



<b>WORKING TITLE:</b> PROFESSIONAL MEDICAL CODER	<b>CLASSIFICATION:</b> PROFESSIONAL MEDICAL CODER
<b>DEPARTMENT:</b> HEALTH AND HUMAN SERVICES	<b>DIVISION:</b> ADMINISTRATIVE SERVICES
<b>PAY RANGE:</b> OPEU 16	<b>FLSA CATEGORY:</b> NON-EXEMPT
<b>PHYSICAL REQUIREMENTS:</b> ATTACHED	<b>WORKERS COMP CODE:</b> 8810
<b>PPE:</b> PER WORK LOCATION	<b>REVISION DATE:</b> JANUARY 2026

### **JOB DESCRIPTION**

***GENERAL STATEMENT OF DUTIES:***

Performs accounting work of a complex nature, and this is an advanced-level classification in the accounting series. Employees at this level must be trained in all procedures in the YCHHS Administrative Services Division and fully understand the accounting/billing/coding process for the entire department. This position must be able to exercise independent judgment. Work duties include supporting the billing ledgers for all Health and Human Services Divisions.

***SUPERVISION RECEIVED:***

Works under direct supervision of Program Supervisor, Manager or designee.

***SUPERVISION EXERCISED:***

Supervision is not a responsibility of positions in this class. However, they may provide training to other staff and/or provide training to and oversight of volunteers, students, and inters.

**DUTIES AND RESPONSIBILITIES INCLUDE ESSENTIAL FUNCTIONS OF POSITIONS ASSIGNED TO THIS CLASSIFICATION. DEPENDING ON ASSIGNMENT, THE EMPLOYEE MAY PERFORM A COMBINATION OF SOME OR ALL OF THE FOLLOWING DUTIES:**

- Responsible for working in ledgers for all HHS divisions and programs.
- Identify coding and documentation deficiencies.
- Participate in service analysis to determine billing processes, coding requirements, and billing workflows.
- Assist with continuous quality improvement process to identify coding training needs.
- Participate in the communication to providers/clinicians and their staff on the importance of medical record charting and coding accuracy.
- May also provide coverage support to Senior Accounting Clerk.
- Keeps abreast of coding guidelines, reimbursement reporting requirements, and brings identified concerns to the program manager for resolution.
- Performs research on billing issues/coding compliance for the purpose of reimbursement and compliance with state and federal regulations according to diagnosis, operation, and

procedure on concurrent basis.

- Requires maintaining current knowledge of medical service coding and guideline.
- Purpose of decreasing level of denials and/or coding errors.
- Provides onsite coding methodology training to clinical staff for accurate documentation and charge purposes where needed.
- Abstracts pertinent information from client records per health plan, facility, and/or state/federal guidelines, assigns ICD 10, CPT, or HCPCS codes as appropriate.
- Research Medicare/Medicaid and Managed Care Organization's billing rules, and provide appropriate training, including presentations with written and verbal communication. This includes obtaining, recording, and reporting essential data, assisting in problem-solving coding issues, and ongoing education/interaction of clinicians and staff.
- Manages projects for updating and training staff for updates and changes in coding practices as identified for compliance with documentation/coding/billing.
- Assist with the continuous quality improvement process to identify coding training needs and assure timeliness of encounter completion.
- Participating in coding and compliance auditing.
- Participate in service analysis to determine billing processes, coding requirements, billing workflow and unit cost calculations.
- Serves as one of the department's technical resources on billing/coding, answers questions, and trains other staff as assigned.
- Analyzes and interprets all aspects of the County's accounting and budget procedures, including revenue, expenses, payroll, projects, and reporting requirements of respective divisions.
- Designs complicated spreadsheets; ability to independently learn new computer applications.
- Designs and maintains complex computerized database (examples include vendors, insurance, or table-driven systems).
- Understands and develops procedures to analyze special projects as requested in the YCHHS Administrative Services Division.
- Performs other necessary work as required by the Program Supervisor, Manager, or designee.

### **JOB SPECIFICATION**

#### **KNOWLEDGE OF:**

- CPT, ICD-10, HCFA 1500, and HCPCS medical service coding and guidelines, particularly behavioral health services.
- Practices, terminology and principles of bookkeeping.
- Spreadsheet programs and in-depth knowledge of fiscal system.
- Software applications in accounting or bookkeeping.
- Accounting practices.
- Clerical and office procedures.
- Health information technologies and applications.
- HIPAA and privacy laws.

- Oregon Administrative Rules related to billing and insurance regulations, medical terminology, insurance benefits and appeal processes.
- Medical billing, collections and payment posting, revenue cycle, third party payers, Medicare/Medicaid.

**SKILL IN:**

- Interpreting, analyzing, and reconciling data within the accounting system.
- Communicating effectively and concisely, both orally and in writing.
- Maintaining timely documentation and communication.
- Training and coaching people in coding practices.

**ABILITY TO:**

- Participate in department service area of quality and compliance with audit team.
  - Responsible for review of medical billing record charting. Identify coding and documentation deficiencies.
- Participate in workgroups, committees, and meetings as assigned.
- Filing, faxing, copying, answering and returning phone calls.
- Participates in employee training and orientation.
- Provides training to co-workers as requested.
- Maintains required licenses/certification/credentials as required by the position.
- Establish and maintain cooperative and effective working relationships with other employees, supervisors, and members of the public.
- Properly escalate issues needing supervisor attention.
- Prevent routine day-to-day issues from needing manager attention.
- Maintain and update billing tables in the electronic health record (EHR) to ensure accurate billing and coordinate with HHS EHR systems administrator when necessary.
- Work harmoniously with peers and professionals in various disciplines, and function in a team environment.
- Understand and apply Oregon Administrative Rules related to insurance billing.
- Learn new computer applications independently, as needed.
- Apply training and OARs to work.
- Meet required documentation timelines.
- Work harmoniously with peers and professional people in the community.
- Perform administrative tasks.
- Maintain confidentiality.
- Attend work as scheduled and/or required.

**MINIMUM EXPERIENCE AND TRAINING:**

An active Certified Professional Coder (CPC) certification through the American Academy of Professional Coders (AAPC) or equivalent is required. A high school diploma or GED is required. Two years of experience working in medical billing involving coding and accounting. Any satisfactory equivalent combination of experience and training which ensures ability to perform the work may substitute for the above.

May be subject to successful completion of a background check.

**WORK ENVIRONMENT/PHYSICAL DEMANDS SUMMARY:**

The incumbent typically works in an office environment and uses a computer, telephone and other office equipment as needed to perform duties. The noise level in the work environment is typical of that of an office. Incumbent may encounter frequent interruptions throughout the workday.

The employee is regularly required to sit, talk, or hear; frequently required to use repetitive hand motion, handle or feel, and to stand, walk, reach, bend or lift up to 20 pounds regularly and 30 pounds occasionally.

*The physical demands are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.*

*This job description in no way states or implies that these are the only duties to be performed by an employee occupying this position. Employees may be required to perform other related duties as assigned, to ensure workload coverage. Employees are required to follow any other job-related instructions and to perform any other job-related duties requested by their supervisor. This job description does NOT constitute an employment agreement between the employer and employee and is subject to change by the employer as the organizational needs and requirements of the job change.*

*The job specification requirements stated are representative of minimum levels of knowledge, skills, and abilities to perform this job successfully. Any satisfactory equivalent combination of experience and training which ensures the ability to perform the work may substitute for the above so that the employee will possess the abilities or aptitudes to perform each duty proficiently.*