



**VALLEY HEALTH TEAM**  
LIVE BETTER. VIVE MEJOR.  
JOB DESCRIPTION

POSITION:	CERTIFIED CODER
REPORTS TO:	BILLING MANAGER
POSITIONS SUPERVISED:	NONE
CLASS:	REGULAR
CAT:	FULL-TIME
	NON-EXEMPT

**BASIC FUNCTIONS:**

Under the supervision of the Billing Manager, the Certified Coder will review, analyze, and assure the final diagnoses and procedures as stated by the practicing providers are valid and complete. Accurately codes office procedures and hospital procedures for providers to ensure proper reimbursement. Provides education to the providers to ensure proper completion of Electronic Health Records and proper assignment of ICD-9-CM, ICD-10-CM, HCPCS and CPT codes.

**DUTIES AND RESPONSIBILITIES:**

1. Audit records to ensure proper submission of services prior to billing on pre-determined selected charges.
2. Receive hospital information to properly bill provider services for hospital patients.
3. Supply correct ICD-9-CM/ICD-10-CM diagnosis codes on all diagnoses provided.
4. Supply correct HCPCS code on all procedures and services performed.
5. Supply correct CPT code on all procedures and services performed.
6. Contact providers to train and update them with correct coding information.
7. Attend seminars and in-services as required to remain current on coding issues.
8. Audit medical records to ensure proper coding completed and to ensure compliance with federal and state regulatory bodies.
9. Accurately follow coding guidelines and legal requirements to ensure compliance with federal and state regulatory bodies.
10. Maintain compliance standards in according with the compliance policies and the Code of Conduct; reports compliance problems appropriately.
11. Determine the final diagnoses and procedures, stated by the physician or other health care providers, are valid and complete.
12. Perform a comprehensive review for the record to assure the presence of all component parts such as: patient and record identification, signatures and dates where required, and all other necessary data in the presence of all reports which appear to be indicated by the nature of the treatment rendered.
13. Evaluate the record for documentation consistency and adequacy. Ensure that the final diagnosis accurately reflects the care and treatment rendered; Review the records for compliance with established reimbursement and special screening criteria.
14. Analyze provider documentation to assure the appropriate Evaluation & Management (E&M) levels are assigned using the correct CPT code.
15. On a temporary basis, may be required to work at any satellite facility.
16. Contribute to team effort by assisting other departments as needed and while maintaining confidentiality of VHT's business.
17. Work cooperatively with all staff members and outside sources in a professional manner to deliver a high level of service.
18. Observe and practice all VHT Patient Experience Service Standards as outlined in "World Class Practices: My Commitment to Care (which I have read and signed). Practice CICARE when interacting with patients, their families, visitors, or internal customers.
19. Practice CICARE phone etiquette during all phone interactions.
20. Always exercise courtesy whenever patients, family members, visitors and co-workers are present.

21. Respect privacy and dignity of our patients, family members, visitors and co-workers.
22. Maintain professionalism in the presence of patients, their families, visitors and co-workers.
23. Act as a role model, verbally and behaviorally demonstrating skill, enthusiasm, positive problem solving, commitment and loyalty to the profession and the organization.
24. Follow applicable regulations: Joint Commission, OSHA, HIPAA, and CLIA.
25. Serves and protects the practice by adhering to professional standards, policies and procedures, federal, state, and local requirements, and The Joint Commission Accreditation of Healthcare Organization standards.
26. Perform other related duties, which may be inclusive, but not listed in the job description.

**MINIMUM QUALIFICATIONS:**

1. High School Diploma or GED equivalency
2. Medical Coding Certificate – RHIT or CPC certification required
3. Minimum two (2) years using ICD-9-CM, CPT, HCPCs or equivalency
4. Must be self-motivated and have the ability to prioritize work and meet deadlines
5. Strong customer service skills (preferably within a service industry)
6. Strong, effective communication skills
7. Modern office practices and procedures (including email)
8. General computer skills with demonstrated proficiency with MS Office Suite (e.g. Word, Excel, etc.)
9. Knowledge of federal laws and regulations affecting coding requirements
10. Knowledge of billing practices required, FQHC billing preferred
11. Knowledge of Electronic Health Records
12. Extensive knowledge of official coding conventions and rules established by the American Medical Association (AMA) and the Center for Medicare and Medicaid Services (CMS) for assignment of diagnostic and procedural codes
13. Fluent conversational English/Spanish strongly preferred
14. Ability to be flexible with work schedule and available to work at all site locations
15. Must have own transportation, valid California Driver's License and current proof of automobile insurance coverage.
16. Demonstrated ability to provide world-class patient experience using CICARE principles and practices. Ability to be proactive and to go above and beyond the call of duty; take initiative to provide a world class patient experience in all encounters via email, phone or in person.

**TYPICAL WORKING CONDITIONS:** The office setting is a normal work environment. Occasionally work during early morning, evening or weekend. May be subjected to temperature variances in the office.

**TYPICAL PHYSICAL DEMANDS:** Requires sitting, standing, or walking for up to eight hours a day. Some bending, stretching, or reaching may be necessary. Lifting up to 40 pounds may be required on occasion. Vision must be correctable to 20/20 and hearing must be in the normal range for telephone contact.

**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.

While performing the duties of this job, the employee may come in contact with hazardous equipment such as liquid nitrogen, cleaning agents, and sharps. The noise level in the work environment is usually moderate but may become excessively loud with the increased patient flow during a busy clinic day.

I, the employee, understand the responsibilities and standards of my position as listed above, and I agree to fulfill them to the best of my ability. I understand I am an at-will employee and can be terminated at any time with or without cause. I also understand the Valley Health Team Inc. will not be responsible in any manner for termination's which are due to defunding of Federal or State Contracts. I also agree that the VHT Board of Directors have the right to modify the Personnel Policies which govern my employment at any time.

BOARD APPROVED:

This organization is an Affirmative Action Equal Opportunity Employer. It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

BOARD APPROVED: