

Certified Medical Coder

Olathe, KS

Summary

The Medical Coder extracts clinical information from a variety of medical records and assigns appropriate procedural terminology and medical codes (e.g., ICD-10-CM, CPT) to patient records. The Medical Coder assumes ownership and leads advanced and highly specialized administrative/operational/customer support duties that require independent initiative and judgment.

Responsibilities:

- The Medical Coder confirms appropriate diagnosis related group (DRG) assignments. Analyzes, enters and manipulates database.
- Responds to or clarifies internal requests for medical information. Decisions are regarding the daily priorities for an administrative work group and/or external vendors including coordinating work activities.
- Monitor progress towards schedules/goals, and often oversees work of others and/or is the primary administrative owner of a main process, program, product or technology.
- Works within broad guidelines with little oversight.

Qualifications

- High School Diploma
- Certified medical coder with one of the following certifications CPC, CPC-H or CPMA from AAPC or CCA, CCSP, CCS from AHIMA
- strong ICD 10 experience
- EMR experience (ECW, EPIC, etc)
- Experience in MS office products
- strong communication skills written and verbal
- strong team player and emotional intelligence
- ability to make decisions based on independent thinking and business objectives

Preferred Qualifications

- Bachelor's Degree
- 5+ years of experience as a certified medical coder
- Previous HCC coding experience

Humana

Careers

For more Information / To Apply:

https://humana.wd5.myworkdayjobs.com/en-US/Humana_External_Career_Site/job/Overland-Park-KS/Certified-Medical-Coder_R-226594