WORK PROCESS SCHEDULE		ONET Code 29-2071.00		
		RAPIDS Code	e 1114	
Job Title				
Company Contact:				
Apprenticeship Type: (competency based, time based, hybrid)				
Minimum Time Requirements (or time range):				
Required Certifications:				
JOB FUNCTION	Core/	OJT	RI	
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JOB FUNCTION 1: Properly applies diagnosis and procedure codes to medical charts, records and related documents	Core			
Competency 1a: Enters or confirms code(s) associated with medical diagnosis(es), procedures, and services				
Competency 1b: Ensures medical codes reflect medical record documentation				
JOB FUNCTION 2: Supports documentation of care for services provider reimbursement process to ensure timely and accurate payment	Core			
Competency 2a: Ensures accuracy of diagnosis/procedural groups such as DRG (Diagnosis Related Group), MSDRG (Medical Severity), APC (Ambulatory Payment Classification), etc.				
Competency 2b: Communicates with physicians or other care providers to ensure appropriate documentation				
Competency 2c: Applies policies and procedures to comply with changing regulations among various payment systems for healthcare services, such as Medicare, Medicaid, managed care, etc.				
Competency 2d: Applies policies and procedures for the use of clinical data required in reimbursement and prospective payment systems (PPS) in healthcare delivery				
Competency 2e: Supports accurate billing through coding, chargemaster, claims management and bill reconciliation processes				
Competency 2f: Ensures accuracy of diagnostic/procedural groupings such as DRG and APC				
Competency 2g: Resolves discrepancies between coded data and supporting documentation				
JOB FUNCTION 3: Maintains accurate and complete patient health records	Core			
Competency 3a: Compiles patient data and performs data quality reviews to validate code assignment and compliance with reporting requirements				
Competency 3b: Ensures that medical records are complete, including medical history, care or treatment plans, tests ordered, test results, diagnosis and medications taken				
Competency 3c: Verifies consistency between diagnosis and treatment plans, procedures and services				
JOB FUNCTION 4: Ensures compliance with healthcare law, regulations and standards	Core			

related to information protection, privacy, security and confidentiality			
Competency 4a: Participates in compliance (fraud and abuse), HIPAA (Health Insurance Portability and Accountability Act of 1996), and other organization specific training			
Competency 4b: Validates coding accuracy using clinical information found in the health record			
Competency 4c: Adheres to current regulations and establish guidelines in code assignment (focus on assignment of principle diagnosis, principle procedure, and sequencing as well as other clinical coding guidelines			
Competency 4d: Uses established guidelines to compy with reimbursement and reporting requirements such as the National Correct Coding Initiatve and others			
JOB FUNCTION 5: Maintains appropriate technology solutions including health information systems to support health care delivery and organizational priorities	Optional		
Competency 5a: Specifies, refines, updates, produces and makes available a formal approach to implement information and communication technology solutions necessary to develop and operate the health information system architecture in support of the organization			
Competency 5b: Stays apprised of innovative solutions for integration of new technology into existing products, applications or services			
Competency 5c: Identifies and clarifies user needs (internal and external customers) and organizational policies to ensure system architecture and applications are in line with business requirements			
Competency 5d: Uses and maintains applications and processes to support other clinical classification and nomenclature as appropriate (eg. DSM-V - Diagnostic and Statistical manual of Mental Disorders - SNOMED-CT - Systemized Nomenclature of Medicine -Clinical terms, etc.)			