Job Train - Menlo Park (5924) To: Employment Counselor Date: 04/19/2024

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94303 Palo Alto, CA, 94303

## **Medical Coder**

**Benefits:** Candidates on temporary assignment may qualify for our competitive benefits package which includes group health, life and disability insurance and voluntary benefits such as retirement savings and holiday pay.

Salary range: \$30.00 to \$30.00 hourly Employment status: Contract / Temporary

## Description

We have an immediate opening for a Medical Coding Manager in the Palo Alto area. This position is remote, but you must be local. The Coding Manager is responsible for managing the daily operations of the Coding Section and guiding the efficient, timely, effective and compliant process for coding, abstracting, and data reporting of inpatient, outpatient, emergency, and ancillary services as appropriate. Ensures data submitted to various external parties is accurate and reflects actual care, quality and utilization. Provide leadership for coding staff with training, coding compliance reviews, regulatory guidance, work distribution, and monitoring of accounts receivable issues related to coding. Serve as a key participant in the revenue cycle process. Work closely with Professional Billing Office (PBO), Patient Financial Services (PFS), Clinical Documentation Improvement Department, Medical Staff, Quality Department, SOM Finance Administrators, and other hospital/SOM departments to assist and/or coordinate in resolving account, coding, and charge capture issues as appropriate.

Ensure coding process and guidelines meet state, federal, and Hospital requirements and standards.

? Works closely with the medical staff to improve clinical documentation to facilitate accurate coding.

? Works collaboratively with the Revenue Integrity Program Managers

? Reinforce the need for coders to send compliant physician queries as appropriate

? Manage external Hospital clinical data and statistical reporting to OSHPD, UHC, and other external agencies. Monitor and review accuracy of reports and facilitate error corrections.

? Manage internal Hospital clinical data and statistical reports for clinicians, researchers, financial and business planning, and clinical quality support services.

? Manage the daily operations and activities in the coding section to ensure accurate and timely coding of inpatient, outpatient, emergency, and ancillary services.

? Monitor the Information System infrastructure supporting coding and data reporting including the abstracting and encoder software, billing and decision support applications, and electronic interfaces.

? Provides leadership and expertise in ICD-10-CM, ICD-10 PCS, and/or CPTcoding systems

? Provides leadership and expertise in APR-DRG, MS-DRG and/or APC payment methodology as appropriate

? Manages and ensures all staff are meeting productivity and quality goals. Works collaboratively with Employee & Labor Relations to address performance expectations through corrective action and/or performance improvement plans.

? Works with the Manager of the Coding Quality Specialists to address coding quality concerns.

? Manages work queues effectively: consistently meeting turn-around-time goals, identifies opportunities to cross-train staff, identifies system and/or workflow issues and escalates swiftly, provides appropriate and timely provider feedback.

? Assists Director in writing and maintaining policies, procedures, and training materials for the section.

? Direct the training of new employees and ensure ongoing training of all staff. Conduct performance appraisal reviews and routine assessment of staff competency providing timely and appropriate feedback. Take appropriate organization, system and personnel actions as necessary.

? Perform other duties as assigned.

## Requirements

MINMUM QUALIFICATIONS:

• Five (5) years of progressively responsible and directly related work experience

Licenses and Certifications

• RHIA - Registered Health Information Administrator

<sup>•</sup> Bachelor's degree in a work-related discipline/field from an accredited college or equivalent years of work experience may be substituted

- CCS Certified Coding Specialist
- RHIT Registered Health Information Technician
- CPC and/or CCSP Certified Professional Coder

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