

COMPLIANCE ANALYST

Community Health System

Job Location: Fresno, CA

Full Time, Days

OVERVIEW:

All positions are located in Fresno/Clovis CA

We're looking for a Compliance Analyst to join our team! In your role, you will be essential to providing compliance and coding support designed to add value consistent to mission. From conducting compliance-related reviews of entities, to working closely with compliance and internal audit offices, to auditing charts for correct coding, documentation and billing, you will work to ensure compliance with official guidelines and policies.

RESPONSIBILITIES:

In your role, you will:

- Provide assistance and support to VP /Director of Compliance and the Chief Audit, Enterprise Risk Management, Privacy, Security, Ethics & Compliance Officer) in the development, implementation and maintenance of Community Health System's Compliance Program.
- Be experienced in Charge Description Maintenance or performing medical records and billing reviews, including clinical documentation, medical terminology, codes and ensuring the accuracy of charges and reimbursement.
- Possess knowledge of federal, state and private payer guidelines, including experience working with enterprise databases and analytics.
- Assist with education and training on documentation, coding and billing integrity as assigned.
- Provide support to VP /Director in administration of compliance committee meetings.

QUALIFICATIONS:

Education:

- High School Diploma, General Education Development (GED) or Completion of a CMC Approved Individualized Education Plan (IEP) Certificate required
- Associate's Degree in Accounting, Finance, Information Systems, Computer Science, Nursing, Health Care, Compliance or related field preferred

Experience

- One of the following is required:
 - 8 years of experience in Hospital Internal Audit, Compliance and/or Charge Master Description maintenance and/or related Healthcare field, including Regulations if qualifying with High School Diploma
 - 5 years of experience in Healthcare Compliance or related Healthcare field, including Regulations or Audit if qualifying with Associate's Degree
 - 3 years of experience in Healthcare if qualifying with Bachelor's Degree
- Experience in Charge Description Maintenance or performing medical record and billing reviews including clinical documentation, medical terminology, codes (CPT, HCPCS, ICD-10-CM and revenue) and reviews for charge and reimbursement accuracy. Knowledge of federal, state and private payer guidelines. Experience working with enterprise databases and analytics. Demonstrated experience working with MS Office and Electronic Health Records required

LICENSES AND CERTIFICATIONS:

- One of the following is required within 1 year of hire or transfer into position
 - CHC - Certified Healthcare Compliance
 - CCA - Certified Coding Associate
 - CCS - Certified Coding Specialist CEDC - Certified Emergency Department Coder
 - CMAS - Certified Medical Audit Specialist
 - CPMA - Certified Professional Medical Auditor
 - CPC - Certified Professional Coder
 - COC - Certified Outpatient Coder
 - CIC - Certified Inpatient Coder
 - RHIA - Registered Health Information Administrator
 - RHIT - Registered Health Information Technician

FOR MORE INFORMATION/TO APPLY:

<https://jobs.communitymedical.org/job/2022-29581/Compliance-Analyst>