

# Coder Analyst

*Frisco, Texas*

## Summary

As a part of the Tenet and Catholic Health Initiatives family, Conifer Health brings 30 years of healthcare industry expertise to clients in more than 135 local regions nationwide. We help our clients strengthen their financial and clinical performance, serve their communities and succeed at the business of healthcare. Conifer Health helps organizations transition from volume to value-based care, enhance the consumer and patient healthcare experience and improve quality, cost and access to healthcare.

Support and provide coding and compliance training to physicians, clinical personnel, billing, and/or other client staff. Establish effective communication with physicians, clinical staff, and/or hospital staff to address documentation, coding, and reimbursement issues. Use knowledge of coding and compliance guidelines to identify potential billing / reimbursement issues. Participate in special audits and system administration as necessary.

## Responsibilities

- Performs diagnosis data submissions to Client, Vendors and internal Stakeholders
- Develop monthly productivity and revenue projections
- Audit diagnosis submission files to ensure accuracy
- Prepares data collection reports for leadership
- Monitors diagnosis submission progress
- Analyze diagnosis data to improve submission quality (Chart Review Delete Process)
- Works to resolve workflow, systems and complex matters related to coding

## Qualifications:

### *KNOWLEDGE, SKILLS, ABILITIES*

*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.*

- Proficient in outpatient diagnosis coding guidelines
- Proficient in CPT/HCPCS code assignment including Evaluation & Management facility coding guidelines
- Knowledge of MS-DRG classification and reimbursement structures
- Adept at comparing documentation, code assignment and charge in the financial system for accuracy and completeness
- Functional knowledge of facility EMR, encoder and other support software

*EDUCATION / EXPERIENCE*

- *Required:* Three (3) to five (5) years experience performing medical record coding in acute care setting
- *Required:* High school graduate or equivalent is required
- *Preferred:* Associate or Bachelor s Degree in Health Information, Nursing, or other related field, or formal coding classes completed and passed

**For More Information / To Apply**

<https://jobs.tenethealth.com/job/frisco/coder-analyst-remote/1127/16221580>