



Position: Quality Outreach & Coding Specialist

Department: Quality Program

Reports to: Director, Quality Programs

About PSHP

Few industries are growing as quickly with such a strong career outlook as health care. Puget Sound Health Partners is poised to become the local industry leader in supporting health care delivery within the 65+ market arena, and we're looking for qualified individuals to join our winning team. Our goal is to promote our members' health through local provider innovation, work as responsible stewards of health care resources and be an active partner in improving the health of our communities. We believe that experience, teamwork and accountability will help us succeed. We offer a competitive salary, comprehensive benefit package, and rewarding growth potential. PSHP is an equal opportunity employer.

Summary of Duties

Primary responsibilities include performing physician/physician's staff education, extensive traveling to physician office sites, medical record review, data extraction, maintaining data systems, promoting quality improvement outreach efforts, leading the physician/physician's staff as it relates to HEDIS, Medicare HCC Risk Adjustment, Risk Assessment and other intervention programs initiated through the Quality Improvement Department.

Key Responsibilities

- Manage provider relationships as related to CMS-HCC Risk Adjustment payment methodology, proper chart documentation and diagnosis coding to revenue.
- Conduct medical expense management through analysis of claims.
- Conduct physician audits to determine whether documentation supports the coding billed.

- Analyze information for trends and educate physicians on results and provide suggestions to ensure compliance and maximum reimbursement without appeals. Report all auditing results to PSHP.
- Provide education and consultation to Physician offices regarding PSHP quality initiatives, compliance and revenue issues, HEDIS Audits, HCC Risk Adjustment and other PSHP quality outreach efforts.

Required Knowledge, Skills, and Abilities

- Must be an RN, LPN, Certified Coder, RHIT, or RHIA and have direct experience of 2 or more years in data auditing
- Extensive knowledge of coding guidelines with knowledge and demonstrated understanding of CMS HCC Risk Adjustment coding and data validation
- Demonstrated project management skills and abilities
- Computer proficiency
- Commitment to confidentiality of patient health information
- Professional, articulate and able to work independently
- Exemplary attention to detail and completeness
- Ability to manage and meet deadlines
- Reliable transportation, auto insurance and a valid driver's license
- Must be willing to travel within a 50 mile radius
- Business attire is required when visiting physician offices
- Working cell phone

Preferred Skills

- Lean and/or Six Sigma experience
- Health plan experience
- Experience working with Medicare Advantage/CMS

Working Conditions

Working conditions are normal for an office environment. Extensive local travel is required.

Location

Federal Way, Washington