

JOB DESCRIPTION

Job description for: Certified Coder/Billing Specialist

Reports to: Billing/Reception Manager

Responsibilities: Responsible for posting and coding of charges. Educate billing staff of coding changes, updates and implement changes. Perform pre and post audits of physician's charges monthly.

RESPONSIBILITIES INCLUDE BUT NOT LIMITED TO:

- ... Coding of all hospital, DHC, IEC charges. Audits procedures and E & M for coding and documentation compliance.
- ... Codes services of questionable or new items and reviews proper coding with those involved.
- ... Informs and educates all physicians and staff on any new ICD.10 and CPT coding changes that affect charges.
- ... Stays current with all CCI coding edits and changes.
- ... Setup all inpatient/outpatient demographics, codes and post charges for all locations into the Practice Management System.
- ... Stays current with all commercial and governmental agencies on the latest coding requirements. Reads all bulletins and reports to the staff and Billing/Reception Manager on any coding changes at monthly meetings.
- ... Works with staff on concerns with coding and reimbursements for each contracted insurance company.
- ... Responsible for helping update diagnostic templates for efficiency and ease of coding for physicians and nurse practitioners.
- ... Working knowledge of managed care, commercial insurance companies.
- ... Attends required staff meetings and continuing education courses required to maintain certification.
- ... Performs all other tasks requested by Billing/Reception Manager.

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Educational requirements:

1. High School diploma or equivalent required.
2. Certified Professional Coder preferred.

Experience requirements:

1. Minimum 12 months experience in a medical background preferred.
2. Proven understanding of explanation of benefits form, claim form, and the insurance billing process.
3. Working knowledge of managed care, commercial insurance companies, Medicare, Medicaid and Workers Compensation.
4. Experience summarizing account status for management.
5. Proven understanding of CPT coding and ICD.9 coding.

Skill requirements:

1. Good communication and verbal skills.
2. Good filing skills.
3. Knowledge of grammar and spelling.
4. Medical terminology a plus.
5. General computer knowledge and typing skills.

Behavioral requirements:

1. Positive attitude
2. Ability to function in a teamwork environment with management and subordinates.

Essential functions of the job:

1. Daily work may involve substantial movements (motions) of the wrist, hands, and/or fingers, keyboarding. Able to lift up to 50 pounds. Includes stooping, reaching, standing, walking, pushing, pulling, grasping, feeling, talking, hearing, repetitive motion, sitting for long periods of time.
2. Subject to inside environmental conditions.

Hours:

Determined by Billing/Reception Manager based on department needs.

Job relationships:

Supported with guidance by Billing Lead for daily job duties.
Does not supervise any employees.
Supervised by Billing/Reception Manager.

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Job boundaries:

Reports to Billing/Reception Manager in all matters.
Reports to Billing/Reception Lead in absence of Billing
Manager.

EMPLOYEE ACKNOWLEDGMENT

BY MY SIGNATURE BELOW, I ATTEST that I have read and understood the job description for the position of _____.

Based on that information, I believe (check appropriate box):

- I can perform the essential functions and duties of this position with or without a reasonable accommodation.
- I am not able to perform this job with or without a reasonable accommodation.

BASED ON THE ABOVE INFORMATION and box checked, I hereby certify that all my statements and information related to the employment process are true and complete, and the failure to answer any questions or failure to answer truthfully and completely may result in my termination or not being hired.

APPLICANT/EMPLOYEE SIGNATURE: _____ DATE: _____

SIGNATURE OF HIRING AUTHORITY: _____ DATE: _____