Crusaders Central Clinic JOB DESCRIPTION

Job Title: Certified Medical Coder

Job Status: Non-Exempt

Job Grade: 19

Supervisor Title: Patient Accounts Manager

POSITION SUMMARY:

Responsible for timely, accurate and comprehensive abstraction of physician services from the medical record, utilizing appropriate CPT-4 procedure and ICD-10 diagnosis codes. Review the medical record to assure specificity of diagnoses, procedures and appropriate/optimal reimbursement for hospital and/or professional charges.

ESSENTIAL FUNCTIONS:

To perform this job successfully an individual must be able to perform each essential function satisfactorily.

- 1. Demonstrate the qualities outlined in the "Customer Service Standards of Excellence" program when interacting with patients, their families and friends, and fellow employees.
- 2. Comply with established policies and procedures, objectives, HIPAA, safety and environmental standards.
- 3. Productivity (quality & quantity) is maintained at an average of 200 claims per day. Achieves and maintains 95% accuracy in professional fee coding while maintaining a high level of productivity.
- 4. Review medical record documentation to identify all services provided by physicians.
- 5. Assigns appropriate CPT-4 procedure code(s) to accurately report the physician services provided to patients.
- 6. Assigns appropriate ICD-10 diagnosis code(s) to accurately support the need for each physician service.
- 7. Identifies physician services provided, but not adequately documented in the medical record. Advises supervisor and physicians of deficiencies to support charge capture of all billing services.
- 8. Assist with physician billing and documentation training in daily interactions with physicians and other routine training sessions.
- 9. Compiles monthly reports as requested.
- 10. Identifies trends/problems in medical documentation and recommends possible solutions.
- 11. Maintain medical coding certification by obtaining required CEU's and active membership.
- 12. Other duties as requested by supervisor.
- 13. Abides by the Standards of Ethical Coding as set forth by the American Health Information Management Association and adheres to official coding guidelines.

QUALIFICATIONS:

Knowledge of:

- Computer software applications; word processing, electronic spreadsheets; EDI systems
- CPT and ICD10 terminology
- HIPAA, Medicare/FQHC, Medicaid/FQHC
- Medical billing systems; patient/insurance financial management

Ability to:

- Follow-through, assume responsibility and use good judgment
- Maintain professionalism under stressful situations
- Communicate effectively and diplomatically with patients, external insurance and contracting entities and facility personnel both orally and in writing

Education:

- High School Diploma or equivalent
- CPC (Certified Professional Coder) credential required or Certified Coding Specialist (CCS) or Certified Coding Specialist-Physician based (CCS-P) or Certified Coding Associate (CCA) or Certified Evaluation and Management Coder (CPC-CEMC) or Registered Health Information Technologist (RHIT)

Experience/Training:

- Knowledge of medical terminology and abbreviations required
- One to two years experience in physician coding

Technical Knowledge:

Equipment: PC, email, facsimile machine, computerized voice mail system, and common office machines, multi-line telephone system.

Software Knowledge: Windows, MS Office (Word, Excel, Access, PowerPoint and Scheduler), Electronic Medical Record, Medical Billing Software

PERSONAL CHARACTERISTICS:

- Exude strong customer service skills
- Punctual and dependable
- Possess the ability to establish and maintain professional working relationships with all levels of staff, clients, and the public
- Ability to understand and follow verbal and written communication
- Willingness to be part of a team-unit and cooperate in the accomplishment of departmental goals and objectives
- Ability to work with minimum/no supervision
- Ethical Conduct
- Time Management
- Ability to multi-task
- Strong attention to detail
- Ability to solve problems
- Pleasant and professional demeanor

PHYSICAL REQUIREMENT FORM

Job Title: Certified Medical Coder	
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Physical Demands	Continuous over 70%	Frequent 40-60%	Occasional 15-39%	Rarely Up to 15%
Sitting	X			
Standing				X
Walking			X	
Climbing				X
Bending			X	
Pushing / Pulling				X
Carry / Lift			X	
1-15lbs				
15-30lbs				X
30-50lbs				X
Fine hand / Eye Coordination				X
Exposure to Blood and Body Fluids				X
Exposure to Extreme Heat, Cold,				X
Temp Fluctuations				
Exposure to Hazardous Chemicals				X
Concentration on Detail	X			
Oral Communication	X			
Written Communication	X			

Crusader Community Health does not require nor does it expect that an employee lift over 50lbs unassisted. Objects in excess of 50lbs should be lifted or moved with mechanical means or a team lift.

Employee Signature:	Date:
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The above statements are intended to describe the general nature and level of work being performed. They are not intended to be construed, as an exhaustive list of all responsibilities, duties and skills required of personnel so classified. They are representative to the knowledge, skills, and abilities that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.