CERTIFIED MEDICAL CODER, Primary Healthcare

REPORTING/COORDINATING RELATIONSHIP: CFO

SUPERVISORY RESPONSIBILITIES: N/A

PRINCIPLE RESPONSIBILITIES:

1) Review and analyze patient medical records to abstract all relevant diagnoses, procedures, and services for coding and billing purposes.
2) Assign accurate ICD-10-CM, CPT, and HCPCS Level II codes and appropriate modifiers in compliance with official coding guidelines and payer-specific rules.
3) Ensure all coding aligns with FQHC-specific regulations, including those related to Medicare/Medicaid and the sliding fee discount program.
4) Query physicians or other healthcare providers for clarification of documentation when it is incomplete, ambiguous, or lacks the necessary specificity for accurate coding.
5) Collaborate with the billing department to resolve claim rejections, denials, and coding edits to ensure timely and accurate claim submission and payment processing.
6) Participate in internal and external coding audits to ensure compliance and identify documentation gaps.
7) Assist with provider education and training on documentation best practices and coding guideline updates to improve accuracy and compliance.
8) Maintain up-to-date knowledge of all coding updates, new regulations, and compliance standards through continuing education and professional development.
9) Protect patient confidentiality and adhere to all HIPAA guidelines.

MINIMUM QUALIFICATIONS:

- **Education:** High school diploma or equivalent requires; Associates or Bachelor's degree in a healthcare related field preferred.
- **Experience:** Minimum of 2-3 years of professional medical coding experience requires, with at least 1 year in an FQHC or similar outpatient setting strongly preferred.
- **Certifications:** Must possess and maintain at least one of the following active certifications:
    - Certified Professional Coder (CPC) (AAPC)
    - Certified Coding Specialist (CCS) or Certified Coding Specialist-Physician Based (CCS-P(AHIMA)
- **Technical Skills:**
    - Proficiency in ICD-10-CM, CPT, and HCPCS Level II coding systems and coding software.
    - Experience with Electronic Health Record (HER) systems, ECW, and practice management software.
    - Proficiency in Microsoft Office applications (Word, Excel, Outlook).
- **Soft Skills:**
    - Exceptional attention to detail and analytical thinking skills.
    - Strong Written and verbal communication skills for effective interaction with providers and staff.
    - Ability to work independently, manage time effectively, and meet productivity deadlines.

POSITION STATUS: Regular, Full-Time **GROUP:** I, Hourly **DATE CREATED:** 11/19/2025

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Employee HR Representative

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Date