

Contact

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Top Skills

Health Policy

Policy Analysis

Program Evaluation

Publications

Commercial Influences on Electronic Health Records and Adverse Effects on Clinical Decision-making

Navigating OIG's New Web Site to Find Compliance Information

Protecting Patient Privacy and Data Security

The Importance of Accurate, Complete, and Usable Documentation

Medicare Advantage should not 'game the system' but prioritize patient care, honest billing

Christi A. Grimm

Inspector General, Office of Inspector General, at U.S. Department of Health and Human Services (HHS)

Alexandria, Virginia, United States

Experience

U.S. Department of Health and Human Services (HHS)

Inspector General, U.S. Department of Health and Human Services

February 2022 - Present (1 year 7 months)

HHS Office of Inspector General

7 years 9 months

Principal Deputy Inspector General, Office of Inspector General, U.S. HHS

January 2020 - March 2022 (2 years 3 months)

Washington D.C. Metro Area

Chief of Staff

July 2014 - January 2020 (5 years 7 months)

U.S. Department of Health & Human Services, Office of Inspector General

15 years

Director of Policy and Programs

January 2013 - July 2014 (1 year 7 months)

Washington D.C.

Ensure effective day-to-day operations of the Immediate Office of the Inspector

General, consisting of medical officer, policy advisors, and program analysts.

Set strategic vision, policy, and direction for the planned work of over 1,500

evaluators, auditors, investigators, and attorneys whose mission is to protect

the integrity of the Medicare, Medicaid and hundreds of other programs

administered by the Department of Health and Human Services. Responsible

for ensuring that OIG's roughly \$300 million budget focuses on work that is

relevant, innovative, customer-focused, and likely to produce high-impact.

As part of this process, partner with budget and planning experts to align

organizational resource requests with OIG's work plan and to develop budget

justification information submitted to appropriators.

Special Assistant to the Principal Deputy Inspector General

November 2009 - January 2013 (3 years 3 months)

Washington D.C.

Represented the Principal Deputy IG (PDIG) on OIG policy, operations, and program matters. Worked closely with organizational leaders to set strategic direction and lead priority initiatives. Regularly prepared written products and oral presentations for high-level officials in Congress, Federal, State or local Governments, public interest groups, members of the press, and the public. Coordinated team of experts toward ensuring high quality audit and evaluations reports on vulnerabilities in HHS programs and solutions for improvement. Led wide variety of special initiatives aimed at improving internal policies and operations.

Team Leader

August 1999 - November 2009 (10 years 4 months)

Dallas, Texas and New York, New York

Applied program knowledge and technical skills to gauge potential risk to programs and beneficiaries and designed, managed, and successfully executed program and policy evaluations on a wide-range of HHS programs and topics. Led evaluative efforts to examine high-profile, priority health care topics ranging from provider screening and enrollment, beneficiary eligibility, contractor oversight, patient safety and quality, collection of improper payments, and the Medicare appeals process. Cultivated knowledge on wide variety of Departmental data and databases, including the National Claims History File, Online Survey and Certification Reporting System, the Medicare Appeals System, and the National Ombudsman Reporting System. Accrued and applied advanced knowledge of statistical sampling methods and tests, as well as statistical analysis software, including SAS and Microsoft Access.

Centers for Medicare & Medicaid Services

Insurance Specialist

January 1999 - August 1999 (8 months)

Centers for Medicare and Medicaid Services

Conducted program evaluations for Medicare contractors located in Nebraska, Texas, New York, Florida, and Puerto Rico. Reviews examined contractor compliance with local and national medical review policies and procedures and adherence to financial reporting requirements. Communicated results of evaluations in written and oral reports for Government and contractor executives. Developed communication correspondence for Freedom of Information Act requests. Served as medical record review liaison to offices handling benefit integrity, Medicare overpayments, Medicare Secondary Payer, and several divisions of the Medicaid branch.

Education

New York University

Master of Public Administration (MPA), Health Policy · (2004)

University of Colorado Denver

Bachelor of Arts (BA), English Language and Literature, General · (1998)