Coding Audit Response Lead

Novant Health
Job Location: Winston-Salem, NC
Full Time / PRN 7a-3:30p

OVERVIEW:

The Coding Audit Response Lead position coordinates responses to external and internal audits that include an assessment of ICD-10-CM, ICD-10-PCS, CPT or HCPCS codes and the accuracy of PPS assignment for Acute Care Facilities. Audits will include but will not be limited to: Commercial Payers, RAC, CERT, Compliance Reviews, Corporate Coding team member quality assurance and other Focus Audits as requested by Senior Leadership. Responses will be coordinated through the Audit Response Lead and the Audit Response Lead will ensure completion and delivery of results. The Audit Response Lead will work in tandem with the Coding Audit Response Supervisor to meet the needs of our customers and team members. The Audit Response Lead will support the Coding Audit Response Supervisor and the Coding Manager by proactively monitoring (including corresponding communications and escalation paths) significant issues in audit, coding records management, the daily responsibilities of the Coding Audit Response Team, status of projects, barriers and successes, will identify trends and monitor outcomes. The Audit Response Lead will work closely with other members of the Corporate Coding Production Team in addressing issues related to accurate/timely coding, documentation, unbilled management and denials. The Audit Response Lead will monitor communication and process all requests from outside and interdepartmental customers. This position will often work with multi-disciplinary teams in addressing issues related to coding and clinical documentation improvement operations (as applicable).

QUALIFICATIONS:

- **Education:** High school diploma required. 2 Year / Associate Degree, required. Bachelor's degree preferred.
- **Experience**: Five years minimum of hospital coding experience (in all core areas), required. Minimum one year of experience coding auditing, preferred.
- **Licensure/Certification**: RHIA/RHIT, required. CCS, CCS-P, CPC, CPC-H, CIRCC, preferred.
- **Additional skills required**: Extensive knowledge of ICD-10-CM and ICD-10-PCS and CPT coding principles and guidelines. Extensive knowledge of reimbursement systems. Audit experience preferred. Extensive knowledge of federal, state, and payer specific regulations and policies pertaining to documentation, coding and billing. Excellent verbal and written communication skills; Must be detailed oriented and analytical in nature; Medical Terminology, advanced level; Anatomy and Physiology, advanced level with laboratory experience; Advanced level coding courses ICD-10-CM, ICD-10-PCS and CPT-4; computer skills in databases, data entry experience with 3M Encoder software/references, Microsoft Office to include Outlook and Excel. Zoom Video Conferencing, Epic/Dimensions, Pharmacology, Clinical Documentation Improvement skills. Must have strong leadership skills, interpersonal skills, and organizational skills. Excellent written and oral communication skills. Excellent analytical skills.

RESPONSIBILITIES:

It is the responsibility of every Novant Health team member to deliver the most remarkable patient experience in every dimension, every time.

- Our team members are part of an environment that fosters team work, team member engagement and community involvement.
- The successful team member has a commitment to leveraging diversity and inclusion in support of quality care.
- All Novant Health team members are responsible for fostering a safe patient environment driven by the principles of "First Do No Harm".

For More Information/ To Apply:

https://external-novanthealth.icims.com/jobs/129294/coding-audit-response-lead/job