

# Medical Coder III

University of Vermont Health Network

Job Location: Montpelier, VT

Full Time

## JOB DESCRIPTION:

The Medical Record Coder Level 3 will have 4 years of coding expertise where applying knowledge of a unique specialty with a stand-alone credential enhances the coder's level of expertise in this specialty area of coding. The specialized credential must be obtained before level 3 can be obtained. The duties assigned to this level are strategically defined by the organizational needs.

The Medical Records Coder 3 will apply knowledge of their specialized field. There is an established standard for this position that must be met, which is described in the below duties. Employee will apply coding knowledge with anatomy and physiology, medical terminology, and pathology of disease processes while analyzing clinical documentation of inpatient and/or outpatient records. Follows CVMC compliance and HIM coding compliance policies and meets productivity standards to maintain financial goals. Utilizes various electronic information systems to accomplish coding including all of our various electronic information systems and tools such as Anthem and CMS for Medical Necessity and other regulatory information as deemed appropriate. Must have knowledge of charge master and charge maintenance. Effectively communicates with and acts as a resource to health care providers, department managers, and staff to resolve documentation, charge or other issues as they arise to ensure accuracy of coding and reimbursement. Employee continually seeks to improve coding knowledge through various mediums including seminars, articles, networking, web access and other as available.

## JOB QUALIFICATIONS:

- Must have successfully completed a course with certification of specialty credential strategically defined by the organization. Must successfully complete courses in Medical Terminology and Anatomy and Physiology. Candidate should have knowledge of current American Medical Association and American Health Association Coding Guidelines, State and Federal Regulations, Professional Services and Compliance. Must have the aptitude to review and interpret documentation for the purpose of accurate coding and charging practices.
- High school diploma or equivalent degree, coding certification through the American Health Information Management Association or the American Academy of Professional Coders. Employee is expected to maintain specialized coding certification to remain at the Medical Records Coder 3 position. Should specialized certification lapse, the employee will move to the Medical Records Coder 2 position and will be expected to attain certification again within the year.
- This level of specialized credential is defined by the organizations strategic needs defined by the departmental head.
- Minimum of 4 years of coding experience utilizing ICD-10 and CPT-4 coding. Must have specialized credential defined by the organizational needs of the department.

## FOR MORE INFORMATION/TO APPLY:

<https://www.cvmc.org/about-cvmc/careers/job-postings/medical-coder-iii>