



Certified Billing and Coding Supervisor

Job Code: BCSUP - 116
Revision Date: Dec 21, 2018

Salary Range:
\$20.31 - \$33.23 Hourly
\$1,624.00 - \$2,658.40 Biweekly
\$42,255.00 - \$69,124.00 Annually

FLSA: Exempt

Overview

We are an agency committed to innovative behavioral health services in trauma-informed care that promote healing and recovery to instill a sense of empowerment and foster a lifelong sense of resilience.

General Description

The purpose of this job is to supervise coder(s) that provide professional coding for the clinical activities of EHN. This position works with Supervisors to review and monitor processes and procedures and adapt to an ever-changing coding environment. Work with Compliance to establish policies and procedures for coding staff. Monitor integrated coding systems for performance and efficiency and trouble shoot issues to maximize system efficiency. Ensure coding teams are working efficiently. Create and maintain training materials for provider and coding staff. Must be familiar with all applicable federal and state laws and regulations regarding professional coding. Leader in the revenue cycle processes to meet defined goals and objectives.

This class works under close to general supervision according to set procedures but determines how or when to complete tasks.

Duties and Responsibilities

The functions listed below are those that represent the majority of the time spent working in this position. Management may assign additional functions related to the type of work of the position as necessary.

- Supervises, directs, and evaluates assigned staff, processing employee concerns and problems, directing work, counseling, disciplining, and completing employee performance appraisals.
- Provides strategic guidance and direction for system-wide coding services; create and manage a strong coding culture; ensures the recruitment, training, and retention of motivated competent coding managers, coding specialists, and coding auditors; establishes goals and standards for performance appraisals.
- Analyzes and establishes strategic plans to ensure the coding services are progressive and effective; work with other departmental staff to promote consistency in processes; stay up-to-date on all regulatory

coding requirements; effectively coordinate work flow across multiple facilities to ensure optimal quality of coded data and timely reimbursement.

- Maintains a supportive and positive working relationship with medical staff and senior level management; serves as an internal consultant throughout the organization on coding related issues including MS-DRG/ APC reimbursement methodologies, physician documentation, and coding quality.
- Develop and manage department budget by adhering to budget and staffing standards.
- Leads the organization through changes to meet new industry requirements for ICD-10; forecasts the system's future coding requirements; participates in the planning of acquisitions for new coding technology.
- Develop and maintain system-wide coding guidelines and documentation requirements and monitor compliance; develop and implement training and educational programs for physicians, medical/mental health professionals and coding specialists to ensure consistency of quality data.
- Promotes individual professional growth and development by meeting requirements for mandatory/continuing education and skills competency; supports department-based goals which contribute to the success of the organization; serves as preceptor, mentor and resource to less experienced staff.
- Coordinates, assigns and reviews work and establishes work schedules; maintains standards; monitors status of work in progress; inspects completed work assignments; answers questions; gives advice and direction as needed.
- Directs, implements, and administers the operations of Patient Accounts for the successful Integration of all lines of business.
- Reviews accounts, identifies, and resolves authorization and billing issues for identified EHN programs.
- Researches and assists in solving unpaid/underpaid accounts.
- Interprets and apply authorization and billing/collections policies and procedures to Patient Accounts.
- Monitors performance and manages the operations and productivity of the revenue cycle functions for assigned patients.
- Compiles, analyzes and documents data and outcome measurements including closing documentation for identified EHN programs.
- Assists with the development of Value Base Models as needed.
- Performs other duties as assigned.

Minimum Education and Experience Requirements

Requires an Associate's Degree or specialized training equivalent to an Associate's Degree in Business Administration, Hospital Administration, Bookkeeping supplemented by two (2) years of progressively responsible experience in medical, customer service billing and coding; or equivalent combination of education, training, and experience which provides the required knowledge, skills, and abilities.

Experience with trauma-informed services; cognitive behavioral therapies, including DBT; and motivational therapies including the use of incentives, preferred.

Required Knowledge and Abilities

Knowledge of trauma-informed theories, principals, and practices (includes multi-faceted understanding of concepts such as community trauma, intergenerational and historical trauma, parallel processes, and universal precautions), preferred.

Physical Demands

Performs sedentary work that involves walking or standing some of the time and involves exerting up to 10 pounds of force on a regular and recurring basis or sustained keyboard operations.

Unavoidable Hazards (Work Environment)

- None

Special Certifications and Licenses

- Requires Certified Coding Specialist or Certified Coding Professional certification.

Americans with Disabilities Act Compliance

Emergence Health Network is an Equal Opportunity Employer. ADA requires Emergence Health Network to provide reasonable accommodations to qualified persons with disabilities. Prospective and current employees are encouraged to discuss ADA accommodations with management.

Other Job Characteristics

- Staffing requirements, including criteria that staff have diverse disciplinary backgrounds, have necessary State required license and accreditation, and are culturally and linguistically trained to serve the needs of the clinic's patient population.
- Credentialed, certified, and licensed professionals with adequate training in person-centered, family centered, trauma informed, culturally-competent and recovery-oriented care.

Note: This Class Description does not constitute an employment agreement between the Emergence Health Network and an employee and is subject to change by the Emergence Health Network as its needs change.