

## Medical Coder and Billing Coordinator

*Arlington, VA*

### Summary

The main role of the Certified Coder and Billing Coordinator is to ensure accurate coding of medical records, obtain payments and/or recommends disposition of hospital accounts. Maintain Effective follow up and collection activities on assigned accounts, so the organization is paid for medical services rendered. They are responsible for the accurate flow of medical information and patient data between physicians, patients and third-party payers. Analyzes patient medical records to assure that documentation by providers conforms to legal and procedural requirements. Assigns specified codes to medical diagnoses and/or clinical procedures. Interacts with physicians and other providers regarding billing and documentation policies and procedures. Provides prompt and courteous service to inquiries from patients or insurers.

### Responsibilities:

- Assist patients on site setting up payment arrangements according to the department policies and/or making corrections in EPIC. Resolves billing issues as needed.
- Coordinate with Refund Specialist to resolve any credit balance accounts.
- Appeal and track insurance claims not paid correctly or denied for various reasons.
- Analyzes and interprets patient medical records to identify and determine amount and nature of billable services; assigns or reviews for accuracy, and sequences appropriate diagnostic/procedure billing codes in compliance with requirements of third party payor requirements.
- Coding treatment information using Common Procedure Terminology (CPT) codes.
- Interacts with physicians and other patient care providers regarding billing and documentation policies, procedures, and regulations; obtains clarification of conflicting, ambiguous, or non-specific documentation.
- Monitors billing performances to ensure optimal reimbursement while adhering to regulations prohibiting unbundling and other questionable practices; prepares periodic reports for clinical staff identifying unbilled charges due to inadequate documentation.

### Qualifications

- High School Diploma or Equivalent preferred.
- Associate's Degree preferred.
- Two years of coding experience in pediatrics and extensive knowledge of VA Medicaid Regulations.
- Certified Professional Coder (CPC) required.

### For more information / How to Apply:

<https://careers-virginiahospitalcenter.icims.com/jobs/4565/medical-coder-and-billing-coordinator/job>