If you like to stay busy and immersed in cultural activities, then Washington, DC is the place to be! Museums, restaurants, great climate, green space and job opportunities are among the many positives of living in the Nation’s Capital. Not to mention the residents of the District of Columbia are highly educated and the region has some of the best schools in the country. Each day the District of Columbia continues to be ranked in the top 10 of thriving city indicators where you can live, work and play.

**The first screening of applicants will take place within ten (10) days of the posting of this vacancy announcement. The position is open for 45 days.**

**Introduction**

This position is located in the Department on Disability Services (DDS), Office of the Chief of Staff, DDS Operations Division, Medicaid Waiver Unit. The incumbent reports to the Operations Division Program Manager. The primary purpose of this position is to administer, plan, coordinate, develop, and implement a network of services defined by and implemented under the District’s Medicaid Home and Community Based Services Waiver program. The waiver program provides qualified residents of the District of Columbia with an alternative to institutional care.

**MAJOR DUTIES AND RESPONSIBILITIES**

- Works with the Department of Health Care Finance (DHCF) to ensure adherence to all Centers for Medicare and Medicaid Services (CMS) rules and regulations.
- Designates points of contact for billing and provider relations to coordinate an online provider authorization process for DDS waiver providers with DHCF.
- Identifies provider readiness and capability to submit claims electronically.
- Conducts in-house workshops and training on electronic claim submissions and provides staff for joint technical support during scheduled times or sessions. Ensures that funds are available to support electronic billing.
- Coordinates waiver services with DDS’s contracting unit to ensure that all expenditures covered by the waiver are correctly reflected in client budgets. Coordinates utilization reviews (e.g., the 372 report) with other units in DDS and with DHCF. Collaborates with DDS’s Quality Assurance and Performance Management Administration to ensure the delivery of quality Medicaid waiver services.
- Develops and implements the necessary infrastructure essential to the administration of waiver services.
Establishes and directs processes to oversee the allocation, monitoring, and reimbursement of funds for services identified in a person’s Individual Service Plan (ISP) and Plan of Care (POC). Oversees the timely preparation of service authorizations.

Directs the provision of technical assistance for Service Coordinators and service recipients. Directs the maintenance of service recipient’s records.

Develops monitoring reports for all waiver-related services and projections for long-term service needs. Analyzes the strengths and weaknesses of the waiver service delivery system.

Makes recommendations to improve various service delivery systems and initiates remedial activities to avoid and minimize delays or failures to achieve customer’s desired outcome.

Evaluates, existing policies, procedures, transmittals, and regulations and recommends revisions that improve quality of service, efficiency, effectiveness and compliance with governing regulatory requirements.

Oversees the design, implementation, evaluation, and the qualitative and quantitative analysis of continuous quality improvement and utilization review programs.

Works collaboratively with Department of Health Care Finance in periodic reviews. Oversees the conduct of multi-level audits, to ensure compliance with state and federal regulations and established standards of care.

Provides oral and/or written reports of findings relative to on-site reviews and inspections of care and data analysis to all providers, state, and federal agencies affected by the findings.

Plans, directs, and coordinates the Home and Community-Based Services (HCBS) Waiver program; keeps the Operations Division Program Manager and the Chief of Staff abreast of federal and local policy and procedures, rules, regulations or unusual complexities of the waiver program.

Works closely with the Department of Health (DOH), DHCF, CMS and other District agencies as well as other stakeholders.

Provides policy guidance and technical expertise in the development and implementation of policies and internal operating procedures to the Medical Waiver Unit, other administrations and divisions within DDS.

Manages personnel activities within the Medicaid Waiver Unit.

Provides supervision and oversight to assigned staff ensuring appropriate consideration for eligibility, Medicaid recertification, service identification, and availability of funding for approved services. The staff includes the following positions: Health Insurance Analyst, Medicaid Waiver Specialists, and program support assistant.

Meets regularly with staff to discuss program progress, share information, provide direction, and make assignments. Advises on changes in operating policy, and gains staff input. Conducts staff meetings on a regular basis.

Ensures development and necessary updating of position descriptions and performance standards. Rates employee performance and makes recommendations for incentive awards.
• Gives advice, counsel and instructions to individual employees on both work and administrative matters. Interviews candidates for vacant positions and makes recommendations for appointments, promotions, or reassignments involving these positions.
• Approves leave and resolves issues of leave usage of subordinates. Handles disciplinary problems.
• Reviews and approves payroll/overtime requests; evaluates subordinates’ activities, work performance, and conduct.
• Provides technical assistance and training to staff relative to program requirements, quality services and procedural implications that impact home and community-based programs.
• Develops training modules to maintain current awareness for staff, Service Coordinators and community-based providers.
• Performs other related duties as assigned.

**Collective Bargaining Unit**
This position is not in a collective bargaining unit. Management Supervisory Services AT-Will.

**Qualifications**
Applicant must have one (1) year of Specialized Experience at the grade 13 level. Five (5) years of related work experience that equipped the applicant with the particular knowledge, skills, and abilities to perform successfully the duties of the position, and that is typically in or related to operating a family services program.

**Examples of Specialized experience include:** 1) interpreting and applying rules and regulations implemented by the Centers for Medicare and Medicaid Services (CMS); 2) overseeing the work of subordinate employees and/or team members.

**Licensures, Certifications and other requirements**
N/A

**Education**
Bachelor’s degree in public policy, public or business administration, social work or a similar field. An equivalent combination of education and experience required.

*Education cannot be substituted for experience at this level.*

**Work Experience/Knowledge**
Expert knowledge and experience in the Medicaid Home and Community Based Services Waiver Program development and its operations.
Comprehensive knowledge of a wide range of qualitative and/or quantitative methods for the assessment and improvement of program effectiveness or the improvement of complex management processes and systems is required.

Thorough knowledge of budget formulation, execution, program development, and the management processes required to ensure financial resources are available to operate a family services organization.

Additional information

Once applications are submitted, applicants will not be able to change their responses to the online questions.

How You Will Be Evaluated

You will be evaluated for this job based on how well you meet the qualifications above.

Your application includes your resume, responses to the online questions, and required supporting documents. Please be sure that your resume includes detailed information to support your qualifications for this position; failure to provide sufficient evidence in your resume will result in a "not qualified" determination.