



FOUNDED BY BRIGHAM AND WOMEN'S HOSPITAL
AND MASSACHUSETTS GENERAL HOSPITAL

PARTNERS HEALTHCARE JOB DESCRIPTION

Job Title:	<u>RN Coder – Medicare Advantage</u>	Date:	<u>11/05/2020</u>
Job Code:	<u>005863</u>	Grade:	<u>630</u>
		FLSA Status:	<u>Exempt</u>
		Reviewed	
Department/Section:	<u>Population Health Management</u>	By:	<u>PHM Leadership/HR</u>
Reports To:	<u>Program Director – Medicare Advantage</u>		

GENERAL SUMMARY / OVERVIEW: *Summarize the nature and level of work performed.*

Population Health Management (PHM) is an innovative model of care delivery that aims to improve the health of patients while lowering the overall costs of care. PHM includes best practices and tactics to enhance the patient experience, improve outcomes, and provide better organized and more personalized care to our patients.

Under the direction of the PHM Program Director of Medicare Advantage with support from the PHM Risk Capture clinical and administrative leadership as well as the PCPO TMP Medical Director, the RN Coder will provide central coding support to primary care practices participating in a Medicare Advantage product. They will assist local teams in developing processes to maximize risk capture opportunities, provide education and training on clinical documentation requirements and diagnosis and establish processes to centrally support improvement and completeness of ambulatory medical record documentation and HCC coding,

PRINCIPAL DUTIES AND RESPONSIBILITIES: *Indicate key areas of responsibility, major job duties, special projects and key objectives for this position. These items should be evaluated throughout the year and included in the written annual evaluation.*

1. Partner with PHM Risk Capture Team and PCPO TMP team to define local and central workflows that will ensure optimal documentation and HCC coding
2. Work closely with local RSO teams to help operationalize defined workflows that will enable care teams and providers to have a consistent and standard approach to risk capture.
3. Establish workgroup of network representatives to foster sharing of risk capture best practices and provide insight on network needs to ensure central processes are offering adequate support and adding value
4. Develop and lead initiatives to help right size patient problem lists in an effort to maximize risk capture opportunities through identification of suspect conditions, addressing existing gaps, using both to help RSOs clean-up and maintain patient problem lists
5. Partner with PHM MD Risk coding educator to develop and enhance materials on appropriate HCC documentation & coding as well as effectively use of technology to achieve optimal risk capture
6. Assist in offering additional support to expand current peer-to-peer education program intended to orient providers to HCC coding along with how to effectively document in the Electronic Health Record
7. Participates in developing, implementing and reviewing reports and applications supporting HCC/risk Capture with key stakeholders (i.e. Data and Analytics Organization, Professional Billing Office)
8. Maintains up to date knowledge of current changes of coding practices through continued education and reading resource materials

QUALIFICATIONS :

1. RN graduate of an accredited school of nursing required
2. 3+ Years experience with medical terminology and reviewing of medical records in a clinical setting
3. Strong Organizational management , preferably in a healthcare setting
4. Strong PC / Microsoft application skills including Word, Advanced Excel, and PowerPoint.
5. Experience in quality improvement or process improvement activities preferred.
6. Minimal travel to Regional Service Organizations (RSOs), practices and hospitals within network.

SKILLS/ABILITIES/COMPETENCIES: *(Must be realistic, neither overstated nor understated, and related to the essential functions of the job.)*

1. Extensive experience in documentation, diagnostic criteria and HCC choice
2. Experience and knowledge of Electronic Health Records (preferably Epic and GE Centricity)
3. Strong Analytical, organizational and time management skills
4. Proven ability to prioritize and resolve critical issues efficiently and effectively, interpreting complex and sometimes contradictory information to effectively solve problems.
5. Ability to effectively plan and facilitate meetings and workgroups.
6. Excellent organizational skills and attention to detail, ability to work independently, manage multiple tasks and projects, meet deadlines, and manage to schedule.
7. High degree of initiative along with ability to act as a team player.
8. Excellent oral and written communication and presentation skills that demonstrate the ability to synthesize and distill complex information appropriately, with the ability to deliver presentations to a wide variety of audiences.
9. Proven ability to develop effective relationships and build partnerships, working collaboratively with various stakeholders either internal to department, or externally, to meet shared objectives.

WORKING CONDITIONS: *Describe the conditions in which the work is performed.*

- Professional office setting located in Assembly Row, Somerville, MA. Requires travel locally to other Partners' sites. Reliable access to transportation to travel between sites for business purposes is required.
- The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Normal office working conditions. The noise level in the work environment is quiet to moderate.

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The above is intended to describe the general contents and requirements of work being performed by people assigned to this classification. It is not intended to be construed as an exhaustive statement of all duties, responsibilities or skills of personnel so classified.