

# DRG Validation Auditor (Clinical & Coding)

**Cotiviti**

Job Location: Remote

Full Time/Days

## **JOB SUMMARY:**

This auditing role will focus on Coding & Clinical Chart Validation for our Inpatient audits. The ideal candidate for this position needs to have both a clinical (nurse) and a coding / auditing background focused on the following disciplines from a coding and billing perspective: Inpatient DRG/APR-DRG. This position is responsible for auditing inpatient claims and documenting the results of those audits, with a focus on clinical review, coding accuracy, and the appropriateness of treatment setting and services delivered.

## **MINIMUM REQUIREMENTS:**

- 5 to 7+ years of working with ICD-9/10CM, MS-DRG, AP-DRG and APR-DRG with a broad knowledge of medical claims billing/payment systems provider billing guidelines, payer reimbursement policies, medical necessity criteria and coding terminology.
- Adherence to official coding guidelines, coding clinic determinations and CMS and other regulatory compliance guidelines and mandates. Requires expert coding knowledge - DRG, APRDRG, ICD-10, CPT, HCPCS codes.
- Requires working knowledge of and applicable industry-based standards.
- Proficiency in Word, Access, Excel, TEAMS, and other applications.

## **EDUCATION/LICENSES/CERTIFICATIONS (at least one of the following are required):**

- Associate or bachelor's degree in nursing (active /unrestricted license).
- Associate or bachelor's degree Health Information Management (RHIA or RHIT).
- High school diploma or GED plus equivalent experience of 5+ years' experience in claims auditing, quality assurance, or recovery auditing...ideally in a DRG / Clinical Validation Audit setting or a hospital environment.
- RHIA or RHIT, CPC, Inpatient Coding Credential – CCS, CIC, CDIP or CCDS.

## **FOR MORE INFORMATION/TO APPLY:**

<https://careers-cotiviti.icims.com/jobs/18186/drg-validation-auditor-%28clinical-%26-coding%29/job>