

Gracelyn Khan

Healthcare Advocate, Risk Adjustment and Quality

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STRENGTHS

-  **Provider Partnership**
Built trust during onsite visits by connecting chart examples with daily workflows, giving practice teams guidance they could use immediately.
-  **Data Translation**
Turned provider reports into focused action plans, and became a go to resource when teams needed clear next steps.
-  **Practical Education**
Used real chart scenarios during coding sessions. Physicians and staff left with clearer documentation habits and stronger confidence.
-  **Workflow Problem Solving**
When EMR barriers slowed documentation, worked with practice staff on workable changes that protected clinical flow.
-  **Independent Execution**
Managed travel, visits, follow ups, and deadlines across multiple accounts, earning confidence through steady completion.

SKILLS

<u>Risk Adjustment</u>	<u>CMS HCC</u>
<u>Medicare Advantage</u>	
<u>HEDIS and Stars</u>	<u>Gap Closure</u>
<u>ICD 10</u>	<u>CPT II</u>
<u>Clinical Documentation</u>	
<u>Provider Education</u>	<u>EMR Systems</u>
<u>Chart Analysis</u>	<u>Billing Claims</u>
<u>Territory Management</u>	
<u>Project Management</u>	
<u>Advanced Excel</u>	

SUMMARY

Healthcare Advocate with five years of experience supporting provider engagement, **risk adjustment**, quality improvement, and clinical documentation across physician practices and managed care environments. Translates CMS HCC methodology, ICD 10, CPT II, Medicare Advantage, HEDIS and Stars requirements into practical education for physicians, coders, facility teams, and office staff. Uses provider performance, claims, encounter, and clinical data to shape focused action plans for RAF improvement, **coding specificity**, **documentation quality**, and **care gap closure**. CPC and CRC certified, with advanced Excel capability, hands on EMR experience, chart review expertise, prospective program coordination, and territory management experience. Builds trusted relationships through clear communication and useful follow through, helping practices resolve workflow barriers and represent member health status accurately across regulated healthcare programs.

EXPERIENCE

Senior Provider Performance Specialist

Southern Care Analytics 📅 January 2024 - Present 📍 Montgomery, Alabama

Leads a multi county provider portfolio for Medicare Advantage risk adjustment and quality initiatives. Converts **performance data** into practical strategies, coordinates **prospective programs**, and supports physicians, coders, and practice leaders through onsite consultation and follow up.

- Translated provider data into RAF improvement plans, coding actions, and care gap priorities.
- Used Excel **pivot tables** and lookup functions to prioritize practices for focused education.
- Delivered CMS HCC, **ICD 10**, and **CPT II** sessions using practical chart examples.
- Coordinated prospective assessments, **chart collection**, outreach, issue resolution, and milestone follow up.
- Resolved EMR workflow barriers with practice teams, improving documentation capture without disrupting care.
- Supported physicians and office leaders through recurring onsite consultations across a multi county territory.

Provider Quality Consultant

Magnolia Managed Care Partners 📅 July 2021 - December 2023 📍 Birmingham, Alabama

Supported physician groups, clinics, and hospital affiliated practices participating in **Medicare Advantage** quality and risk programs. Built consultative relationships, interpreted performance reports, and converted findings into education, chart readiness actions, and measurable follow up.

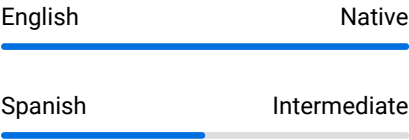
- Reviewed performance reports to identify **HEDIS** and **Stars** opportunities and unresolved care gaps.
- Facilitated CMS HCC education for physicians, coders, managers, and **office staff**.
- Prepared ICD 10 reference guides connecting documentation specificity with compliant reimbursement support.
- Reconciled chart retrieval needs, claims questions, and **EMR** issues with practice managers.
- Managed onsite visits, virtual follow ups, deliverables, and deadlines across a **travel** intensive territory.
- Created Excel analyses, Word guides, and PowerPoint presentations for provider improvement meetings.

Clinical Documentation Coordinator

Riverbend Family Clinic 📅 October 2020 - June 2021 📍 Tuscaloosa, Alabama

Supported documentation and coding workflows within a multispecialty **clinic**. Used medical terminology, EMR records, billing knowledge, and organized tracking tools to prepare charts, clarify missing information, and support consistent **quality** review.

LANGUAGES



MY CAREER



- Senior Provider Performance Specialist at Southern Care Analytics (2.8 Years)
- Provider Quality Consultant at Magnolia Managed Care Partners (2.4 Years)
- Clinical Documentation Coordinator at Riverbend Family Clinic (8 Months)

- Reviewed records for completeness before claim submission and escalated clarification questions appropriately.
- Used EMR workflows to locate encounters, track corrections, and prepare records for review.
- Applied **medical terminology** and **ICD 10** concepts when checking documentation consistency.
- Coordinated nurses, providers, and **billing** staff around missing or conflicting chart information.
- Maintained Excel trackers that gave supervisors clear visibility into outstanding documentation priorities.
- Created staff job aids covering **chart collection** steps and recurring documentation issues.

PROJECTS

Prospective Care Gap Outreach Program 📅 2024

Built a practical outreach workflow connecting provider performance data, chart collection, EMR review, and follow up. Clear priorities helped practice teams focus on clinically supported documentation and unresolved quality opportunities.

Provider Coding Education Toolkit 📅 2023

Created reference materials for physicians, coders, and office staff covering CMS HCC, ICD 10, CPT II, documentation specificity, and compliant chart support. Simple examples made difficult conversations easier.

LEADERSHIP & AWARDS

- Recognized by provider teams for clear CMS HCC education and practical documentation guidance.
- Selected for trusted territory ownership across complex provider accounts and recurring field programs.
- Earned internal recognition for dependable follow up across chart collection and quality initiatives.

EDUCATION

Bachelor of Science in Health Services Administration

University of Alabama at Birmingham 🎓 GPA: 0 📅 2020 📍 Birmingham, Alabama

Coursework: *Healthcare administration, medical terminology, quality improvement, healthcare finance*

CERTIFICATIONS

- Certified Professional Coder, AAPC 📅 2022
- Certified Risk Adjustment Coder, AAPC 📅 2023

TECHNICAL SKILLS

- **Risk Adjustment:** CMS HCC, RAF performance, Medicare Advantage
- **Quality Programs:** HEDIS, Stars, care gap closure
- **Coding Standards:** ICD 10, CPT II, medical terminology
- **Clinical Documentation:** Chart review, documentation specificity, chart collection
- **Provider Engagement:** Physician education, practice consultation, stakeholder meetings
- **EMR Systems:** EMR workflow review, EHR documentation, encounter records
- **Microsoft Excel:** Pivot tables, lookup functions, data manipulation
- **Microsoft Office:** Microsoft Word, Microsoft PowerPoint, presentation delivery
- **Claims Operations:** Claims review, billing workflows, claim submission
- **Program Management:** Prospective programs, project coordination, milestone tracking
- **Territory Operations:** Field visits, territory planning, travel scheduling
- **Compliance Education:** CMS documentation expectations, national standards, coding compliance

PROFESSIONAL AFFILIATIONS

- AAPC member, maintaining professional focus on coding accuracy and compliant documentation.

- Healthcare quality professional network participant, sharing practical approaches to provider education and care gap closure.

ADDITIONAL INFORMATION

Work Status : Authorized to work in United States. No sponsorship required.

REFERENCES

AVAILABLE ON REQUEST