



Today's Date: May 10.2024

Job Listing: Insurance Coder, Ottumwa, Iowa

Summary: Codes all Medical, OBGYN, Peds, Dental and Behavioral Health charges daily. Performs all defined services and other related duties in accordance with the mission of River Hills Community Health Center. Certified Professional Coder (CPC), Certified Coding Specialist for Physicians (CCS_P), or Registered Health Information Tech (RHIT) required. If not certified, need the ability to become certified in the near future.

Essential Functions:

1. Responsible for coding all Medical, OBGYN, Peds, Dental, Hospital and Behavioral Health charges.
2. Ability to analyze and interpret patient medical records to identify billable services.
3. Interacts with Providers regarding billing and documentation policies, procedures and regulations.
4. Provides customer service to internal and external customers.
5. Verifies insurance coverage.
6. Research information related to payer benefits, provider questions, management questions or to obtain clarification of conflicting or non-specific documentation.
7. Works with lab to provide diagnosis codes for billing.
8. Handles confidential information with tact and discretion on a need-to-know basis.
9. Works with providers and patients regarding fees reimbursement and denial questions.
10. Works with providers to correct coding issues with super bills.
11. Works closely with the billing staff to resolve any reimbursement issues with insurance companies.
12. Reconciles Super bills monthly.
13. Supports a service-orientated atmosphere in accordance with RHCHC Mission and Philosophy.
14. Reconciles the lab bill with the billing system to ensure all charges have been captured.
15. Follows policies and procedures.
16. Develops and maintains own competence.

17. Maintains a safe working environment and practices safe working habits. Accurately assigns and sequences ICD-10-CM/CPT/HCPCS codes to diagnoses and procedures.
18. Assures final diagnoses and procedures as documented by the provider are valid and complete.
19. Analyzes provider documentation to assure the appropriate Evaluation and Management (E&M) levels are assigned using the correct CPT.
20. Abstracts all necessary information from health records to identify secondary and co-morbid conditions.
21. Educates clinical staff regarding appropriate coding and or medical record documentation requirements.
22. Audits medical records and charges to ensure compliance with coding standards.
23. Performs medical record audits when assigned.
24. Reports compliance issues pursuant to the organizational Compliance Program requirements.
25. Updates job knowledge by participating in educational opportunities.
26. Complies with Corporate Compliance Program policies and code of conduct, and all laws, rules and regulations relating to the position. Has a duty to report any suspected violations of the law or the standards of conduct to his/her immediate supervisor, the HR Director, or the Compliance Officer.

Qualifications:

Education	High school diploma.
Experience	Minimum of 1 year medical office experience.
Cognitive skills (Language, Math, Reasoning Ability)	Basic-language, intermediate math, intermediate reasoning ability.
Computer skills	10-key calculator, personal computer
Other skills	Ability to communicate clearly. Ability to perform multiple tasks with frequent interruption. Ability to be very detail oriented. Strong public relations/customer service skills. Knowledge of medical terminology and ICD-10 and CPT billing codes
Certificates & Licenses	Certified Professional Coder (CPC), Certified Coding Specialist for Physicians (CCS_P), or Registered Health Information Tech (RHIT) required.
Work Environment Hazards	None.
Personal Protective Equipment Required	None.
Physical Demands Summary	1. Requires hand dexterity required for office machine operation, stooping and bending to files and supplies, mobility to complete errands, or sitting for extended periods of time.

	<ol style="list-style-type: none">2. Requires visual acuity to perform required tasks to include the ability to see and read PC screens and communicate with a computer, whether it is with a mouse and keyboard, voice recognition software, or other available hardware/software tools.3. Required to be able to write legibly and read printed or handwritten materials.
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Hours: Generally Monday through Thursday nine hour days; Friday 8 a.m. to Noon. reasonable flexible schedule negotiable.

Supervisor: Revenue Cycle Director.

Deadline: Position will remain open until a pool of qualified applicants is received.

Submit cover letter, resume' and three references to Steve Haigh, HR Director at recruiting@riverhillshealth.org

Or, mail to:

River Hills CHC
PO Box 458
Ottumwa, Iowa 52501

River Hills CHC offers a competitive wage and full benefit package.