

Manager of Physician Billing & Coding

Location: Weymouth, MA

Full time

Shift: Day

Summary

Under the direction of the Director of Coding and Revenue Integrity, the Manager of Physician Billing & Coding manages internal coding staff and Non employed coding vendors, assuring accurate and timely cash flow for professional coding, to facilitate billing of provider services, and where applicable related facility procedures. The Manager, Physician Coding supports coder scheduling, education and cross training to ensure facility standards of days to final coded are maintained. He/she identifies trends and collaborates with physician educators to develop and initiate training programs for the employed physicians, nurse practitioners, certified nurse midwife and physician assistants. Under the direction of the Director of Coding and Revenue Integrity, the coding manager may initiate audits to ensure documentation compliance and standards. Supervisory Responsibilities Responsible for supervising others - Approximate number of direct reports 9 - Approximate number of indirect reports 10.

Responsibilities

- Responsible for the day to day Coding Operations of the numerous practices operated by the department.
- Maintain internal and external quality and production standards established by the organization and under the Direction of the Revenue Cycle Director Report quality and production achieved at least monthly, as well as any interventions established to achieve standards
 - Coordinate with physician educators to support clinical and clerical staff in the various coding concerns.
 - Coordinate with Revenue Cycle, PB Operations and/or billing to implement system edit requests to remove obstacles to coding and production, or identify trends for correction.
 - Review all internally requested coding edits at least annually and timely to national implementation changes where applicable
 - ICD-10 – by October 1
 - CPT – By January 1
- Responsible for the coordination, management and training of the various Coding systems used.
- Collaborates with the Physician Educator to Identify employed clinicians training and education needs and makes recommendations for appropriate interventions.
 - Assess employed physician, nurse practitioners, physician assistant and other clinical documentation to support accurate coding.
 - Recommends trends to physician educators to address identified training needs.
- Designs and develops training programs: Develops and reviews all training materials used for coding training/education programs to ensure accuracy and relevance to the program objectives.

- Works in conjunction with the Director of Revenue Integrity to establish coding quality and productivity standards
- Designs training programs with course objectives written in performance-based language and linked to job-related competencies.
- Designs program content, training materials and instructional methods to meet the learning style of the employed coders. Communicates quality and production standards to non-employed coding vendors, and monitors to ensure adherence.
- Conducts and evaluates training programs: Organizes and presents course content based on adult education learning principles.
 - Uses audio-visual aids, including video, and computers to enhance presentations.
 - Revises/modifies materials, delivery methods and instructional tools as necessary based on employed staff feedback to ensure training objectives are met.
 - Participates in Professional Operations and Professional Denial Billing efforts to improve Revenue Cycle. Performs audits and implements corrective projects under the direction of these two initiatives.
- Self Development: Participates in professional societies or organizations relevant to E/M, ICD-10 and CPT-4.
 - Attends continuing education activities to enhance professional development and to maintain proficiency in adult learning techniques and health care coding trends. Ensures all employed coders maintain proficiency and certification.
- Adheres to the South Shore Health Center review and audit process to support and assist coding compliance including actions to be taken such as education. be.
- Provides Medicare Reimbursement, appropriate modifier assignment and NCCI guidance as requested.
- Gather and distribute timely information regarding coding updates and CCI edits PB Operations, physician educators and billing as appropriate.
- Denial and Delay Management
 - Reviews trends provided by billing denials management
 - Determine actions and procedure changes to be taken to reduce same
- Safety Awareness – Fosters a “Culture of Safety” through personal ownership and commitment to a safe environment.
- Technology- Embraces technological solutions to work process and practices
- Technology and Learning
 - Participates in continued learning and possess a willingness and ability to learn and utilize new technology and procedures that continue to develop in their role and throughout the organization.
 - Embraces technological advances that allow us to communicate information effectively and efficiently based on role.

For More Information/How to Apply:

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