Audit Program. The Compliance Auditor III will oversee compliance auditing and monitoring initiatives to assess and identify compliance risks with Federal and State regulatory and contractual requirements. The Compliance Auditor III is responsible for conducting compliance audits, reporting results, identifying risks, establishing compliance monitoring processes, and assessing regulatory compliance of Health Plan operations.

RESPONSIBILITIES:

- Independently conducts complex audits and monitoring activities of internal health plan departments and external Plan delegates to ensure compliance with Medi-Cal and Medicare regulatory and contractual requirements, and operational plan requirements.
- Leads and reviews audits of the Plan's delegates to ensure compliance with regulatory, contractual requirements, and HIPAA Privacy Standards.
- Contributes the development, implementation, and maintenance of the Compliance Audit Program to ensure key performance indicators are met and compliance risks are proactively identified.
- Contributes to and supports comprehensive risk assessments, provides recommendations on how risks may be addressed, develops IEHP's Compliance Risk Universe, Heat Map, and maintains the Compliance Risk Register and Audit Plan.
- Serves as a subject matter expert in compliance auditing, risk assessment, risk mitigation planning, and other compliance and regulatory related matters.
- Works closely with Compliance and Regulatory Department staff and IEHP Leadership on strategic projects, including providing recommendations, while also managing routine activities.
- Conducts complex compliance audits, including development, scoping, implementation, monitoring, and evaluation of operational business units within the health plan, and ensures appropriate communication of outcomes and findings.
- Writes and reviews Audit Programs, audit workpapers and audit reports of other Auditors based on audit results and ensures accurate and quality of audit reporting.
- Develop and/or modifies tools to perform compliance audits and reporting templates for communicating compliance audit results.
- Facilitates compliance related data aggregation and the analysis of compliance related data, indicators, and initiatives to ensure the effectiveness of IEHP's Compliance Program.
- Validates the effective implementation of corrective action plans (CAPs) from internal departments & delegates to ensure appropriate completion and make necessary recommendations as needed for compliance.
- Guides the work performed by Compliance Auditor I and II positions.
- Conducts Entrance and Exit conferences.

QUALIFICATIONS:

- Minimum of six (6) years in a managed care operations, working with one or more of the following areas: Utilization Management, Claims, Pharmacy Operations, Compliance, FDR oversight activities, Quality Management, Care Management, and/or Grievances and Appeals.
- Demonstrated experience, at a professional level, in an audit role and in supporting compliance audit program initiatives.
- Experience conducting compliance audits of internal health plan operations and delegated entities.
- Demonstrates ability to think and work effectively under pressure and accurately prioritize and complete multiple assignments within established timeframes.
- Three (3) years of experience in leading audits.
- Minimum of four (4) or more years in a managed care operations, working with one or more of the following areas: Utilization Management, Claims, Pharmacy Operations, Compliance, FDR oversight activities, Quality Management, Care Management, and/or Grievances and Appeals.

- Bachelor's degree in a related field from an accredited institution required.
- Master's degree in a related field from an accredited institution preferred.
- Certified Internal Auditor (CIA), Certified Health Care Compliance (CHC), Certified Healthcare Auditor (CHA), CHIAP (Certified Healthcare Internal Audit Professional). Must become certified within 12 months of initial date of hire if not certified upon hire.
- Demonstrated understanding of audit standards and requirements, statistical data interpretation and applicability, risk assessment and control environments, audit theory and processes, and of the professional practice standards of internal auditing.
- Demonstrated current knowledge of business ethics and compliance risks and the knowledge to assist with management of those risks in a dynamic health care environment.
- Expert knowledge of compliance program principles and requirements.
- Advanced knowledge of CMS Program Audit Protocols, DHCS Technical Assistance Guides, and DMHC Technical Assistance Guides.
- Advanced knowledge of regulatory research and regulations that apply to Medi-Cal and Medicare Managed Care Health Plans.
- Possess strong written and verbal communication skills, including a strong business writing aptitude.
- Possess strong problem solving and creative thinking skills and the ability to reprioritize workload as needed.
- Must be detail oriented, self-directed, and work with minimal supervision, both independently and in teams.
- Requires well developed skills in problem identification, analysis, resolution, organization, prioritization, timeliness, and attention to detail.
- Strong presentation and communication skills.
- Effective in a consulting role with the ability to become a trusted advisor.
- Ability to maintain excellent interpersonal relationships within the department and at all levels of the organization.
- Ability to organize and present data and results into well-organized communications and reports.
- Must participate in the IEHP Team Culture, by demonstrating support of the Culture by developing professional and effective working relationships that include elements of respect and cooperation with Team Members, Members and associates outside of our organization.

FOR MORE INFORMATION/TO APPLY:

<https://careers.iehp.org/>

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