

# Erinn Victoria King

Erincking1989@gmail.com | (267) 622-8098  
<http://www.linkedin.com/in/erinn-king-46418161>

## PROFESSIONAL SUMMARY

Organized, results-driven Compliance Manager with 10 years of experience in operational improvements, finance, customer service, planning, directing, auditing, and creating policies and procedures to guarantee ethical and regulatory compliance. Well-versed in supervising workflow processes and cutting costs to improve daily operations and executing projects within budget. Demonstrated ability to research and initiate industry best practices and regulatory changes to drive business initiatives, maximize revenues, and mitigate risks.

## CORE COMPETENCIES

- ❖ Strong Problem-Solving Skills
- ❖ Supply Chain & Inventory Management
- ❖ Strong Customer Service
- ❖ Microsoft Office Proficiency
- ❖ HIPAA & OSHA Compliance
- ❖ Logistics Management
- ❖ Healthcare Compliance
- ❖ Innovative Research Projects
- ❖ Accident Investigation
- ❖ Internal Audit
- ❖ Healthcare Revenue Cycle
- ❖ Risk Management

## ACCOMPLISHMENTS

- Led Spectrum's Medical/Dental post card advertising campaign.
- Created risk management and training documentation used to onboard new employees.
- Launched the Justice, Diversity, Equity, and Inclusion program and managed a new team of 10 employees
- Defined and organized various programs, analyzing data and driving performance improvements to influence resource allocations for all stages of project execution (from ideation to completion).
- Developed and implemented the process for utilizing the facility's first inventory tracking system (FlexScanMD).
- Created a compliance resource training schedule on the company's internal website for examining policies, processes, practices, consumer disclosures, and other communications necessary to reduce risks.
- Initiated, managed, and maintained a site wide electronic scheduling software which provided a centralized way of viewing all provider's schedules, increasing performance ratings by 80%.

## PROFESSIONAL EXPERIENCE

Spectrum Health Services, Inc. – Philadelphia, PA

December 2021 – Present

### Compliance Manager

- Conduct monthly and quarterly audits for 340B discount drug program, Crash Cart, Vaccines for Children (VFC) program, and HR to mitigate risks and ensure 100% compliance to federal healthcare laws and regulatory agencies.
- Create weekly checklist process to assess ongoing and emerging internal and external risks, control points, challenges, and process gaps; implement corrective action plan if/when necessary to improve compliance metrics.
- Leverage technology-based solutions to maintain and improve internal communication to all employees related to new policies, procedures, and control activities, saving on average 40+ hours per month in audit assessments.
- Develop strategies to identify, assess, and establish controls based on regulatory requirements, healthcare best practice, and internal reviews, enabling the organization to prevent and detect internal and external diversion.

### Operations Manager

November 2019 – December 2021

- Provided comprehensive health care opportunities, educating patients who were underinsured and uninsured on all Medical, Dental, Podiatry, and specialty care health services.
- Supervised the inventory, scheduling, and medical records department by communicating daily tasks and job expectations as well as recruiting, orienting, training, planning, monitoring and appraising job performance.
- Worked alongside Chief Operating Officer to establish strategic goals by gathering pertinent business, financial, service, and operations information to create system improvements.
- Participated and assisted with arranging training for staff, including but not limited to, team huddles, communication, care management, motivational interviewing, health literacy, and pre-visit planning.
- Collaborated with Revenue Cycle Management, Clinical, and Operations department to monitor and ensure clinical operational performance goals are aligned with National Committee for Quality Assurance (NCQA) and Health Resources and Services Administration (HRSA).
- Managed organizational teams to enhance Team Based Care and Patient Center Medical Home (PCMH) activities to create workflows and a matrix of responsibilities to follow compliance standards for clinical trainings, medical assets, inventory control, and productivity reports.
- Assisted with developing and managing the annual budget, guaranteeing quality control reports and revenue trend statistics were on track with department performance goals and projections.
- Developed, reviewed, and updated policies, procedures, process improvement, training, and evaluation annually to help support efficient clinic workflows, productivity, quality improvement, and customer service.

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## Scheduling Coordinator

January 2019 – November 2019

- Directly responsible for the creation and management of provider's schedules across a multi-site Federally Qualified Health Center (FQHC); optimizing productivity within the organization.
- Actively worked on multiple committees, specifically, as a member of Spectrum's Health Information Management Committee (HIMC), working directly as a lead super user and trainer for the implementation and testing of Spectrum's new Electronic Medical Records (EMR) system.
- Generated and analyzed standard reports including: the average number of patients scheduled, number of no-show appointments, number of patients who cancelled and the number of patients who were seen over a given session; directly providing identifiable areas of productivity improvement within the organization.
- Managed scheduling issues to minimize negative productivity or skewed patient wait times, ensuring greater patient satisfaction and adherence to governmental and accreditation regulations.
- Worked directly with Revenue Cycle Management, quarterly and/or as needed, to determine schedule adjustment needs, enhancing provider schedules in accordance with encounter goals.
- Assisted the Chief Operating Officer with identifying operational needs/goals and areas for improvement, to include requirements for accomplishment, determination of capacity, and the implementation process needed for completion.
- Directly served as support staff to Patient Service Representatives by developing training plans and resources surrounding all scheduling protocols and providing adequate updates as needed to patients, vendors and physicians.

First Trust Bank – Philadelphia, PA

February 2016 – January 2019

## Part-Time Teller

- Cross-sold deposit and cash management products and services to clients as well as prospects.
- Assisted Head Teller in the performance of branch audits, at random, to ensure proper EOD settlements in preparation for internal and external audits.
- Trained teams in various areas including sales, compliance, business development and operations.
- Executed customer transactions including deposits, withdrawals, money orders and checks, reconciling all transactions with 100% accuracy at the end of each shift.
- Analyzed customer's financial needs and matched them to the appropriate banking products and services.
- Processed an average of 200 transactions per week, consistently meeting performance benchmarks in all areas of speed and accuracy.
- Guaranteed 100% excellent teller operational performance through adherence to the compliance with policies and procedures.
- Ensured achievement of assigned sales targets, by attracting new-to-bank premium level customers, enhancing transparency, maximizing liquidity and mitigating risks to make the most of all banking services.
- Lowered average wait-time by 25%, leading to highest customer satisfaction scores in branch history.

School District of Philadelphia | Philadelphia, PA

August 2012 – June 2013

## City Year AmeriCorps Member | Extended Learning Coordinator

- Served on the System Analysis Program (SAP) team at Overbrook High School, completing over 1700 hours of voluntary service, to inner youth in Philadelphia.
- Mentored over 200 young men and women, 20 hours a week, helping them find ways to think positively about academics, resulting in increased grade averages and positive attendance records for ninth grader students.
- Conducted monthly, individual review meetings to discuss post-secondary plans.
- Maintained quarterly credit audits to ensure students graduated on time, decreasing failure and dropout rates by 20%.
- Supported management in serving as Extended Learning Co-coordinator, developing and managing positive after school programs, directly promoting and increasing student engagement and educational development.

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## EDUCATION

Rosemont College – Bryn Mawr, PA

May 2014

### Masters of Business Administration

- **Certificate in Health Care Administration**

Rosemont College – Bryn Mawr, PA

May 2012

### Bachelor of Science in Business and Accounting