

Revenue Compliance Auditor/Educator

Yale New Haven Health

Job Location: New Haven, CT

Full Time, Days

JOB DESCRIPTION:

To assist in the planning, organizing, and completion of auditing activities required to comply with federal guidelines and other compliance-related requirements. To identify lost revenue opportunities and any overpayments made due to errors in coding, insufficient medical record documentation, etc. To increase and strengthen health care providers' awareness and understanding of medical record documentation guidelines and coding principles. Serves as a role model for ethical management behavior and promotes an awareness and understanding of the System's Code of Conduct and Privacy and Corporate Compliance Program. Assists the Manager, System Revenue Integrity in assessing risk and developing an auditing plan to support the overall compliance plan. Interacts with all levels of management within the Health System.

ESSENTIAL FUNCTIONS:

- Under the direction of the Manager, System Revenue Integrity, assists in the performance of risk analysis to identify areas with greatest potential for non-compliance with governmental and internal requirements.
- Performs and assists in coordinating revenue integrity auditing of services provided to or by Yale New Haven Health System. Provides recommendations to improve documentation or billing systems and to correct any discrepancies discovered during audits to prevent reoccurrence of such discrepancies and to promote ethical practices consistent with the Compliance Program.
- Coordinates with the Compliance & Privacy Officers and Compliance Specialists at each Delivery Network to develop and oversee compliance audit projects in areas of inpatient and outpatient billing, assisting in government and third party payor audits and reviews as requested.
- Works with department management to perform comprehensive compliance audits as designed and directed via the Annual Compliance Work Plan. Maintains documentation of methods used and individuals involved in verifying compliance; documented identified issues, corrective actions taken, and improvements implemented. Establishes and implements best practices for audit working paper documentation, security, and retention.
- Schedules meetings with appropriate department managers to discuss audit initiation. Consults with senior management and staff upon the conclusion of audits, both orally and in writing, to describe observations and recommend corrective action which will enhance compliance.
- Assists in the development of the audit scope and objectives. Creates final audit reports for review by the Manager, System Revenue Integrity and the Delivery Network Compliance & Privacy Officers.
- Works with external auditors, hired as independent contractors, to pull audit data and to finalize audit finding reports.
- Assists in the development of policies and procedures for auditing medical records for compliance with required documentation guidelines including completeness and accuracy of coding. Makes recommendations which are consistent with regulatory requirements for coding/ documentation, to assure that services rendered are documented and bills are submitted appropriately as an integral part of Yale New Haven Health System's overall Compliance Program.
- Maintains a regular schedule of auditing activities, involving department directors and clinical staff as needed to attain effectiveness of the overall Compliance Program.
- Oversees focused, technical education for physicians and other clinical staff to promote knowledge regarding medical record documentation guidelines, billing rules and related standards.
- Regularly assists in the development and presentation of programs to staff to accomplish educational objectives as set forth in the Compliance Program.
- Supports Yale New Haven Health System's efforts towards appropriate billing processes in compliance with federal regulations by working closely with financial, information systems, and billing staff.

- Supports Yale New Haven Health System's efforts towards establishing appropriate guidelines for compliance with third party requirements.
- Participates in charge master reviews and other coding reviews, coordinating follow up.
- Assists in the retrieval of data to assist department directors/managers in accomplishing the objectives of compliance, as may be necessary.
- Establishes and retains a cooperative relationship with carriers and intermediaries to facilitate understanding and implementing any new federal regulations.
- Demonstrates a knowledge and understanding of organizational policies and procedures, billing and reimbursement requirements and other regulations that affect operations. Maintains a library of appropriate reference material that will facilitate the understanding and compliance of federal coding/documentation requirements.
- Participates in outside healthcare compliance organizations to stay abreast of corporate compliance developments and best practices within the industry. Provides research and advice for billing compliance initiatives.
- Ensures confidentiality of all audits and reports generated by this department, working within established policies for protection of data.
- As requested, attends System and/or Delivery Network Privacy and Corporate Compliance Committee meetings to discuss risk assessment or auditing processes and results. Collaborates with the Manager, System Revenue Integrity and/or the Delivery Network Compliance & Privacy Officers to prepare meeting materials.
- Works collaboratively with the Internal Audit department in performing risk assessments, developing audit programs, and completion of audits.
- Assists the Manager, System Revenue Integrity, with the preparation of the annual compliance audit plan ensuring that compliance risks are adequately addressed.
- Performs in a professional manner, exercising independent judgment and ethical standards.
- Interacts with employees at all levels, demonstrating impartiality and fairness at all times.
- Supports the Director, Manager, System Revenue Integrity and Delivery Network Compliance & Privacy Officers in activities which further the goals of Yale New Haven Health System and the Compliance Program.
- Represents the Office of Privacy & Corporate Compliance through participation in various system committees and work groups, including billing and research compliance, revenue cycle management, denials, and others as assigned.
- Actively participates in routine departmental and team meetings within the Office of Privacy and Corporate Compliance.
- Strives to continually improve the compliance program.
- In conjunction with the Manager, System Revenue Integrity, develops personal and departmental goals and objectives consistent with those of the Health System.

QUALIFICATIONS:

Education:

Bachelor's degree in a relevant field, required.

Experience:

Minimum of five (5) years' experience in a healthcare setting with experience performing medical record audits for clinical documentation, charge and reimbursement accuracy. Understanding of anatomy, terminology, and physiology with experience in hospital and provider coding with CPT and ICD-9/ICD-10. CCS, CCS-P, CPC, CPC-H, RHIA or RHIT is required. Knowledge of health care management in terms of financial and billing concepts. Knowledge of health care reimbursement and managed care issues.

Licensure:

CCS, CCS-P, CPC, CPC-H, RHIA or RHIT is required

FOR MORE INFORMATION/TO APPLY:

<https://jobs.ynhhs.org/jobs/49927?lang=en-us>