



Job Title: Data Processing & Compliance Manager – Medicaid/CHIP

Location: DMV area with hybrid work

Employment Type: Contract/Full-time

Company: Akela, LLC

About Akela

At Akela, we are a close-knit team of professionals working collaboratively to provide comprehensive solutions to our clients. We believe in the strength of partnership, drawing from our collective expertise to create value for employees, clients, and stakeholders alike. Our services are grounded in integrity, excellence, and an unwavering commitment to our clients' success.

Position Summary

Akela is seeking an experienced **Data Processing & Compliance Manager – Medicaid/CHIP** to provide technical leadership, subject matter expertise, and strategic support for claims processing reviews. This role will serve as a key liaison with the Project Director, CMS staff, and internal DP team members, guiding the review, research, and investigation of claims processing systems and processes.

The Data Processing & Compliance Manager will lead efforts to assess state compliance with federal and state regulations, payment policies, and program integrity requirements, while providing critical technical assistance and oversight throughout all phases of the review. The ideal candidate will bring deep expertise in Medicaid and CHIP (Children's Health Insurance Program) programs, strong leadership skills, and a proven track record in managing claims data operations in a regulatory environment.

Key Responsibilities

- Serve as the primary point of contact for the Project Director and CMS staff, providing technical assistance and subject matter expertise as required.
- Direct and oversee all data processing review activities, ensuring accuracy, compliance, and timely completion of deliverables.
- Provide technical direction, mentorship, and oversight to the DP team, including the DP Assistant Review Manager and DP Reviewers.
- Guide teams in reviewing, researching, and investigating claims processing systems and workflows, including MMIS and related state systems.
- Support teams in analyzing and interpreting managed care claims, third-party liability, Medicaid waiver programs, and provider enrollment data.
- Offer expert guidance in assessing state compliance with federal and state laws, regulations, policies, and procedures.
- Oversee the development and implementation of methodologies to review claims processing, payment systems, coding, billing, and compliance practices.
- Collaborate closely with cross-functional teams to identify areas for improvement and recommend strategies to enhance accuracy, compliance, and program integrity.

- Ensure proper management of electronic medical records and support the secure electronic transmission of sensitive data.
- Support reporting and presentations to CMS and other stakeholders, clearly communicating complex findings and recommendations.

Qualifications

- **Experience:** Minimum of 3 years in a supervisory or managerial role focused on medical claims or clinical data management.
- **Program Expertise:** Minimum of 5 years working with Medicaid and/or CHIP, including providing technical assistance across all aspects of program integrity.
- **Technical Knowledge:** Demonstrated expertise and experience with:
 - Managed care claims, third-party liability, Medicaid waiver programs, and provider enrollment
 - State claims processing systems (including MMIS), payment policies, payment systems, coding, billing, and compliance rules
 - Determining compliance with state and federal laws, policies, and regulations
- **Education:** Bachelor's degree
- **Travel:** Not anticipated. In the future, up to 50%
- **US Citizenship**
- **Medical Records:** Minimum of 5 years of experience with electronic medical records and electronic data transmission.
- **Certifications:** Registered Health Information Administrator (RHIA) certification or similar designation is highly desirable.
- **Communication:** Strong verbal and written communication skills with the ability to convey complex regulatory and technical requirements to diverse audiences.
- **Leadership:** Proven ability to lead teams, provide mentorship, and drive operational excellence in a data-driven environment.
- **Teamwork:** Demonstrated ability to work in a team-oriented environment and collaborate effectively with both internal and client teams.

Why Akela?

At Akela, we are more than just a professional services firm; we are a pack that supports and elevates each other. We offer a culture of continuous learning, personal growth, and shared success. Join us in our mission to solve complex problems for our clients, allowing them to focus on building a brighter future.



What We Offer

- Salary commensurate with experience, \$90,000 - \$125,000
- Medical, Dental, and Vision paid up to 100%
- 401k eligible on first day, up to 5% match
- Paid Time Off & Holidays
- Bonus Eligibility & Long-Term Incentives
- Professional Development Opportunities

We are dedicated to ensuring equity throughout the recruitment and employment process. We celebrate diversity and foster an inclusive environment where all employees are valued. Akela does not discriminate based on race, religion, color, national origin, gender identity, sexual orientation, age, marital status, veteran status, or disability. Our goal is to create a supportive space for asking questions, building connections, and advancing careers.