

THE ORTHOPEDIC INSTITUTE OF PENNSYLVANIA

family of care



Job Title: Charge Entry Clerk (Certified Professional Coder)

Date Created: 4/9/2018

Reports To: Billing Manager

Last Revision:

Department: Charge Entry

FLSA: Non-Exempt

GENERAL SUMMARY OF DUTIES: Certified Professional Coder (CPC) to provide quality review and analysis of a wide range of patient medical records and ensure accuracy of coding and maintain records in accordance with accepted medical and legal standards. Responsible for reviewing medical records to assure proper billing of the medical record, comparison of physician chosen CPT and ICD-10 codes to the physicians' documentation to substantiate the level of coding, physician services to include identification of professional services in and complete review of medical records to accurately optimize all professional services documented for billing.

ESSENTIAL FUNCTIONS

- Review of electronic medical records initiated by a health care provider.
- Coding of paper based records may need to be accomplished.
- Verifying and coding of the diagnosis, evaluation and management, procedures or other codes required for the completeness and accuracy of the record.
- Review and verify component parts of medical records to ensure completeness and accuracy of diagnosis, operations, and special therapeutic procedures.
- Codes and/or reviews principal diagnosis, co-morbidities, complications, therapeutic and diagnostic procedures, supplies, materials, injections, and drugs with International Classification of Diseases (ICD10), Current Procedural Terminology (CPT), Health Care Financing Administration Common Procedure Coding Systems (HCPCS – all levels, and any other coding classification systems that may be required).
- Perform edit checks on data entered prior to transmittal and corrects errors as indicated.
- Analyze medical record documentation for consistency and completeness for coding purposes using established criteria and regulations.
- Examine all documents in the record for authorized signature and patient identification to ensure all documents contain sufficient documentation to support the diagnosis and treatment administered, and the results obtained are adequately described.
- Identify Third Party Billing information per Data Quality Directives and identify lack of proper documentation to on site auditor or clinical and Data Quality Staff.
- Perform other miscellaneous administrative duties as assigned.

EDUCATION

- High school diploma or equivalent General Educational Development (GED) certificate.
- Certified Professional Coder (CPC) is required.

EXPERIENCE

- At least one year of coding experience in ICD-10, CPT, and E&M coding in a hospital or healthcare setting.
- Coding experience in Operative reports is preferred.

KNOWLEDGE

- Knowledge of medical billing practices and office policies and procedures.
- Knowledge of insurance
- Knowledge of all confidentially requirements regarding patients and strict maintenance of proper confidentiality on all such information.
- Knowledge of medical terminology, basic anatomy and physiology
- Knowledge of grammar, spelling and punctuation

SKILLS

- Skill in operating computers, calculators, copiers, printers, fax machines, and telephones
- Skill in using a 10 key calculator
- Excellent math skills
- Excellent communication skills, both written and oral
- Must possess tact and diplomacy
- Must possess sufficient manual dexterity to perform the essential responsibilities to meet customer needs effectively
- Demonstrates initiative to provide quality of services and improve efficiency
- Maintains positive working relations with co-workers
- Time management skills

ABILITIES

- Ability to deal professionally and courteously, and efficiently with the public and to remain calm under stress.
- Ability to understand and interpret policies and regulations.
- Ability to prepare documents in response to complaints and inquiries
- Ability to examine documents for accuracy and completeness
- Ability to communicate effectively in the English language

ENVIRONMENTAL/WORKING CONDITIONS

Work is performed in an office environment. Involves frequent contact with the public. Work may be stressful at times. Contact may involve dealing with angry or upset people.

PHYSICAL/MENTAL DEMANDS

Work requires hand dexterity for office machine operation, stooping and bending to files and supplies, mobility to complete errands, or sitting for extended periods of time. Must possess visual and auditory acuity in order to communicate with co-workers, patients and other customer groups. Possible exposure to chemical hazards. Must be able to lift up to 25 lbs.

Employee Print

Date

Employee Signature

Date