

Compliance Auditor

The University of Vermont Medical Center

Job Location: Burlington, VT

Full Time, Days (8am-5pm)

JOB DESCRIPTION:

The Compliance Auditor serves to educate, encourage and assist those across the UVM Health Network to always “do things right.” The Compliance Auditor does this by: (i) developing and providing both orientation training for new providers and on-going education of employees involved in the preparation and/or submission of claims for the payment of professional services; (ii) serving as a Network-wide resource for and authority on issues related to the documentation, coding and billing of professional services; (iii) serving as a resource for and providing educational activities with the Coders and Coding Educators within the Health Information Management (HIM) and Professional Revenue (PRD)) Departments; (iv) auditing claims for payment prepared on behalf of individual billing providers in accordance with the Annual Review of Billing Providers Policy and reporting audit findings to the Senior Compliance Auditors; (v) identifying billing related risk areas, devising and conducting audits of such risk areas; (vi) reporting on audit findings to billing providers, as well as administrative and clinical leaders, and non-clinical staff , and making recommendations based upon audit findings (e.g., identifying operational and revenue opportunities); (vii) keeping current on all applicable legal and regulatory requirements and ensuring that departmental guidance and audit standards conform to such requirements; (viii) reviewing and developing departmental and organizational policies that promote compliance with all applicable legal and regulatory requirements; (ix) engaging in special investigations in response to external requests for records and audits; and (x) being an “ethics champion.”

EDUCATION:

Bachelor’s degree in business, health care operations or a clinical field required. Substantial work related experience as an auditor, along with academic credentials, may serve as a substitute. Master’s degree in business or health care related field preferred.

Must possess certification issued by the American Academy of Professional Coders (AAPC). Certification as CPC-E/M Auditor preferred.

EXPERIENCE:

Must possess three years of work related experience in coding and billing for professional services and one year of auditing experience.

FOR MORE INFORMATION/TO APPLY:

<https://www.uvmhealth.org/medcenter/health-careers/job-postings/compliance-auditor>