



## Job Description – Coding Manager

**Job Title:** Coding Manager  
**Department:** Quality Improvement  
**Supervisor:** Mary Haltigan  
**FLSA Status:** Exempt  
**Prepared By:** OT  
**Prepared Date:** 4/25/17  
**Approved By:** MH  
**Approved Date:** 4/25/17

### Summary

This position reports to the Director of Revenue Cycle. The coding manager is an AAPC Certified Professional Coder responsible for supervising the coding staff that deals with patients' medical records. The Manager is responsible for the daily oversight of the coding team activities including but not limited to reviews of coding accuracy and documentation, educational programs for healthcare providers and staff, and guidance and advice for policies as required by both government and commercial carriers with respect to coding data which includes ICD-10 and CPT assignments. The coding manager is also responsible for the analysis of data with respect to coding trends at both individual healthcare provider and organizational levels and communicates these findings as well as facilitates improvement efforts when identified. The coding manager is also an integral part of the Millennium's internal compliance program coordinating with the Compliance Officer as necessary.

**Essential Duties and Responsibilities** include the following. Other duties may be assigned.

- Supervises and performs a wide range of activities pertaining to the review and coding/billing of inpatient and outpatient medical record information for Millennium's healthcare providers and patients.
- Establishes, implements and maintains a formalized review process for coding compliance, including a formal review (audit) process; designs and uses audit tools to monitor the accuracy of clinical coding/billing.
- Oversees the performance of data quality reviews on inpatient records to validate the International Classification of Diseases Manual (ICD-10-CM), and other codes; checks for missed secondary diagnoses and procedures and ensures compliance with all reporting requirements; monitors Medicare and other carrier bulletins and manuals.
- Cooperates with the Compliance Officer to perform reviews of the current Office of the Inspector General (OIG) work plans of identified potential risk areas.
- Performs data quality reviews on inpatient and outpatient encounters to validate the ICD-10-CM, the Current Procedural Terminology (CPT), and the Healthcare Common Procedure Coding System (HCPCS) Level II code and modifier assignments; verifies Ambulatory Payment Classification (APC) group appropriateness; checks for missed secondary diagnoses and/or procedures; ensures compliance with all APC mandates and

outpatient reporting requirements; monitors medical visit code selection against facility specific criteria for appropriateness; assists in the development of such criteria as needed.

- Performs follow-through reviews that billing accurately reflects accurate coding documentation.
- Creates and monitors reports pertaining to code utilization to identify patterns, trends and variations in the organizations frequently assigned levels of service; investigates and evaluates potential causes for changes or problems; takes appropriate steps in collaboration with the right staff to effect resolution or explain variances.
- Oversees the continuous evaluations of the quality of clinical documentation to identify incomplete or inconsistent documents for inpatient and/or outpatient encounters that impact the code selection and resulting APC/DRG groups and payment; brings concerns to the attention of the Director of Revenue.
- Provides or arranges for training of healthcare professionals in the use of technical coding guidelines and practices, proper documentation techniques, medical terminology and disease as they relate to the DRG, APC and other data quality management.
- Maintains knowledge of current and required coding certifications as appropriate; may perform the most technical complex and difficult coding and abstraction work.
- Selects, assigns, and trains subordinate coding and clerical staff; directs, monitors and evaluates work; reviews and makes decisions regarding leave requests; initiates and implements disciplinary action as needed; assists with and promotes the recruitment and retention of qualified staff as assigned.
- Abides by the Standards of Ethical Coding as set forth by the American Health Information Management Association; reports areas of concern to the Compliance Officer
- Assists the Director by serving as a department representative by attending coding and reimbursement workshops and bringing back information as appropriate; communicates any updates published in third-party payer newsletters, bulletins and/or provider manuals; shares information with facility staff as directed.
- Stays informed about transaction code sets, Health Insurance Portability and Accountability Act (HIPAA) requirements and other future issues impacting health information management functions; keeps abreast of new technology in coding and abstracting software and other forms of automation.
- Demonstrates and maintains competency in the use of computer applications.
- Monitors unbilled account reports, hold lists etc.; for claims awaiting coder review and facilitates the delegation of work in an effort to reduce accounts receivable days for these claims.
- In partnership with appropriate personnel, recommends and implements standardized, organization-wide coding guidelines and documentation requirements; develops and implements training and educational programs for physicians, staff and coders.
- Facilitating/overseeing Medical Records request from 3rd Ensuring timely delivery of secure patient information, i.e. CERT/ADR records
- Project management of multiple initiatives with ability to prioritize and meet deadlines.
- Clear, concise and professional communication to varying audiences dependent on the project and its goals.
- Time management, meetings, travel and deadlines may require hours outside standard 40 hour work week.

## **Supervisory Responsibilities**

Directly supervises ten or more employees in the Coding department. carries out supervisory responsibilities in accordance with the organization's policies and applicable laws.

Responsibilities include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

## **Competencies**

To perform the job successfully, an individual should demonstrate the following competencies:

Adaptability – Maintaining effectiveness in varying environments and with different tasks, responsibilities, and people.

Analysis/Problem Assessment – Securing relevant information and identifying key issues and relationships from a base of information; relating and comparing data from different sources; identifying cause-effect relationships.

Communication - Expressing ideas effectively in individual and group situations (including nonverbal communication); adjusting language or terminology to the characteristics and needs of the audience. Good listening skills.

Compassion - The responsibility to put a patient's or person's interests first, including the duty not to harm, deliver proper care, and maintain confidentiality.

Compliance - Employee has satisfactory completed employers required compliance training. Employee is able to demonstrate an understanding of employers Code of Conduct.

Dependability - Meets commitments, deliverables, deadlines, work independently, accepts accountability, handles change, sets personal standards, stays focused under pressure, and meets attendance/punctuality requirements.

Follow-up - Establishing procedures to monitor the results of delegations, assignments, or projects; taking into consideration the skills, knowledge, and experience of the assigned individual and characteristics of the assignment or project.

Initiative - Making active attempts to influence events to achieve goals; self-starting rather than accepting passively; taking action to achieve goals beyond what is required; being proactive. Practices self-development.

Integrity - Maintaining and promoting social, ethical, and organizational norms is conducting internal and external business activities.

Judgement/ Problem Solving - Recognizes problems and responds, systematically gathers information, sorts through complex issues, seeks input from others, addresses root cause of issues, makes timely decisions, can make difficult decisions, uses consensus when possible, and communicates decisions to others.

Patient Service Orientation - Proactively developing patient/customer relations by making efforts to listen and understand the customer and their needs (both internal and external); anticipating and providing solutions to customer needs; giving high priority to patient/customer satisfaction. Ensures appropriate follow up and is their advocate in determining solutions. The employee uses a variety of communication techniques to effectively express thoughts and ideas and to understand or influence.

Practical Learning - Assimilating and applying, in a timely manner, new job-related information that may vary in complexity.

Quality Orientation/ Attention to detail - Is attentive to detail and accuracy, is committed to excellence, looks for improvements continuously, monitors quality levels, finds root cause of quality problems, owns/acts on quality problems.

Results Driven& Execution - Accountable for meeting or exceeding individual and/or department goals and objectives. Committed to producing results that will achieve company objectives. Sets priorities and organizes time to meet or exceed goals, follows up, and takes personal responsibility for results whether they are positive or negative.

Team work/ Collaboration - Working effectively with team/work group or those outside formal line of authority (e.g., peers, senior managers) to accomplish organizational goals; taking actions that respect the needs and contributions of others; contributing to and accepting the consensus; subordinating own objectives to the objectives of the organization or team. Listens to others and values opinions.

Technological /Professional knowledge - Having achieved a satisfactory level of technical and professional skills/knowledge in job-related areas; keeping abreast of current developments and trends in area of expertise.

Work Standards - Setting high goals or standards of performance for self, direct reports, others, and the organization; being dissatisfied with average performance; self-imposing standards of excellence rather than having standards imposed by others.

**Qualifications** To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

### **Education and/or Experience**

A Bachelor's degree is preferred but not required. A minimum of 4 years related physician coding/billing experience and/or training; or equivalent combination of education and experience. Position requires flexibility in work hours, multi-tasking, and excellent computer skills.

### **Language Skills**

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively before groups of customers or employees of organization.

### **Mathematical Skills**

Ability to calculate figures and amounts such as discounts, interest, commissions, proportions, percentages, area, circumference, and volume. Ability to apply concepts of basic algebra and geometry.

### **Reasoning Ability**

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

### **Computer Skills**

To perform this job successfully, an individual should have proficient knowledge of Microsoft Excel Spreadsheet software; Microsoft Word Processing software, Outlook and ADP Payroll systems. Knowledge of Computers, Fax, Portals, Uploading, Downloading, Athena or other Electronic Medical Record System.

### **Certificates, Licenses, Registrations**

AAPC Certified Professional Coder

**Physical Demands** The physical demands described here are representative of those 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.

While performing the duties of this Job, the employee is regularly required to sit; use hands to finger, handle, or feel; reach with hands and arms; climb or balance and talk or hear. The employee is frequently required to stand and walk. The employee is occasionally required to stoop, kneel, crouch, or crawl. The employee must occasionally lift and/or move up to 25 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and ability to adjust focus.

**Work Environment** The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The noise level in the work environment is usually moderate depending on business activity of the office.

## Receipt and Acknowledgement

I acknowledge and understand that:

- Receipt of the job description does not imply nor create a promise of employment, nor an employment contract of any kind, and that my employment is at-will.
- The job description provides a general summary of the position in which I am employed, that the contents of this job description are job requirements and, at this time, I know of no limitations which would prevent me from performing these functions with or without accommodation. I further understand that it is my responsibility to inform my supervisor at any time that I am unable to perform these functions.
- Job duties, tasks, work hours and work requirements may be changed at any time.
- Acceptable job performance includes completion of the job responsibilities as well as compliance with the policies, procedures, rules and regulations of the Home and the Corporation.
- I have read and understand this job description.

Print Employee Name: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_