

Healthcare Compliance Auditor (Healthcare Transaction & Strategy)

BRG

Job Location: US

Full Time/Days

JOB SUMMARY:

HTS performs regulatory, reimbursement, data analytics, and compliance auditing for healthcare providers, healthcare payers and healthcare investors. Compliance audit deliverables include assessment of provider compliance programs and auditing of billing and coding of clinical documents and claims documents. This position requires a highly motivated problem solver with strong analytical ability, solid organizational skills, and a desire to advance within the organization. The work of a Healthcare Compliance Auditor will involve execution of engagement work streams that will primarily involve employing certified coding skills to audit provider claims and provider clinical documentation with a particular focus on government programs such as Medicare and Medicaid. Responsibilities include working with team to develop audit specifications, expert analysis of healthcare claims and supporting documentation, quality control, and development of client deliverables.

The work of a Consultant involves execution of engagement work streams that may be either qualitative or quantitative in nature, and responsibilities include: billing and coding audits, compliance program review, quality control, development of client deliverables, and industry research. The work of a Managing Consultant involves both execution and oversight of engagement work streams that may be either qualitative or quantitative in nature, and responsibilities include: management of junior staff, quality control, development and presentation of client deliverables, and industry research.

This specific position will require knowledge of medical coding and compliance and potential candidates must have medical auditing expertise. Job title and compensation to be determined based on qualifications and experience.

MINIMUM REQUIREMENTS:

- 2+ years of work experience with a focus on healthcare provider billing and coding; 5-7 years of experience is required for the Managing Consultant level position. Job title to be determined based on relevant qualifications and experience.
- Preference will be given to candidates that are experienced with physician practice coding (e.g. primary care, dermatology, orthopedics, ophthalmology), ASC coding, and/or post-acute coding (e.g. hospice, home health, SNFs).
- Comprehensive knowledge of Medicare rules, regulations, and guidelines as they apply to coverage, coding, and provider documentation.
- Advanced knowledge of CPT-4, HCPCS, and ICD-10-CM coding systems, guidelines, and regulatory requirements.

EDUCATION/LICENSES/CERTIFICATIONS:

- An undergraduate degree (e.g., BS, BA);
- Active coding certification from either AAPC or AHIMA is required;
- Preference will be given to candidates that are certified in medical auditing;

FOR MORE INFORMATION/TO APPLY:

<https://careers.thinkbrg.com/jobs/13493982-healthcare-compliance-auditor-healthcare-transaction-and-strategy>