

# Roma Lala, CPC

Porter Ranch, CA | 818-554-8252 | romalala72@gmail.com | www.linkedin.com/in/roma-lala

## SUMMARY

---

- Experienced Risk Adjustment and Quality Manager with extensive knowledge of CMS and NCQA guidelines for Medicare Advantage Risk Adjustment and Quality measures. Highly skilled in HCC coding and compliance, project management, and provider training. A critical thinker with excellent communication and organizational skills.

## PROFESSIONAL EXPERIENCE

---

### All Care To You

Orange, CA

*Risk Adjustment Manager*

*May 2023 – Present*

#### Key Responsibilities

- Develop policies and procedures for the MA Risk adjustment and Quality department for MSO and train the coding team for documentation accuracy, coding compliance, and data validation.
- Create and implement customized incentive programs for providers to enhance RAF scores and quality measure ratings, for multiple IPAs.
- Lead training meetings for providers and staff for improvement of documentation, HCC coding, and Quality measure ratings.
- Analyze claims data to identify potential care gaps and missed risk adjustment coding opportunities to ensure maximum revenue.
- Represent MSO and subsequent IPAs in RADV audits and oversee the project for data validation accuracy till completion.
- Work individually with multiple provider offices, if necessary to help implement customized procedures for improvement of risk adjustment and quality metrics.
- Identify issues and report data analysis findings to cross-departmental managers in order to strategize and improve interdepartmental processes.
- Communicate with all health plans in quarterly meetings, to strategize and improve quality and RAF.
- Reconcile and compare claims data biannually with potential RAF for high utilization members, and implement strategies across departments to improve processes.
- Perform annual audits of palliative care encounters for data validation, documentation accuracy and communicate with nurse practitioners about potential missed HCC coding opportunities open Quality measures.

### All Care To You

Orange, CA

*Senior Risk Adjustment and Quality Specialist*

*August 2019 – April 2023*

#### Key Responsibilities

- Performed ongoing analysis and review of medical record charts for the appropriate coding compliance for over 25 providers, in multiple IPAs.
- Reported findings of audits and regularly communicated with providers and staff regarding missed coding opportunities, documentation improvement and open Quality care gaps per CMS and

NCQA guidelines.

- Distributed monthly provider reports to each office relating to annual wellness programs completion, quality performance, and risk adjustment metrics.
- Identified coding issues and collaborated with the coding team to improve the accuracy, integrity, and quality of coding practices.
- Lead biannual meetings for providers and staff focusing on reviewing risk adjustment coding, documentation, and quality measures.
- Communicated with health plans periodically regarding ongoing risk adjustment and quality care gaps and annual updates.

**Advanced Medical Management Inc.**

*Manager, HCC Coding and Compliance*

**Long Beach, CA**

*January 2013 – May 2019*

Key Responsibilities

- Reviewed medical records for accuracy of HCC codes documentation per CMS guidelines for 18 provider offices.
- Input codes into EZCAP, management company's billing software, for all wellness exams
- Provided upper management with comprehensive and detailed reports on chart review findings and assisted in individualized HCC training sessions for providers based on the reviews.
- Communicated with providers and staff regularly about their risk adjustment scores and helped implement processes to improve performance.
- Performed audits of HCC code submission for members in Custodial or Palliative care, to ensure accuracy of coding and documentation for maximum revenue.

**Access Managed Care IPA**

*Risk Adjustment Coder*

**Marina Del Rey, CA**

*October 2011 – January 2013*

Key Responsibilities

- Coded all visits as well as Annual wellness exams for 14 providers, with appropriate procedure and ICD9 codes, while ensuring documentation accuracy per CMS guidelines.
- Performed a thorough retroactive chart review of member's historic data and current records to identify missed HCC coding opportunities and incidental findings.
- Queried and communicated with providers and staff on a weekly basis about risk adjustment coding improvements, missed opportunities, as well as documentation compliance issues per CMS guidelines.
- Billed encounters in EZCAP billing program.

---

**EDUCATION & CERTIFICATIONS**

**Osmania University, India**

*Bachelor of Arts, Sociology and Political Science*

---

**SKILLS AND AFFILIATIONS**

- Proficient in ICD10 CM guidelines
- Proficient in Microsoft Word, Excel , Powerpoint, EZCAP and multiple EMRs including Epic, Office Ally, Prime Clinicals among others.
- AAPC member with CPC certification