

# KYLE S. VICTOR, MBA-HA, RN, CRRN

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## PROFESSIONAL SUMMARY

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Proven history of success within diverse industries including finance, health care, and insurance. Results driven leader with over 15 years of health care and quality and risk experience within Fortune 500 companies. Developer of strong, self-sustaining teams through improving communication and efficiency. Builder of trust and rapport with both internal and external key partners. Adept in creating innovative and proactive solutions while acting with honesty and integrity.

## AREAS OF EXPERTISE

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*Healthcare delivery	*Quality & Risk Management	*Medical Staff Services	*Health Information Management
*Case Management	*Prospective Payment Systems	*Utilization Review	*Compliance & Regulation
*JCAHO Standards	*Accreditation and Licensing	*Clinical Documentation	*Electronic Health Records
*Appeal Management	*Mediation Experience	*Claims Examining	*Long-Term Care Claims
*Claims Litigation	*Internal/External Audits	*HIPAA Compliance	*Member Dispute Resolution

## PROFESSIONAL EXPERIENCE

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### Thrivent Financial

Appleton, WI  
06/2019 to Current

#### Claims Consultant

- Highest subject matter expert in claims examining with dual technical and consultative responsibilities depending on the business need.
- Responsible for examining the most highly complex claims and serve as a resource to other examiners, claims leadership, business analysts, legal counsel, and auditors on process and procedure.
- Primary workflow coordinator providing leadership to the claims team on assignment and management of highest work priorities.
- Represent Thrivent in all claim litigation.
- Lead business representative on all audit inquires.
- Ensure compliance with state and federal requirements and regulations, as well as facilitate the filing of annual state reporting for long-term care, disability income, and Medicare supplement claims.
- Calculate, balance and report annual taxable income for health claims.

### Encompass Health Rehabilitation Hospital

Arlington and Bedford, Texas  
06/2012—06/2019

#### Director of Quality and Risk Management

- Managed, directed, planned, and executed all aspects of the hospital-wide quality and risk management program.
- Monitored and evaluated the quality and delivery of patient care services.
- Ensured proper compliance with regulatory agencies, accrediting bodies, corporate and hospital policies and procedures.
- Developed, implemented, and maintained quality assessment and performance improvement programs.
- Planned, designed, and assessed hospital-wide survey readiness programs, and risk prevention measures.
- Ensured appropriate utilization of the hospital and its resources.
- Maintained optimal achievable standards of patient care and worked collaboratively with the medical staff and leadership.
- Maintained compliance with the Centers for Medicare & Medicaid Services (CMS) Conditions of Participation, the Joint Commission (JCAHO) standards, Clinical Laboratory Improvement Amendments (CLIA) standards and Health Insurance Portability & Accountability (HIPAA) Rules and Regulations.
- Risk Manager and Facility Compliance Officer.

#### Director of Medical Staff Services/Credentialing

- Directed accurate and timely performance of all procedures related to processing medical staff and allied health applications for appointment to the hospital medical staff.

- Assisted the medical staff in performance of functions required in Medical Staff Bylaws, Rules and Regulations, JCAHO standards and all other accreditation and licensing agencies.
- Monitored the focused professional practice evaluation process for new medical staff members and clinical privileges.
- Facilitated executive committee meetings of the medical staff.
- Maintained confidential credentials files, electronic medical staff database, and medical staff correspondence.

#### **Director of Health Information Management Services**

- Managed the overall functions and staff supervision of the HIM/Medical Records department.
- Formulated departmental policies and procedures and maintained the indexes and registers required by accrediting and regulatory agencies.
- Ensured legal aspects of medical records practices, release of information, and confidentiality/privacy were met.
- Established and maintained systems to control the collection, maintenance, retrieval, and retention of clinical information.

#### **Director of Case Management**

- Directed the daily operations and human resource management of the Department of Case Management.
- Oversaw census management, patient care outcomes and Key Care Indicators (KCI).
- Supervised the interdisciplinary plan of care and the discharge planning process.
- Ensured the effectiveness and appropriateness of services through utilization review activities.
- Served as a patient and family advocate to ensure that services were delivered to meet the needs of patients and families, and that the utilization of resources was appropriate.
- Provided appropriate training, education, and management of the Department of Case Management.
- Coordinated and communicated effectively with other members of administration, medical staff and the interdisciplinary patient care team regarding service delivery, financial management, and discharge planning processes.
- Provided training and direction to support case managers to effectively manage caseloads, interpret regulations, policies, operational procedures, and objectives.

#### **Prospective Payment Systems Coordinator**

- Assured the accurate extraction of data from clinical documentation.
- Utilized discretion and independent judgment within the confines of state and federal regulations.
- Coordinated the process of providing accurate and timely data to the appropriate entities involved for Medicare and non-Medicare patients.
- Supervised all aspects of data collection on the Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI) and ensured the presence of supporting documentation.
- Collaborated with the Chief Nursing Officer and Director of Therapy Operations to ensure compliance with CMS guidelines.
- Educated staff on proper and accurate documentation as it applied to the IRF-PAI.
- Developed and interpreted policies and procedures.
- Acted as the primary resource for immediate problem-solving regarding Functional Independence Measurement (FIM).
- Served as an educator and mentor to the medical staff.

#### **Medical Center of Arlington**

Arlington, Texas  
2008—2012

#### **Registered Nurse**

- Quickly and accurately assessed patient care needs.
- Worked collaboratively with doctors and staff to provide exceptional care.
- Performed all requested diagnostic tests.
- Collaborated with doctors and staff on patient treatment plans
- Managed multiple cases simultaneously, continually prioritizing needs.
- Maintained accurate, complete, and compliant clinical documentation.

#### **Mountain View Hospital**

Las Vegas, Nevada  
01/2008—05/2008

#### **Licensed Practical Nurse**

- Provided direct and indirect patient care in the medical-surgical setting.
- Communicated with physicians, the Med/Surg Manager and co-workers, as appropriate about changes in patient's clinical condition, including results of diagnostic studies and symptomatology.
- Responded quickly and accurately to changes in condition and response to treatment.

- Administered medications and clinical treatments.
- Maintained accurate, complete, and compliant clinical documentation.

**Kindred Hospital**

Fort Worth, Texas  
06/2006—12/2007

**Licensed Vocational Nurse**

- Implemented and monitored patient care plans
- Monitored, recorded and communicated patient conditions
- Served as a primary coordinator of all disciplines for well-coordinated patient care
- Documented and executed physicians' orders
- Assessed and coordinated patients' discharge planning needs with members of the healthcare team

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**EDUCATION**

- MBA in Health Care Management; MBA—University of Texas, Tyler, TX
- Associates Degree in Nursing; AAS, RN—Tarrant County College, Ft Worth, TX
- Licensed Vocational Nurse; LVN—Concorde Career Colleges, Arlington, TX
- Bachelor of Arts and Sciences; BA—Texas Tech University, Lubbock, TX

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**CERTIFICATIONS AND AFFILIATIONS**

- Long-term Care International Forum – member
- Long-term Care Claims Advisory Group – member
- Certified Rehabilitation Registered Nurse (CRRN)
- Lean Six Sigma Green Belt (in progress)