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Interview Guide – Medicare Compliance Officer

Position: Medicare Compliance Officer

Organisation: [Insert ACCHS Name]

Panel Chair: [Name]

Panel Members: [Names]

Date: [Insert date]

Applicant: [Name]

1. Introduction (for the Interview Panel to read aloud)

Thank you for coming in today. Before we start, we would like to acknowledge the Traditional Custodians of the land on which we meet and pay our respects to Elders past and present.

This interview is for the position of Medicare Compliance Officer with [ACCHS Name]. The purpose of today's conversation is to learn more about your experience supporting Medicare compliance, billing accuracy, legislative requirements and quality improvement within a healthcare setting. We will ask questions about your knowledge of Medicare systems, auditing, data integrity, stakeholder engagement, problem-solving, communication and your commitment to supporting culturally safe healthcare services.

Please take your time when responding, we may take notes during your answers.

Do you have any questions before we start?

2. Interview Panel Instructions

- Ensure at least one Aboriginal panel member is present.
- Use yarning-style, conversational questioning where appropriate.
- Avoid interrupting or rushing responses — allow silence and reflection.
- Focus on strength-based assessment (what they bring, not just what's missing).
- Note examples and assess responses using the rating scale.

3. Rating Scale (Example)

Score	Description
5 – Excellent	Exceeds expectations, provides strong, relevant examples.
4 – Very Good	Meets expectations, gives clear and thoughtful responses.
3 – Satisfactory	Adequate response, limited examples but some understanding.
2 – Limited	Superficial or incomplete understanding.
1 – Unsatisfactory	No relevant experience or understanding shown.

4. Core Interview Questions

1. Can you tell us about yourself and your experience working with Medicare, compliance, health administration or practice management?

- *Prompt:* Tell us about your previous roles. What attracted you to this position?
- Indicators: Medicare experience; Compliance knowledge; Health administration; Motivation; Professionalism; Relevant experience.

| 1 | 2 | 3 | 4 | 5 |

2. What does Medicare compliance mean to you, and why is it important within a healthcare organisation?

- *Prompt:* Can you describe the risks of non-compliance? How does compliance support patient care and organisational sustainability?
- Indicators: Understanding of Medicare legislation; Compliance awareness; Risk management; Accountability; Healthcare governance.

| 1 | 2 | 3 | 4 | 5 |

3. Tell us about your experience auditing records, identifying compliance issues or improving billing accuracy.

- *Prompt:* What tools or systems did you use? What improvements were achieved?
- *Indicators:* Auditing; Data analysis; Attention to detail; Continuous improvement; Problem-solving; Accuracy.

| 1 | 2 | 3 | 4 | 5 |

4. This role requires interpreting Medicare legislation and explaining requirements to clinical and administrative staff. How would you approach this?

- *Prompt:* Tell us about a time you explained a complex process to someone. How did you ensure they understood?
- *Indicators:* Communication; Education; Stakeholder engagement; Legislative interpretation; Coaching; Collaboration.

| 1 | 2 | 3 | 4 | 5 |

5. Tell us about a time you identified an error or compliance issue..

- *Prompt:* What was the issue? What actions did you take? What was the outcome?
- *Indicators:* Initiative; Investigation; Risk management; Decision-making; Accountability; Continuous improvement.

| 1 | 2 | 3 | 4 | 5 |

6. Accuracy is critical when working with Medicare billing and patient information. How do you ensure your work remains accurate?

- *Prompt:* What checking processes do you use? How do you minimise errors?
- *Indicators:* Attention to detail; Accuracy; Quality assurance; Organisation; Accountability; Time management.

| 1 | 2 | 3 | 4 | 5 |

7. This role involves working with Practice Managers, clinicians, reception staff and executives. Tell us about your experience working collaboratively across different teams.

- *Prompt:* How do you build relationships? Tell us about a successful project involving multiple stakeholders.
- *Indicators:* Teamwork; Collaboration; Communication; Relationship building; Professionalism; Influence.

| 1 | 2 | 3 | 4 | 5 |

8. How would you support a clinic that has consistently low Medicare claiming accuracy or poor documentation?

- *Prompt:* Where would you begin? How would you encourage staff engagement?
- *Indicators:* Coaching; Improvement planning; Analytical thinking; Leadership; Communication; Supportive approach.

| 1 | 2 | 3 | 4 | 5 |

9. Tell us about a time you had to manage multiple priorities while meeting deadlines.

- *Prompt:* How did you organise your workload? What tools helped you?
- *Indicators:* Organisation; Time management; Prioritisation; Adaptability; Reliability; Planning.

| 1 | 2 | 3 | 4 | 5 |

10. Describe a quality improvement initiative you have been involved in.

- *Prompt:* What was your role? What improvements were achieved?
- *Indicators:* CQI knowledge; Initiative; Evaluation; Problem-solving; Outcomes focus; Innovation.

| 1 | 2 | 3 | 4 | 5 |

11. This role requires maintaining confidentiality while handling sensitive patient and organisational information. How do you ensure confidentiality is maintained?

- *Prompt:* Tell us about a situation where confidentiality was particularly important
- *Indicators:* Privacy legislation; Professional boundaries; Confidentiality; Ethics; Information security; Accountability.

| 1 | 2 | 3 | 4 | 5 |

12. Why do you want to work with us?

13. What interests you most about Medicare compliance and quality improvement?

14. Where do you see yourself professionally in the next few years?

5. Optional Scenario Questions

Scenario 1 – Medicare Audit

During a routine audit you identify that a clinician has been incorrectly claiming a Medicare item for several months.

How would you manage the situation?

Scenario 2 – Resistance to Change

You introduce a new Medicare compliance process, but several staff members continue using the old process because it is quicker.

How would you address this?

Scenario 3 – Documentation

You identify that patient documentation does not support several Medicare claims that have already been submitted.

What would you do?

Do you have any questions for us?

HR POST-INTERVIEW CHECKS

Item	Notes
References (x2)	
Working with Children Check	
National Police Check	
Start Date Availability	
Confirmation of Role (Fulltime, part time etc)	
Disclose of any health conditions that may affect duties	

5. Scoring

/ 50

Comments and Interview Reflection

[Insert Organisation's Letterhead / Header]

6. Panel Summary and Recommendation

Strengths	Development Areas	Recommendation
		[Appoint / Consider / Not Suitable]