Integrated Health Partners (IHP) of Southern California is seeking **Coding Abstractors** to review, analyze, and accurately assign ICD-10 and CPT codes for network federally qualified health center patient activity. This position will plan a key role in ensuring accuracy of coding and documentation for network providers to accurately portray patient encounter for billing and documentation purposes. The role will partner with Coding Clinical Documentation Educators, Operations team members, FQHC providers and billing staff, and network leadership to code designated patient encounters, provide feedback for process improvements, and ensure compliance with payer and industry standards. This position actively supports the mission and vision of Health Center Partners of Southern California and its subsidiaries helping to develop high performing practices that will thrive in an environment changing from volume to value.

ESSENTIAL JOB FUNCTIONS

- Chart abstraction of diagnosis and procedure coding (ICD-10 and CPT) of identified patient encounter types at designated health centers.
- Document coding in designated EMR's based on network policy and practices to ensure accurate billing.
- Ensure compliance with industry, state, and network / payer coding practices.
- Provide ongoing updates of documentation inadequacies or trends to construct appropriate coding education and outreach to health centers and providers.
- Maintain relationships with health center clinical providers to be an asset for questions pertaining to coding and documentation.
- Maintain competencies regarding diagnosis and procedural coding based on industry or market/payer updates.
- Participate in abstract auditing/reconciliation efforts led by the health centers and/or network for continuous quality improvement efforts.
- Document work, display results effectively and appropriately and contribute content for regular progress reports.
- Perform other project-related duties as assigned.

QUALIFICATIONS

Required Skills

- Must possess valid driver's license, insurance and own transportation for use in work, and be flexible with working some evenings and weekends within a 40-hour workweek.
- Ability to travel throughout the United States. Some local and out of town travel required.

Education/Experience

Candidate must hold an active CPC (Certified Professional Coder), COC (Certified Outpatient Coder), or CRC (Certified Risk Adjustment Coder certificate and have a minimum of 2 years' experience in chart abstraction, preferably primary care / specialty care based or Federally Qualified Health Center experience. Candidate with experience working with community-based organizations and ethnically diverse communities and populations is preferred.

PHYSICAL REQUIREMENTS

- Ability to sit or stand for long periods of time
- Ability to reach, bend and stoop
- Physical ability to lift and carry up to 20 lbs.

HIPAA/COMPLIANCE

- Maintain privacy of all patient, employee and volunteer information and access such information on as need to know basis for business purposes.
- Comply with all regulations regarding corporate integrity and security obligations. Report unethical, fraudulent or unlawful behavior or activity.