



ROLE

EMPLOYER: Epic Systems

TOTAL YEARS EXPERIENCE: 19

COMPANY SIZE: 10,000+

KEY RESPONSIBILITIES: Represents healthcare providers by designing, documenting, conducting and interpreting data analysis focusing on performance, quality, cost, utilization, and outcome initiatives.

MOTIVATIONS

1. Have expert-level proficiency in healthcare data and CMS programs to ensure the highest level of scoring and reimbursement for clients.
2. Create new models for my organization to streamline data submission across many providers.
3. Maintain trust with my clients and demonstrate value to ensure long-term service contracts, in addition to EHR licensing.

WEB SAVVY

low  high

CHALLENGES

- Highly technical questions that require *quick* escalation to a CMS specialist
- Need all CMS interactions in writing to create a legal paper trail, if needed to challenge scoring
- Submission errors that can lead to a targeted review and urgent need for data remediation

SELF-SERVICE PORTAL OPPORTUNITIES

- Live chat for advanced, technical issues
- Bookmarking articles, cases, and status reports
- Technical Knowledge Base (KB) articles with step-by-step instructions
- Appending cases with screenshots, documentation, and tagging by related cases

TOPICS OF INTEREST

Measures

Submission

Feedback

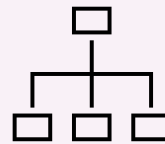
DAY IN THE LIFE OF



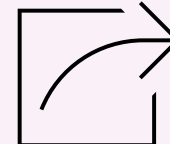
Research
Data
Standards



Conduct
Quant.
Studies



Model
Healthcare
Data



Submit
Healthcare
Data

I sometimes submit 10,000 medical records in a single day on behalf of many providers across multiple CMS programs.

