



Position Description

Employee:	Vacant
Position title:	Audit Manager
Location:	Head Office: 60 - 68 Moorabool Street, Geelong
Grade:	Manager
Organisation:	Reports to the Benefits Manager
Purpose:	<p>The purpose of this role is to ensure that GMHBA pay no more for services provided to its Members than it is contractually obliged to pay, and to assist GMHBA to ensure that health Provider contracting achieves efficient and effective outcomes.</p> <p>The Audit Manager has an important leadership role within the business to ensure the Audit Team is appropriately structured, resourced and trained to achieve this purpose.</p>
Staff:	<ul style="list-style-type: none">• Hospital Claims Auditors• Medical and Ancillary Claims Auditors• Ancillary Audit Coordinators• Audit Assistant
Key Relationships:	<ul style="list-style-type: none">• Provider Relations Manager• Contracts Manager• Hospital and Health Program Coordinator• Benefits Program Coordinator• Operations teams including Claims Management• Finance Team• AHSA• Health Providers and Health Provider representative groups• PHA Committee's
Authorising Officer:	Executive Manager Human Resources
Version Number:	1.0
Date Approved:	June 2017

Principle Accountabilities

This role takes responsibility for the following:

Audit Function

- Ensure that policies, procedures, operating guidelines and an audit schedule are in place to assist in reducing claims leakage and ensure a standard approach to clinical claims coding and audit is followed.
- Ensure that all audit functions conducted by the Audit Team are compliant with Australian Coding Standards and the policy requirements of the business.
- Ensure that an appropriate data base and report function is in place to enable interrogation of claims data to check validity and identify Provider outlier claims.
- Create an audit schedule which is reviewed on a rolling twelve month basis and identifies areas in which benefits leakage may occur in provider servicing, recoveries, fraud and electronic claiming.
- Report to the Benefits Manager on a monthly basis the aggregated audit outcomes and trends and make recommendations from the analysis of claims for future contracting.
- Undertake the audit function.
- Coordinate and participate in hospital based audits.
- Set an identified savings target for the audit team on an annual basis which is based on retrospective and forecast benefits data, being cognisant of the impact of provider behaviour on achieving this target.
- Ensure that the Audit Team maintains good relationships with Providers through effective and efficient communication, taking into account the technicalities of the work involved.
- Maintain an Improvement Plan for the Audit Team which drives continuous improvement and the automation of processes to enhance productivity.
- Provide education and support to relevant claims teams to ensure that assessing skills are aligned to audit policy and procedures.
- Represent GMHBA at the PHA Fraud and Security Committee and other relevant committee's as appropriate.
- Provide subject matter expertise, data and information related to the audit function and case mix benefit analysis to senior management and other areas of the business as required.
- Actively participate in and contribute to the strategies and initiatives of the business.
- Complete the quarterly Board Audit and Compliance Committee report.
- Ensure compliance with Company Policies and Standards.
- Undertake other duties as assigned by the Benefits Manager.

People Management

- Demonstrate effective leadership skills in line with GMHBA Vision and Values and coach team members to live these.
- Create and maintain a high performance team that achieves team targets by:
 - Monitoring and analysing staff performance aligned with individual KPIs
 - Providing formal and informal coaching to achieve quality and productivity standards through increased capability
 - Fostering open and ongoing communication
 - Recognising and rewarding excellence in effort, performance and behaviour.
- Manage career development of staff through ongoing performance reviews using GMHBA's Performance Management System.
- Manage and coach staff with performance/behavioural related issues in line with HR Policies & Procedures and GMHBA's Certified Agreement.
- Report on team activities against established key performance indicators.

Values & Behaviours

Can demonstrate the ability to 'live' the corporate values and behaviours and be part of the GMHBA Team!

Trust Build credibility through actions Demonstrate in others intentions and competencies	Succeed Be resourceful, adaptable and achieve quality results Be decisive
Contribute Collaborate and get involved Make a difference	Improve Be curious and look for innovation Have the courage to try something new
Enjoy Enjoy work Take pride in success	Serve Aim to make every customer experience memorable Make every effort to deliver excellence

Specific Job Competencies

Auditing

- Able to read and understand claims data, and medical records with the ability to determine where inconsistencies and/or outliers have occurred.

Teamwork and Collaboration

- Actively builds and fosters a friendly, harmonious and productive working atmosphere for all staff.
- Actively shares knowledge and experience with others.
- Leads by example. Models respect, helpfulness and cooperation.
- Builds a cohesive and collaborative team environment.
- Seeks out and creates opportunities for professional development for self and others.

Conceptual Thinking

- Understands situations or problems by identifying patterns or connections and addressing key issues.
- Sees the big picture in complex situations.
- Recognises when and how parts of an issue or situation affect individual and group performance.

Initiative

- Proactive in developing strategies and questioning practices and rules to create better ways to do things to add value.
- Offers suggestions for continuous improvement and encourages initiative in others.
- Demonstrates consideration of all aspects of a job in determining the best outcome for the customer (internal/external).
- Originates action to improve existing business conditions and processes in a timely manner.
- Uses appropriate methods to identify opportunities, implement solutions, and measure their impact and action further improvements to enhance efficiency.

Operational Decision Making

- Identifies and understands current issues, problems and opportunities.
- Compares data from different sources to draw conclusions.
- Develops alternative solutions and chooses the most effective course of action.
- Takes action that is consistent with available facts, constraints and probable consequences.
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Strategic Planning

- Obtains information and identifies key issues and relationships relevant to long-range goals or visions.
- Develops alternatives based on logical assumptions, facts, resources, constraints and organisational values.
- Implements a course of action to accomplish long-range goals or visions.
- Measures outcomes.

Essential Skills and Experiences

Communication (verbal and written)

- Clearly conveys and cascades information and ideas, through a variety of media, to individuals or groups in ways that engages the audience and helps them to understand and retain the message.
- Is consultative and seeks to personalise communication to meet internal/external customers' needs.
- Actively seeks and analyses feedback and responds in an appropriate manner.

Business Acumen

- Makes sound commercial decisions based on a long term view of Member needs, strategic direction, industry developments, political environment, commercial viability and other socio - economic factors.
- Understands PHI industry, corporate finance and reporting. Understands the relationship and implications of product, premium and claims calculations as relevant to the position.
- Demonstrates knowledge of sound business processes and practices through the delivery of effective outcomes and value adding initiatives.
- Demonstrates a sound understanding of contemporary Occupational Health and Safety standards, Equal Opportunity and other aspects of people management.

Educational Qualifications

- Bachelor of Health Information Management or equivalent (Mandatory)

Experiential Requirements

- Minimum of 5 year experience at a senior manager level in a private or public hospital or equivalent work situation in the Australian Health Industry, undertaking related working (Mandatory).
- Demonstrated knowledge and experience in clinical coding and casemix auditing at a tertiary hospital level (Mandatory).
- Demonstrated knowledge of casemix protocols and application of this knowledge in the audit function (Strongly preferred).
- Demonstrated knowledge of PHI funding and audit models (Strongly preferred).
- Demonstrated knowledge of Health Information System design and architecture (Strongly preferred).
- Project management or agile methodology experience (Strongly preferred).
- Effective time management, planning and organisational skills (Strongly preferred).
- Relevant computer technical skills applicable to coding and casemix (Strongly preferred).
- Demonstrated commitment to high quality outcomes (Mandatory).
- Ability to think analytically, logically and laterally (Strongly preferred).
- Ability to work alone and as a member of a team (Mandatory).

Key Performance Indicators (KPI's)

As agreed with the Benefits Manager upon commencement.