Professional Coding Auditor & Educator

Holy Cross Health
Job Location: Silver Spring, MD
Full Time/Days

JOB SUMMARY:

The Professional Coding Auditor Educator performs medical record audits including but not limited to analysis of medical record documentation, validation of primary and secondary diagnoses and procedures; and ensuring proper assignment of diagnosis and procedure codes using coding guidelines established by the Centers for Medicare and Medicaid Services (CMS). Monitors accuracy of centralized coders' charge capture and coding with proper ICD-10, CPTs, as well as proper modifiers, adhering to local ministry and Trinity practices and policies. Partners with leadership to improve HCC, high risk scoring, with provider and coder education. Conducts ongoing reviews of patient medical record documentation and procedural and diagnosis coding by each practitioner. Responsible for practitioner education in areas related to coding, documentation and compliance. Works closely with leadership and the department to establish and modify the charge description master (CDM) methodology and pricing models to ensure accuracy and regulatory compliance.

MINIMUM REQUIREMENTS:

- Minimum of 2-5 years of professional coding experience with comprehensive knowledge of ICD-10, CPT, and HCPCs modifiers. Knowledge of Medicare, Medicaid, and other third-party billing rules and regulations.
- **Preferred** 3-6 years of professional coding experience; ability to code from operative reports; prior auditing experience.
- Effective verbal, written, and interpersonal communication skills with the ability to comfortably interact with diverse populations.
- Ability to work collaboratively in a team-oriented environment with a strong customer-service orientation.
- Ability to handle patient and organizational information in a confidential manner.
- Demonstrated dependability and regular attendance.
- Ability to demonstrate competency with a standard desktop and Windows-based computer system, including a basic understanding of email, e-learning, intranet and computer navigation. Ability to use other software as required to perform the essential functions of the job.
- Solid understanding of ICD-10 and CPT coding and medical terminology, with knowledge of Medicare, Medicaid, Health Maintenance Organization and commercial insurance plans.
- Ability to maintain accurate records and to prioritize and organize work effectively.
- Ability to exercise independent judgment as appropriate within standard practices and procedures.

EDUCATION/LICENSES/CERTIFICATIONS:

- High school diploma or equivalent combination of education and experience.
- Certified Professional Coder or Registered Health Information Technician required.

FOR MORE INFORMATION/TO APPLY:

https://jobs.trinity-health.org/job/00467841