

United General Hospital



CAH Charge Capture Supplemental Materials Session CAH4



UNITED GENERAL HOSPITAL

Job Description/ Performance Review

Charge Capture Specialist/Compliance Officer

Origination date: August 2007

Job #: 105.87830

Position reports to: Director, Patient Accounts

Revision date: July 2009

Approved by: Director, Patient Accounts

Job Summary: The Charge Capture Specialist's primary function is to ensure the accuracy and completeness of charges and supporting documentation primarily for but not limited to the areas of Acute Care, ICU, Observation, Medical Short Stay, Oncology, ancillary departments and Emergency Department to assure compliant charge capture and minimize delays in the billing and payment denials. He or she completes monthly department audits for process improvements.

In addition to the Charge Capture responsibilities, this position will fill the role of Compliance Officer. The Compliance Officer provides leadership in facilitating the implementation and operation of compliance program elements. He or she is responsible for ongoing audit activities and educational programs to ensure proper reimbursement and compliance with all regulatory statutes. The Compliance Officer functions report directly to the Hospital Board of Commissioners.

Position Prerequisites

Education/Training/Experience: Requires 3-5 years experience, training and education as a Certified Procedural Coder (CPC), Certified Coding Specialist CCS or CCS-P, or the equivalent of a bachelor's degree in health or business or Registered Nurse (RN). Training or education in billing, coding and/or clinical area. Working knowledge of Medicare/Medicaid guidelines required. Experience in Critical Access Hospital preferred. This position requires current knowledge of Medicare/Medicaid requirements, Healthcare Common Procedures Coding System (HCPCS) guidelines and CMS documentation standards as well as ICD-9 and CPT coding procedures. Three or more year's management and leadership experience preferred.

License/Certification: CPC, CCS, Certified Coding Specialist-for Physicians (CSS-P), Registered Health Information Technician (RHIT), Registered Health Information Technician Administrator (RHIA) and/or RN. Current (CHC) or CHRC preferred.

Skills/Ability: Ability to read and communicate effectively in English. Additional languages preferred. Ability to read, analyze and interpret general business periodicals, professional journals, technical procedures or governmental regulations. Proficient in computer knowledge, including word processing, email. Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or scheduled form. The Ishihara Color vision test is required to ensure that point-of-care test is being appropriately read.

Physical Demands:

Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions of the position without compromising patient care.

The job description and technical skills list describes the general duties that constitute the work of the position, and shall not be considered a detailed description of the work requirements inherent in the position. This job description is not an employment agreement or contract. Management has the exclusive right to alter this job description at any time and without notice.

Staff Signature _____

Date _____

Director Signature _____

Date _____

Title #-Dept. #

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Technical Skills Checklist

For each competency, rate each item based on how frequently the person demonstrates the behaviors in an **EFFECTIVE** manner when the opportunity arises. Please use the rating scale. (E) = Essential Function

Rating Scale

- 1= This is an area of significant concern and should be made a high priority for development.
- 2= This is not presently an area of strength and should be a priority for development.
- 3= This is neither an area of particular strength or weakness.
- 4= This is a strong point for this person. Competence in this area is routinely demonstrated.
- 5= Superior competence is demonstrated at every opportunity - should be mentoring others.
- NI= No Information (No opportunity to observe this behavior)

		<u>Self Evaluation</u>	<u>Supervisory Evaluation</u>
(E)	Applies safety measures appropriate to customer's age and development.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Communicates appropriately for customers' age and development.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Uses reference material when appropriate to better meet the needs of customers of different needs and development.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Reviews medical records to assure billed charges and procedures are consistent with documentation and ensure appropriate reimbursement levels and the proper and accurate use of codes.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Conduct clinical department specific education regarding appropriate documentation and charge capture.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Monitor ancillary tests done for medical necessity based on Medicare LMRP Guidelines. Obtain supporting documentation as needed.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Compare supply charge sheet to documentation for completeness and accuracy of supplies.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Communicate with HIM regarding coding and documentation issues.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Communicate with clinical personnel to clarify diagnosis or obtain additional information.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Provide monthly department audits for process improvement.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Work closely with compliance committee and appropriate departments for process improvement to reduce denied or rejected claims.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Works with Business office to review explanation of benefits and reimbursements from third part payers to ensure appropriate reimbursement levels and the proper and accurate used of codes.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Organize, chair and maintain minutes for hospital's Compliance Committee that meets at least quarterly to discuss current compliance concerns, and to provide oversight and assistance to the Compliance Officer.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Makes him or herself known throughout hospital as Compliance Officer by conducting training sessions, participating in critical meetings and through other education and communication medium.	NI 1 2 3 4 5	NI 1 2 3 4 5

Title #-Dept. #

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(E)	Assure the compliance program's existence and purpose is communicated regularly throughout the hospital. Distribute compliance policies to affected individuals in a timely manner. Assures existing compliance policies are reviewed periodically and revised as necessary to comply with changing legal and regulatory requirements.		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Represent the hospital at Western Washington Rural Healthcare Collaborative (WWRHCC) Compliance Steering Committee meetings. Integrates WWRHCC compliance guidelines and protocols into hospital-specific programs.		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Directs or facilitates compliance auditing and monitoring process in the hospital. Takes primary responsibility for developing and carrying out corrective action plans when required by auditing or monitoring findings.		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Maintains or assigns responsibility for maintaining completion records for compliance training and periodically reviews these reports for compliance. Establishes a corrective action plan with department directors/managers or delinquent individuals when significant delinquencies are found.		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Effectively uses the following systems: - Clinical: Meditech, Patient Medical Record - Organizational: Policy and Procedures - Knowledge base: MedLearn Matters, ComplyTrack, MidiRegs, Medicare FISS, CMS Updates, Excel, Word, Quantim Encoder, Online third party payor access and others as determined.		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Demonstrates commitment to organizational mission-vision-values		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Maintains complete confidentiality of all medical, financial, employees, computer, conversations or other sensitive materials, which may jeopardize the privacy of others		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Participates in performance, process and quality system activities		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Completes all assigned/required education for job competencies including Computer Based Learning within the required timeframe i.e. BLS, ACLS		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Follows employee standards of conduct		NI 1 2 3 4 5	NI 1 2 3 4 5
(E)	Maintains awareness and follows United General Hospital's Corporate Compliance Plan		NI 1 2 3 4 5	NI 1 2 3 4 5

**United General Hospital
Charge Capture Detail
November 2008 - October 2009**

Endoscopy/Surgical Services									
Date	Accts Rev'd	Poss Billed Amt	Changes Recommended	Prev Chg Amts	Net Change	\$ Projected			
10/19/2009	G230322	1,275.00	Added colonoscopy with ablation	0.00	1,275.00	1,275.00			
10/26/2009	G233489	803.00	Added epidural insertion	0.00	803.00	803.00			
Emergency Room									
Date	Accts Rev'd	Poss Billed Amt	Changes Recommended	Prev Chg Amts	Change	\$ Projected			
10/27/2009	G232978	624.00	Changed I&D codes	483.00	141.00	141.00			
10/27/2009	G232960	199.00	Added IV push	0.00	199.00	199.00			
10/27/2009	G234659	272.00	Changed foreign body removal codes	206.00	66.00	66.00			
10/27/2009	G233101	89.00	Added IV push	0.00	89.00	89.00			
10/27/2009	G233172	380.00	Added 3 IV pushes	0.00	380.00	380.00			
10/27/2009	G233120	89.00	Added IV push	0.00	89.00	89.00			
10/27/2009	G233166	199.00	Added IV push	0.00	199.00	199.00			
10/28/2009	G232082	321.00	Changed IV infusion codes	208.00	113.00	113.00			
10/28/2009	G232482	20.00	Added suture material charge	0.00	20.00	20.00			
10/28/2009	G232514	66.00	Added one hour hydration	0.00	66.00	66.00			
10/28/2009	G231362	89.00	Added IV push	0.00	89.00	89.00			
10/28/2009	G232429	420.00	Added IV pushes X 2, hydration hours X 2	0.00	420.00	420.00			
10/29/2009	G233220	132.00	Added two hours hydration	0.00	132.00	132.00			
10/30/2009	G233240	335.00	Changed IV pushes to infusions	199.00	136.00	136.00			
10/30/2009	G235389	89.00	Added IV push	0.00	89.00	89.00			
10/30/2009	G235444	40.00	Added Crime Victims form completion	0.00	40.00	40.00			
10/30/2009	G235264	178.00	Added two IV pushes	0.00	178.00	178.00			
10/30/2009	G235381	89.00	Added IV push	0.00	89.00	89.00			
Total						446,234.00			

Sample ED Detailed Audit Report

Med Rec #	Account Type	B/AR Status	Admit/Service Date	DIS/DEP Date	Discharge Disposition	Pri Dx	Pri Dx Descr	Charge Mnemonic	Charge Amount	GL Department Code
F000 G0000271ER		BD	1/1/2011	1/1/2011	HOM	873.63	TOOTH (BROKEN) (FRACTI	10016211	227 **	72302
F000 G0000271REC		FB	1/3/2011	1/31/2011		V58.0	ENCOUNTER FOR RADIOT	10016011	697 **	72302
F000 G0000271REC		FB	1/3/2011	1/31/2011		V58.0	ENCOUNTER FOR RADIOT	10658711	118 **	72302
F000 G0000271REC		FB	1/3/2011	1/31/2011		V58.0	ENCOUNTER FOR RADIOT	10016111	369 **	72302
F000 G0000271REC		FB	1/3/2011	1/31/2011		V58.0	ENCOUNTER FOR RADIOT	10011411	99 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	JAL	784	HEADACHE	10016011	652 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	JAL	784	HEADACHE	10689001	100 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	850	CONCUSSION W/O COMA	10016111	347 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	462	ACUTE PHARYNGITIS	10016111	347 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	924	CONTUSION OF THIGH	10016111	347 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	820.8	FX NECK OF FEMUR NOS-(	10015911	962 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	820.8	FX NECK OF FEMUR NOS-(	10658711	99 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	820.8	FX NECK OF FEMUR NOS-(	10016911	219 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	820.8	FX NECK OF FEMUR NOS-(	10687901	184 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	724.5	BACKACHE NOS	10016111	347 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	682.6	CELLULITIS OF LEG	10016111	347 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	461	AC MAXILLARY SINUSITIS	10016011	652 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	461	AC MAXILLARY SINUSITIS	10016911	219 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	461	AC MAXILLARY SINUSITIS	10687901	184 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	860	TRAUM PNEUMOTHORAX-I	10015911	962 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	860	TRAUM PNEUMOTHORAX-I	10016911	219 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	860	TRAUM PNEUMOTHORAX-I	10687901	92 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	SJH	860	TRAUM PNEUMOTHORAX-I	10695281	214 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	648.93	OTH CURR COND-ANTEPA	10016011	652 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	924.11	CONTUSION OF KNEE	10016111	347 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	786.52	PAINFUL RESPIRATION	10016011	652 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	923	CONTUSION SHOULDER R	10016011	652 **	72302
F000 G0000271ER		FB	1/1/2011	1/1/2011	HOM	312.9	CONDUCT DISTURBANCE I	10016111	347 **	72302
F000 G0000271ER		BD	1/1/2011	1/1/2011	HOM	354	CARPAL TUNNEL SYNDRO	10016111	347 **	72302

Sample ED Detailed Audit Report

Type of Bill	CPT4 CODE	CPT 4 DESCRIPTION	HCPCS CODE	HCPCS DESCRIPTION	#of Units Charged	Rev Code-Modifier 1	Modifier 2	BILLING Physician	Patient Insurance Primary NAME
	99282		99282		1	450			UNITED HEALTHCA
	99284		99284		1	450			MEDICARE
	51702		51702		1	450	59		MEDICARE
	99283		99283		1	450			MEDICARE
	96372			ALT code removed	1	450	59		MEDICARE
	99284		99284		1	450			MEDICAID DSHS
	82075				1	301			MEDICAID DSHS
	99283		99283		1	450			MEDICAID DSHS
	99283		99283		1	450			MEDICARE
	99283		99283		1	450			MEDICARE GROUP
	99285		99285		1	450			MEDICARE
	51702		51702		1	450			MEDICARE
	96374			ALT code removed	1	450			MEDICARE
	96375				2	450			MEDICARE
	99283		99283		1	450			MEDICARE
	99283		99283		1	450			MEDICARE
	99284		99284		1	450			MEDICARE
	96374			ALT code removed	1	450			REGENCE HEALTH
	96375				1	450			REGENCE HEALTH
	99285		99285		2	450			REGENCE HEALTH
	96374				1	450			BLUE CROSS FEDE
	96375			ALT code removed	1	450			BLUE CROSS FEDE
	96376				2	450			BLUE CROSS FEDE
	99284		99284		1	450			BLUE CROSS FEDE
	99283		99283		1	450			MEDICAID DSHS
	99284		99284		1	450			REGENCE HEALTH
	99284		99284		1	450			MEDICAID DSHS
	99283		99283		1	450			OTHER COMMERC
	99283		99283		1	450			REGENCE HEALTH
	99283		99283		1	450			REGENCE HEALTH



UNITED GENERAL HOSPITAL

Job Description/ Performance Review

Emergency Record Coordinator

Origination date: December 2012

Job #:

Position reports to: H.I.M. Director

Revision date:

Approved by:

Job Summary:

ED Record Coordinator works under the supervision of physicians and nurses, and HIM Director taking direction accommodating Nursing EDM needs to coordinate the patient record in the ER unit. Answering phone calls for ER nurses forwarding messages to the appropriate respondents, and /or responding to calls within the scope of their responsibility.

Super User for the following documentation systems: POM, P-Doc and EDM.

Scope: Responding to physician requests for assistance navigating with the P-Doc software (documentation system) and the POM system. Review of data entry in the EMR and/or Clinical data system within the scope of reconciliation of orders and charges for the ER medical record. Comfort with the Form's Fast system to print out order sheets for nurses. Auto-FAX'ing of charts to other facilities, and/or Faxing information to pharmacy or facilities. Emergency Department Record Coordinator includes using the Meditech system to do chart analysis and reconciliation of charges.

Duties:

ER Charts – Reconciliation of Documentation

Procedure Charges

Blood administration – PIC Lines

Medication Administration (Verification)

Infusions (Route – Start – Stop Times)

Physician Orders

Signatures

Procedures

Charges – Durable Medical Items

Observation Start Times

(Working with Registration Clerks) Registration changes (observation charts) Bed Status Change

In-Patient Abstracting/ Analysis of Charts & Charge Capture;

Prepping Charts for Coders;

Entering charges (Same as list of Charges for ER patients.)

Observation Stop Times

ED Record Coordinator must have an understanding of basic ED nursing procedures, as well as background knowledge in Medical Records, Release of Information Education, Charge Entry and Chart Analysis and Assembly. Patient confidentiality is emphasized and unit clerks must abide by these standards.

Position Prerequisites

Education/Training/Knowledge:

Graduate of an accredited H.I.M. training program preferred; Unit Clerk Experience Preferred; Billing Clerk and/or Medical Records Experience required.

Experience:

Have three (3) years of hospital medical records (analysis / deficiency experience) Meditech Experience preferred; Patient Account – or HIM charge Entry - 1 year preferred

License/Certification:

Medical Terminology Required; Preferred Unit Clerk Training and/ or Patient Account Billing Experience

Title #-Dept. #

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Skills/Ability:

Must be well-organized; conscientious; independent worker with a skill set to insure reconciliation of ER chart documentation and the detail of analysis of ER charts and IP chart documentation in a chaotic environment (ER Unit.) Personality suited to working in a team environment with strong communication, and human relations skills. Meditech HIM documentation requirement system training is required.

Physical Demands:

Must be able to lift up twenty (20) pounds unaided. Prolonged sitting or standing for up to two (2) hours continuously; moderate amount of bending, reaching and stretching.

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Staff Signature _____

Date _____

Director Signature _____

Date _____

Technical Skills Checklist

For each competency, rate each item based on how frequently the person demonstrates the behaviors in an **EFFECTIVE** manner when the opportunity arises. Please use the rating scale. (E) = Essential Function

Rating Scale

- 1= This is an area of significant concern and should be made a high priority for development.
 - 2= This is not presently an area of strength and should be a priority for development.
 - 3= This is neither an area of particular strength or weakness.
 - 4= This is a strong point for this person. Competence in this area is routinely demonstrated.
 - 5= Superior competence is demonstrated at every opportunity - should be mentoring others.
- NI= No Information (No opportunity to observe this behavior)

(E) Demonstrates knowledge of chart assembly / analysis per AHIMA, state and federal guidelines for the completion of health record deficiencies.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of coding rules and billing guidelines for ICD-9-CM, CPT-4 and HCPCS coding and billing.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Performs charge analysis, chart abstracting, reconciliation of charges, for IP and Observation records in an accurate and timely manner.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Performs charge analysis, chart abstracting, reconciliation of charges, for ER records in an accurate and timely manner.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Accurately monitors the flow of charge entry, order entry and documentation in 'live' time in the ER.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates familiarity with chart abstracting systems, what information is used and how.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of computers, specifically medical record applications.	NI 1 2 3 4 5	NI 1 2 3 4 5

Title #-Dept. #

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(E) Demonstrates knowledge of P-Doc System to assist MD's with questions in the use of specific medical record documentation problems.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of POM System with a comfort level to do analysis of patient charts for completed orders (reconciliation of chart) for patient's currently in the ED.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of the Meditech System with a comfort level to do analysis of patient charts for completed orders (reconciliation of chart) and releasing of patient records.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of EMR System with a comfort level to do analysis of patient charts for completed documentation (reconciliation of chart) for patient's currently in the ED.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates base knowledge of ER chart documentation requirements, and charge entry.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of In-Patient chart analysis, and charge entry, understanding of documentation needed to complete coding.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates efficient time management in a chaotic environment.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates professionalism in a team environment.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates knowledge of anatomy and physiology; disease process; and medical terminology necessary for chart analysis.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates timeliness and assigned work completion when working independently while assigned to a specific work schedule.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Shows competence in the tasks of medical record chart abstracting / analysis.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates ability to run routine (ER or IP chart lists) reports in Meditech.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates ability to provide audit analysis of charts pending documentation completion.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates ability to research patient documentation and complete (ROI requests) and/or FAX'ing of records as assigned.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Demonstrates ability to prepare copies of patient documentation (ROI requests) in a electronic download (Flash Drive – ROI).	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Competent to perform ED room assignment entry into the EDM per direction of Nursing staff.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Competent to use the Meditech Registration module to assist nursing in transfers and/or possible coverage (when time allows) for registration staff breaks.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Performs other duties as assigned.	NI 1 2 3 4 5	NI 1 2 3 4 5
(E) Assists with special studies, projects and quality improvement studies as necessary.	NI 1 2 3 4 5	NI 1 2 3 4 5