

Serene Thornton

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Strengths

Clinic Director with more than 15 years of proven proficiency in healthcare operations and strategic planning. Experienced managing clinic and health plan operations, large-scale strategic projects with a focus on process improvements, reducing cost of healthcare and enhancing provider relationships. An established track record of leading successful departments in claims processing, customer service, IT, regulatory compliance, training, data and analytics.

BUSINESS EXPERIENCE

Planned Parenthood
San Francisco, CA

2008 to present

Clinic Director

**Blue Shield of
California**
El Dorado, Hills, CA
1998-March 2008

June 2006-Mar 2008

Sr. Program Manager Strategy & Operations

April 2003

Lead Project Manager

July 2000

Project Manager

January 1998

Supervisor: training, auditing, claims and customer service

Prudential Healthcare
Stockton, CA
1993-1998

June 1996 -Jan 1998

Supervisor: claims and customer service

March 1995

Trainer/Auditor: claims and customer service

February 1994

Claims Examiner/Customer Service Rep

March 1993

Clerk/Data Entry

PROFESSIONAL SKILLS

**Leadership, Strategic
Planning and
Presentation Skills**

- Recipient of the highest form of recognition; Pat Boone Spirit Award, two years in a row for successfully leading teams delivering on strategic initiatives.
- Manage and supervise up to six project teams simultaneously, with an average team size of eight professional staff and up to sixty direct reports.
- Develop and deliver formal presentations to Executives (internal and external) to drive strategic planning/investment.
- Establish strategic direction, scope and goals with project and operation teams.
- Mentor, conduct career counseling and track professional development of staff to assist with their promotion.

**Regulatory Mandates
and Contract
Management**

- Successfully implemented HIPAA Privacy Rule; established the Privacy office, executed business associate agreements, trained internal and external staff, drafted and mailed Notice of Privacy Practices.
- Implemented processes to ensure compliance with California State Mandate AB1455 – receiving, logging, tracking and trending provider appeals/grievances.
- Draft and evaluate RFP's; negotiate contracts.
- Coordinated efforts of the EDI build team, IT experts, and business users to implement HIPAA transactions across multiple platforms (ANSI).
- Partnered with brokers and providers to ensure federal and state regulatory compliance; support relationship management and administrate contractual terms.

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Change Management and Training Programs

- Event management; solicit and manage guest speakers, meeting content and vendors.
- Develop and deliver soft-skills training, e.g. presentation skills, customer service skills, business writing skills, and leadership training.
- Evaluate, develop and execute training programs based on business needs, e.g. claims processing, customer service, cross-functional hand-offs, etc.
- Identify change readiness, develop communication plan, and design performance objectives.
- Coordinate communications and research efforts between Blue Shield and The Advisory Board.

Analytical and Quantitative Skills

- Saved \$10 million (ROI year 1) as a result of implementing a fraudulent and abusive prevention program, including provider profiling, the creation of a dashboard tracking performance, and development of risk analysis report of physician
- Establish processes to collect, summarize, and enable quantitative analysis of claims data.
- Lead mandated regulatory projects, including corporate-wide implementation of the federal HIPAA regulations for Privacy.
- Analyze contracts between hospitals and health plans. Evaluate contract language and rate structures for opportunities to enhance operationalization of terms.
- Develop and assess business plans to forecast revenues, resource allocation and budget expenses.
- Work in partnership with business units and various hospital departments to systematically identify and address root causes of issues.

Process Improvement

- Spearheaded cross-functional process improvement program with senior executives across three divisions; Healthcare Services (utilization management and medical policy), Claims /Customer Service Operations, and Network Management.
- Reduced cycle time (revenue billing/payment) by 25% and reduced the number of provider appeals by 15% through the implementation of a Dedicated Hospital Service Team – gearing claims operations toward hospitals to improve operational performance and reduce the number of issues undermining relationships.
- Through process improvements reduced cycle time and rework for a targeted group of claims by more than 30%.

COMPUTER SKILLS

Word, Excel, Power Point, Outlook, MS Project, and Visio

Certification

PM Certification Sacramento State University

AWARDS

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|---------------|---|
| February 2008 | Best of Blues (BCBSA) Nomination: Dedicated Hospital Team |
| Dec 2006 | Spot Bonus Award, Blue Shield of CA |
| March 2006 | Pat Boone Spirit Award |
| March 2005 | Pat Boone Spirit Award |