

## Director of Behavioral Health

Under the direction of the Population Health Officer, the Director of Behavioral Health is responsible for leading the clinical and administrative management of HPSM's Behavioral Health, programs across all applicable lines of business. HPSM promotes an integrated delivery system where behavioral health, traditional medical services, and social services are leveraged to effectively impact the wellness of our members.

Key to the success of this role will be HPSM's collaboration with the Behavioral Health and Recovery Services (BHRS) Division and other key agencies of the San Mateo County Health and Social Services System.

### Position overview

- In collaboration with thought and operations leaders across the organization and within Health Services, contribute to the ongoing development and integration of HPSM's Model of Care across both the care and service continuum. Act to promote member-centric programming and to achieve high levels of member satisfaction.
- Develop and implement key strategies to advance and integrate behavioral health in alignment with the enterprise mission/vision.
- Financial management of resources and key contracts to impact program contributions and clinical outcomes.
- Drive and review analyses of data to support development of cost-effective strategies to help HPSM achieve improved overall health outcomes through targeted behavioral health and substance use disorder, and SDOH service interventions.
- Management and oversight of key delegated relationships with BHRS and the BHT benefits administrator by monitoring the following:
  - Utilization management
  - Care coordination
  - Quality
  - Claims administration
  - Customer service
  - Network management
  - Compliance with Medicare and Medicaid regulations and contracts.
- Lead implementation of new Behavioral Health initiatives.
- In collaboration with the Population Health Officer, lead the behavioral health integration efforts with San Mateo County's BHRS leadership.
- Develop and promote additional relationships and partnerships within the community and behavioral health profession as needed.
- Direct and provide enhancements to business processes, policies, and infrastructure to improve operational efficiency.
- Accomplish staff results by communicating job expectations; planning, monitoring, and appraising job results; coaching, counseling, and implementing corrective action steps when necessary; developing, coordinating, and enforcing systems, policies, procedures, and productivity standards.
- Stay clinically current and up-to-date in Behavioral Health care and subject areas and serve as a liaison or subject matter expert with regulatory (DHCS, CMS, DMHC, etc) and accrediting agencies, and as a key expert voice representing HPSM's Model of Care and integration efforts with external stakeholders and entities.
- Maintain awareness and knowledge of governmental affairs, policies and legislations related to behavioral health, substance use disorders
- In conjunction with HPSM Compliance, oversee and ensure HPSM programs, delegated partners, and contracts stay current and meet regulatory compliance standards for CMS Medicare and state MediCal requirements as related to behavioral health services. Support internal and external audits.
- Assess and lead all behavioral health related clinical and service quality and continuous improvement programs, including but not limited to Medicare STARS, HEDIS, and NCQA health plan accreditation.
- Analyze new or updated regulations, laws and contract language and implement appropriate changes to internal policies, procedures and workflows.

### Requirements

These are the qualifications typically needed to succeed in this position. However, you don't need to meet every requirement to apply.

#### Education and experience

- Master's degree (or greater) in the behavioral health field of study, nursing, social work, or related human service field, and a clinical behavioral health license.

- Current license to practice without restriction.
- Minimum of five years level management experience in health care preferably leading and managing major clinical programs.
- At least four years clinical practice experience.

**Knowledge of:**

- Principles and operation of managed care, specifically related to health plan operations.
- Personal computers and proficiency in Microsoft Office Suite applications, including Outlook, Word, Excel, Access and PowerPoint.

**Ability to:**

- Work cooperatively with others and autonomously
- Effectively utilize clinical data, database management, data analysis and reporting
- Lead programs and processes through team facilitation, project management, and change management
- Work with physician/provider relationships in a leadership position
- Work as part of a team and support team decisions.
- Communicate effectively, both verbally and in writing.
- Adapt to changes in requirements/priorities for daily and specialized tasks

**Salary and benefits**

**The starting salary range** depends on the candidate's work experience.

**Excellent benefits package** includes:

- HPSM-paid premiums for employee's medical, dental and vision coverage (employee pays 10% of each dependent's premiums)
- Fully paid life, AD&D and LTD insurance
- Retirement plan (HPSM contributes equivalent of 10% of annual compensation)
- 12 paid holidays a year, 12 paid sick days a year and paid vacation starting at 16 days a year
- Tuition reimbursement plan
- Employee wellness program

**To apply, submit a resume to [careers@hpsm.org](mailto:careers@hpsm.org).**

Health Plan of San Mateo (HPSM) is a local County-funded nonprofit manages the health care for over 140,000 low-income people San Mateo County, including all its Medi-Cal eligible residents. HPSM is proud to be an Equal Opportunity Employer and an affirmative action employer. We are committed to equal employment opportunity regardless of race, color, ancestry, religion, sex, national origin, sexual orientation, age, citizenship, marital status, disability, gender identity or Veteran status.