

Job Title: Director, Medical Audits, Revenue Cycle and Assistant Compliance Officer

Job Number: Grade:

Department: Office of Audit, Compliance and Privacy

Reports To: Vice President of Audit, Compliance and Privacy Officer Effective Date:

JOB SUMMARY: Responsible to the Hospital, and the practice plans to oversee, audit and educate regarding the accuracy and completeness of medical documentation, coding and billing. Supervises a staff of coding and documentation professionals who perform revenue cycle and compliance audits of documentation, coding and billing. Develops an annual audit plan that is submitted to Senior Management and the Board of Trustees. Performs sensitive and complex investigations into allegations of billing fraud. Works with the Business Office to provide technical expertise related to maintenance of the Charge Description Master for all patient charges. Investigates the appropriateness of charges and codes before they are added to the Charge Description Master and evaluates billing and documentation systems. Acts as a liaison between clinical departments and Finance and analyzes the financial impact of proposed as well as existing clinical programs.

UNIFORM STANDARDS

<u>% of Time</u>		<u>Essential Functions</u>	<u>Rating</u>
_____	1. Responds promptly and positively to patients, families, associates and all others in a respectful, courteous and confidential manner.		_____
	X	Maintains an identifiable /professional attire at all times, including using name tags and identification cards.	
	X	Answers telephone calls within three rings 95% of the time.	
	X	Respects confidentiality of patients and co-workers in all circumstances 100% of the time.	
	X	Greets patients, families, co-workers and others in a calm, professional, friendly	

manner by making eye contact,
initiating conversation and
identifying self by name.

- _____ 2. Follows hospital and department procedures and policies. _____
- X Attends mandatory sessions /meetings/in-services 100% of the time.
 - X Adheres to Hospital and Department attendance policies and procedures.
 - X Demonstrates knowledge and application of hospital and department procedures and policies.
 - X Review policy and procedure updates provided by the supervisor or hospital.
- _____ 3. Provides or facilitates in providing a clean, safe, quiet and secure environment for all. _____
- X Reports any incident that seems unusual/deficient to immediate supervisor and/or Security.
 - X Corrects and/or reports unsafe, unsecured or unclean environment to immediate supervisor and/or Environmental, Health and Safety, and Facilities Department.
 - X Always takes breaks away from patient and family areas.
 - X Keep self and work area neat and organized.
- _____ 4. Participates in staff meetings, committees, projects and teams in a collaborative manner in order to resolve conflicts and meet institutional goals. _____
- X Attends staff meetings as requested 100% of the time, unless excused. Is recognized as an "informed" participant committee member by peers and completes assignments on time 100% of the time.
 - X Reviews and contributes to the attainment of departmental and institutional goals annually.
 - X Participates and contributes to team projects.

- _____ 5. Identifies own learning needs and obtains necessary education to meet requirements of position; attends mandatory education programs. _____
- X Attends mandatory education programs 100% of the time.
 - X Documents and reports all necessary education/training.
 - X Attends CCD classes or pursues outside education.
 - X Applies education/training to daily work standards to enhance job knowledge and skills as it relates to the job.
 - X Reviews learning needs with supervisor to set individual education/learning goals on an annual basis.
- _____ 6. Follows cost control standards of the hospital and department. _____
- Carries out responsibilities in a manner that monitors usage of supplies and equipment to eliminate or minimize waste and/or misuse of supplies and equipment.
- _____ 7. Demonstrates knowledge of and the ability to render care and services based on age appropriateness and developmental need of patients. If applicable, please state the specific age range of the patients. _____

<u>% of Time</u>	JOB RESPONSIBILITIES:	<u>Essential Functions</u>	<u>Rating</u>
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10% 1. Coordinate/ prepare the third party payor chart/bill audits for ---. Supervises a staff of six or more coding and documentation professionals who perform the audits. Reviews the Audit Reports for accuracy and completeness. This would include supervision of analysts who:

- conduct the exit interview and perform an audit
- analyze the results
- Pre-audit will be completed prior to scheduled audit date 100% of the time.
 - The audit and exit interview will be completed within one month of request from outside auditor 95% of the time.
 - Audit results will be analyzed and sent to appropriate person for billing adjustments

within 5 working days of audit
exit interview 95% of the time.

- 20% 2. Analyze new and existing billing and documentation systems for clarity, legality, accuracy and appropriateness. *
- Analysis of existing billing systems will occur if a problematic trend appears 100% of the time within 30 days of problem being discovered. This will include the coordination and verification of charge error adjustments.
 - All new billing systems will be analyzed prior to their implementation, along with a review shortly after implementation to ensure accuracy.
- 15% 3. Analyze the financial impact of proposed and existing clinical programs. *
- Analysis of existing clinical program(s) will occur if a problematic trend appears, or a significant change is proposed to the present system 100% of the time within 30 days of problem being discovered.
 - Assist clinical departments with their individual financial impact analysis as requested within 30 days of such requests.
- 15% 4. Special projects, such as complex billing fraud investigations, P&L's, reviewing charge/cost structures, etc. as requested. *
- Projects will be completed by the mutually agreed upon dates 95% of the time.
- 20% 5. Assist the Business office to maintain the system for all patient charges. *
- _____ This may include adding individual charges to an existing department, as well as creating a whole new department.
- Analyze new charges for the Charge Description Master for appropriateness based on cost, reimbursement and market factors. Verify that correct HCPCS codes are established, and that specific charge data is added to all necessary I.S. systems. This process will

be initiated within 3 days of request.

- In conjunction with respective department management, devise an appropriate charge structure for new revenue generating depts. This includes determining what services should be charged for, analyzing the new charges as described above, coordinating the development of the TDS charge screens, and training the staff in the correct charge
 - and reconciliation process. This will be

initiated within 2 weeks of request.

- Maintains the Charge Description Master (CDM) to be certain all billing codes associated with patient charges are accurate by billing standards, and that the charges are consistent throughout the hospital system.

10% 6. Acts as a liaison between clinical departments and Finance, and between the hospital and outside customers - i.e. outside auditors, area healthcare facilities, patients and families.

- Assist clinical departments (hold inservices, etc.) in their understanding of how their clinical operations and Finance are inter-related.
- Assist outside customers with their questions regarding Hospital stay or charges on patient bill within 3 days of such requests.
- Assist in-house billing representatives and other Business/ Finance office personnel with questions related to hospital charges within 3 days of such requests.

10% 7. Coordinate preparation of a quarterly report from the results of the chart/bill audits for review by Senior Management and the Board of Trustees. Analyze any problems identified and what actions taken or planned to correct the problems.

- Quarterly report will be issued to Senior Management and the Board of Trustees Audit Committee within 30 days of close of quarter.
- Quarterly reports will include the identification of significant problems with an outline of corrective actions taken or planned to be taken 100% of the time.

SKILLS AND ABILITIES: Clinical expertise in pediatrics, working knowledge of chart/bill audits, MBA, coding and billing certification, 5-10 years experience in billing and documentation systems and general accounting principles. Ability to collect, analyze and prepare an annual work plan.

POSITION SCOPE INFORMATION:

People Management:

Total subordinate staff	<u>6+</u>
Total Indirect Reporting staff	<u>20+</u>
Total Outside/contractual reports	<u>N/A</u>

Money Management:

Dollar Amounts

Revenue management: (Primary source of operating incomes)	<u>\$1,000,000+</u>
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Revenue from other operations and services: (Grants, Research Funds, etc.)	<u>N/A</u>
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Budget Expense Management:

Dollar Amounts

Expenditures not included in Budget: (Capital equipment, taxes, etc.)	<u>N/A</u>
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EDUCATION AND EXPERIENCE: B.S. in Nursing or Business
MBA preferred
10 years Clinical Pediatric experience coupled with
previous Utilization Review experience
Coding Certification or equivalent

REQUIRED CERTIFICATE/REGISTRATION: Licensed Registered Nurse

PHYSICAL CAPABILITIES:

Occasionally exerting up to 10 pounds of force and/or frequently exerting a small amount of force to lift, carry, push, pull and move objects. Work involves sitting most of the time, but may involve walking or standing for brief periods of time.

ENVIRONMENTAL CONDITIONS:

Protection from weather conditions but not necessarily from temperature changes. (Normal office environment).

