Karuk Community Health Clinic
64236 Second Avenue
Post Office Box 316
Happy Camp, CA 96039
Phone: (530) 493-5257
Fax: (530) 493-5270

Karuk Tribe

Administrative Office
Phone: (530) 493-1600 • Fax: (530) 493-5322
64236 Second Avenue • Post Office Box 1016 • Happy Camp, CA 96039

Karuk Dental Clinic
64236 Second Avenue
Post Office Box 1016
Happy Camp, CA 96039
Phone: (530) 493-2201
Fax: (530) 493-5364

Vacancy Announcement

Title: Medical Coder II

Reports to: Business Office Manager

Location: Happy Camp or Yreka

Medical Coder II : $17.00 to $22.00 per hour, depending on experience

Classification: Full Time, Regular, Non-Exempt
Medical Coder II: Non-Entry Level

Summary: The Medical Coder I & II shall work in the health department under the direct supervision of the Business Office Manager. Shall be responsible for the maintenance, confidentiality and security of all Patient Care Component (PCC)/Patient Health data. Shall be responsible to audit/enter Resource Patient Management System/Electronic Health Record (RPMS/EHR) Data in an efficient and timely manner. Shall work closely with the CQI department to assure compliance with applicable Healthcare standards. Shall oversee ICD, CPT, and HCPC coding for all the medical visits at the assigned clinic location. Shall work closely with Medical Providers, other coders, and Business Office Staff.

Application Deadline: Open Until Filled

Applications are available at all Tribal Offices or on the Internet at www.karuk.us The Karuk Tribe's **(TERO) Preference and Drug & Alcohol Policy** apply. If selected applicants must successfully pass a drug screening test and be willing to submit to a criminal background check.

Job descriptions are available online at: www.karuk.us or by contacting the Human Resource Director, Telephone (530) 493-1600 ext. 2041, Fax: (855)437-7888 or (530) 493-5322, Email: vsimmons@karuk.us

Title: Medical Coder I & II

Reports to: Business Office Manager

Location: Happy Camp or Yreka

Medical Coder I : $14.00 to $18.00 per hour, depending on experience

Medical Coder II : $17.00 to $22.00 per hour, depending on experience

Classification: Full Time, Regular, Non-Exempt
       Medical Coder I: Entry Level
       Medical Coder II: Non-Entry Level

Summary: The Medical Coder I & II shall work in the health department under the direct supervision of the Business Office Manager. Shall be responsible for the maintenance, confidentiality and security of all Patient Care Component (PCC)/Patient Health data. Shall be responsible to audit/enter Resource Patient Management System/Electronic Health Record (RPMS/EHR) Data in an efficient and timely manner. Shall work closely with the CQI department to assure compliance with applicable Healthcare standards. Shall oversee ICD, CPT, and HCPC coding for all the medical visits at the assigned clinic location. Shall work closely with Medical Providers, other coders, and Business Office Staff.

Responsibilities:
1. Accurate and timely analysis and technical evaluation of medical records resulting in accurate coding of diagnoses and procedures using the RPMS/EHR system in accordance with coding guidelines and IHS requirements.

2. Assign appropriate ICD-10, CPT and HCPC codes corresponding with the documented patient information using the RPMS/EHR system in accordance with coding guidelines and IHS requirements and verifies the information will enable a "clean claim" to pass forward to the billing department and ultimately to the insurance company.

3. Continually strive to ensure the confidentiality, security, and safety of patient records and demonstrates compliance with Medical Records Policy and procedures. Apply knowledge of legal regulations and requirements pertaining to medical confidentiality, specifically the Privacy Act of 1974 and HIPAA regulations.

4. Consistently assist with all coding activities, trainings, updates and education for all staff and medical providers at all clinic locations.

5. Politely communicates with providers regarding deficiencies found on visit records and ensures deficiencies are corrected.

6. Consistently reviews and keep up to date on recent codes and coding regulation changes.

7. Capably assists with conducting coding audits to determine accuracy and compliance with applicable regulations.

8. Capably available to work closely with Business Office Manager and other appropriate Medical staff to assure accuracy of Patient Records in the RPMS/EHR data system.

9. Sufficiently enters and retrieve data as requested or required by appropriate Medical Staff.

10. Exhibits ability to work closely with PI department to assure accuracy and compliance with all appropriate Healthcare standards. Collect and monitor PI data as required and complete any requested PI activity assigned.

11. Consistently attends and participates in all meetings and functions as requested to assure coding and RPMS/EHR data accuracy.

12. Exhibits accurate and timely entry of all patient registration information including verification of patient insurance coverage at time of original registration or registration updates as necessary and provides support to the billing department as needed.

13. Capably available for local and out of the area travel as required for job related training.

14. Is polite and maintains a priority system in accepting other position related job duties as assigned.

Qualifications:
1. Have the ability to work effectively with Native American people in culturally diverse environments.

2. Have the ability to manage time well and work under stressful conditions with and even temperament.

3. Have the ability to establish and maintain harmonious work relations with other employees and the public.

4. Have the ability to understand and follow oral and written instructions.

Requirements:
Medical Coder I:
1. Medical Coder I must obtain a coding certificate to progress to a Medical Coder II.

2. Must be willing to learn CPT, ICD, and HCPC codes for optimal reimbursement.

3. Must have basic office skills to include tele-communications, typing, telephone, filing, keyboard, copiers, computers, etc.

4. Must demonstrate excellent communications skills, both oral and written.

5. Must demonstrate good time management skills.

Medical Coder II:
1. Must have a current national coding certification.

2. Must be proficient with CPT, ICD, and HCPC codes for optimal reimbursement.

3. Must have one-year experience with data processing procedures and computer data entry capability.

4. Must have basic office skills to include tele-communications, typing, telephone, filing, keyboard, copiers, computers, etc.

5. Must demonstrate excellent communications skills, both oral and written.

6. Must demonstrate good time management skills.

For Both Medical Coder I & II:
1. Must have a high school diploma or equivalency.

2. Must possess valid driver's license, good driving record, and be insurable by the Tribe's insurance carrier.

3. Must adhere to confidentiality and HIPAA policies.

4. Must provide documentation of immunity to measles and rubella or become vaccinated with the recommended vaccines and Hepatitis B vaccine and test annually for TB. Must have annual physical.

5. Must successfully pass a drug screening test and criminal background check.

Tribal Preference Policy: In accordance with the TERO Ordinance 93-0-01, Tribal Preference will be observed in hiring.

Veteran's Preference: It shall be the policy of the Karuk Tribe to provide preference in hiring to qualified applicants claiming Veteran's Preference who have been discharged from the United States Armed Forces with honorable and under honorable conditions.

Council Approved: September 14, 2017, Revised March 14, 2019

Chairman's Signature: _____

Employee's Signature: _____

** Employees must sign position descriptions annually, during their evaluation.