

Lummi Indian Business Council

2665 Kwina Road · Bellingham, Washington 98226 · (360) 312-2000

'Working together as one to Preserve, Promote and Protect our Sche Lang en'

JOB ANNOUNCEMENT JOB TITLE: Coding Specialist I Healthcare Business Office Department

OPEN: April 16, 2024 EXEMPT: No SALARY: (7) \$20.07-\$22.60/hr. DOE SHIFT: Day; flexible LOCATION: Remote, Varies DURATION: Regular Full Time CLOSES: Until Filled JOB CODE: DIVISION: Finance DEPARTMENT: Business Office Department SUPERVISOR: Coding and Billing Supervisor VACANCIES: 1

JOB SUMMARY: This employee is part of the Healthcare Business Office staff whose main purpose is to accurately code patient encounters with providers in the Electronic Medical Records (EMR) system. Works closely with various departments to accurately code data. Must have good customer service skills due to regular contact with healthcare professionals, various departments, and outside agencies. This position requires accuracy in detail-oriented work.

ESSENTIAL JOB DUTIES AND RESPONSIBILITIES include the following, and other related duties as assigned.

- 1. Analyze and interpret information from EPIC and use ICD, CPT, HCPCS, and CDT coding books to select the most accurate and descriptive codes for diagnosis, procedures, labs, and treatment notes from medical, mental health, physical therapy, or dental encounters.
- 2. Ensures coded services, provider charges and medical record documentation meet appropriate guidelines or standards.
- 3. Reviews and resolves coding denials.
- 4. Assist the Billing Staff with troubleshooting denials.
- 5. Act as a resource on behalf of the Healthcare Business Office for all ICD, CPT, CDT and HCPCS related coding up-dates, changes, and requirements.
- 6. Provides feedback to assist Clinical staff to help with the understanding of coding, documentation issues and opportunities.
- 7. Keep up on the current Insurance Guidelines for services that are medically necessary.
- 8. Utilize Provider One, One Health Port and various insurance websites to gain patient insurance information and more denial information as needed.
- 9. Participate in and supports team meetings, activities, and/or problem solving.
- 10. Help prepare and gather necessary supporting information for providers for services that are provided with updated information with CPT, ICD-10, HCPCS and CDT.

11. Teamwork-Accountable to team and works to meet established deadlines.

MINIMUM QUALIFICATIONS:

- High School Diploma or GED
- One (1) year of experience with direct coding or billing for medical, dental, or other health services in a work or school setting.
- One (1) year of experience with EPIC or similar medical software.
- Must be a Certified Professional Coder (CPC)/CPC-Apprentice (CPC-A) through AAPC, Certified Coding Specialist (CCS) through AHIMA, <u>OR</u>

Enrolled into an accredited college coding program with one (1) quarter or semester to complete the degree/certification. An accredited college coding degree is sufficient to start employment with review of claims being submitted. A CPC, CPC-A, or CCS must be obtained within 6 months after graduation.

- American Dental Coders Association (ADCA) certification, preferred.
- Lummi/Native American/Veteran preference policy applies.

KNOWLEDGE, ABILITIES AND SKILLS:

- Must be able to do data entry, use the internet, and use other applicable applications.
- Thorough knowledge of medical codes involving selection of most accurate and descriptive codes using ICD-10, CPT, CDT, and HCPCS resources.
- Knowledge of third-party billing procedures across a variety of payer systems.
- Demonstrate skill in correlating generalized observations or symptoms (vital signs, lab results, medications, etc.) to a stated diagnosis to assign the correct ICD code.
- Experience working with an Electronic Health Record.
- Ability to understand and apply basic operating instructions.
- Acknowledge and demonstrate the need to maintain confidentiality of patient information.
- Demonstrate understanding and execution of the Federal Privacy Act and Freedom of Information Act as they pertain to a patient's health record.
- Must be willing to assume other duties as assigned and receive training in other departments.

REQUIREMENTS:

- Must pass pre-employment and random drug and alcohol test to be eligible for and maintain employment, as required by the LIBC Drug & Alcohol Free Workplace Policy.
- Position requires Criminal Background Check.
- Ability to obtain AHIMA or AAPC coding certification within two years of date of hire.
- Must be able to abide to HIPAA compliance.

TO APPLY:

To obtain a Lummi Indian Business Council (LIBC) application go to: <u>https://www.lummi-nsn.gov/widgets/JobsNow.php</u> or request by e-mail <u>libchr@lummi-nsn.gov</u> For more information contact the HR front desk (360) 312-2023. Submit LIBC application, cover letter, resume & reference letters no later than 4:30 p.m. on the closing date listed above. If listing degrees or certifications include copies. Mailing Address: 2665 Kwina Road, Bellingham, WA 98226. Human Resource Fax number: 360-380-6991.