INTRODUCTION

The incumbent serves as the Clinical Applications Coordinator (CAC) in the Medical Records Department and provides ongoing support of multi-service clinical software applications used in the hospital and clinic setting for the Pine Ridge IHS Service Unit in Pine Ridge, SD. The multi-service applications that support the Indian Health Service Electronic Health Record (EHR) are defined as, but not limited to Patient Care Component (PCC), Text-Integration Utility (TIU), and Health Summary. The employee also provides direct supervision for the Medical Records coding and data entry staff. **The incumbent may be required to work evenings, nights, weekends, holidays and rotating shifts.**

DUTIES AND RESPONSIBILITIES

**Clinical Applications Coordinator Duties – 50%**

Incumbent maintains the Electronic Health Record (EHR) and serves as a trainer for the staff of the entire range of application packages needed for implementation and ongoing support of the EHR.

Provides training to all employees on current computer software applications along with new features and updates while emphasizing timeliness, accuracy, privacy, security and the overall importance of every clinical application function.

Incumbent works closely with Information Technology services and support, as well as clinical staff to implement integrated packages, to resolve conflicts, and to ensure a smooth operation in areas where computer packages overlap or are integrated with another services’ functions.

The incumbent is responsible for the support and customization of the multi-service software packages that automate the capture of clinical encounter information and its subsequent retrieval. The application specialist periodically reviews site parameters and local table maintenance with each service for accuracy and completeness. The incumbent supports the implementation of new software products obtained by the facility.

Incumbent serves as liaison between management and the clinical staff for the EHR and MU processes. Serves as the Service Unit’s Electronic Health Record (EHR) team chairperson and Meaningful Use (MU) coordinator and wherever management determines skills and talents of the incumbent are best utilized.

Organizes and chairs monthly Health Information Management and Information Management meetings and provides standardized reports and minutes to this committee. Creates and customizes the EHR set-up, templates and quick orders.

Assists and coordinates the completion of applications and registers the facility and medical providers for Medicare and Medicaid meaningful use incentives. Runs production reports and calculates physician and facility incentives based on the Medicare and Medicaid guidelines.
Incumbent promotes an awareness of the importance of data validity, privacy and security. Participates and assists in correcting deficiencies and errors that occur with the use of the electronic record. Incomplete progress notes and visits are reported to each individual medical provider via the EHR notification system. A physician notification status report is completed and reported to the clinical director on a weekly and monthly basis to ensure EHR visits are completed timely and accurately.

Initiates the required paperwork for the facility’s transcription contract, downloads and cuts and pastes reports into the EHR when necessary.

Ensures PCC data exports are set up and transmitted to the National Data Warehouse on a bi-weekly basis.

Ensures ICD-9, ICD-10, CPT, HCPCS and transaction (Charge master) codes are updated continuously to allow coding assignments to be completed accurately and to the highest level of specificity.

**Supervisory Duties – 50%**

The incumbent provides supervision for a subordinate staff of approximately 12 Medical Records Technicians, ranging in grades from GS-5 to GS-8's. The incumbent plans work to be accomplished by subordinates and prepares schedules for completion of work; assigns work to subordinates based on priorities and capabilities of employees; evaluates work performance of subordinates; advise or counsel employees on work and administrative matters; interview candidates for positions, recommend appointment, promotion, or reassignment to such positions; hear and resolve complaints from employees; effects minor disciplinary measures, such as warnings and reprimands; identify training needs of employees; approves leave, etc.

**FACTOR 1 - KNOWLEDGE REQUIRED BY THE POSITION 1-7 1250**

Experience in clinical applications support in the healthcare industry or a degree in Health Information Management (HIM).

Extensive knowledge of a broad range of patient care activities, working knowledge of the hospital environment and how the different services and functions interact to coordinate the implementation of the electronic health record for the Pine Ridge Service Unit.

Demonstrated ability to communicate effectively with peers and superiors, to speak in front of groups and to communicate in writing policies, procedures, memoranda and training materials. Ability to operate and communicate effectively while under pressure is essential.

Experience serving as a liaison between groups within an organization, as an effective member of organizational teams and in coordinating software implementation projects.

Knowledge of current healthcare industry standards for the Privacy Act of 1974 and the Health Insurance Portability & Accountability Act (HIPAA) privacy and security requirements.

Working knowledge of current Indian Health Service RPMS clinical software application is required.

Must demonstrate knowledge and skill in RPMS clinical software application.

Thorough knowledge of the concepts, principles, policies, practices of Medical Records Administration including qualitative and quantitative analysis, hospital statistics, release of information, coding, privacy
act, JCAHO and HCFA standards and agency policies to effectively manage a hospital medical records program.

Extensive Knowledge of anatomy, physiology, medical terminology, pharmacy terminology, and a practical knowledge of medical procedure and diagnosis.

Knowledge of IHS automated medical records system and requirements of the Freedom of Information Act, Privacy Act, and the Drug and Alcohol Abuse Act and the Agency policy about the release of information. Knowledge of HIPAA regulations, compliance issues, fraud and abuse, EMTALA requirements, health plan regulations and litigation.

Knowledge of regulatory and licensing, and accrediting agency requirements, and the medical-legal responsibilities.

Knowledge of supervisory techniques including assignment of work, rating performance, discipline, awards, training, grievance system, personnel procedures in filling positions, establishing performance plans to administer proper supervision of subordinate staff.

**FACTOR 2 - SUPERVISORY CONTROLS**

The supervisor sets the overall goals and resources available for assignments. The employee and supervisor consult and reach mutual agreement in deadlines and projects. The employee is responsible for independently planning the medical records program, resolving most of the conflicts, which arise, coordinating work of the program and interpreting policy. The supervisor assesses performance by evaluating the effectiveness of the medical records program in meeting statutory, regulatory and agency requirements or expected results. Recommendations and decisions made by the employee are technically authoritative and normally accepted without significant change.

**FACTOR 3 - GUIDELINES**

Guidelines consist of Indian Health Service Directives, policies, regulations, circulars and other guidelines. Technical guidelines consist of ADP policies, user and technical applications, manuals and clinical policies and procedures. Guidelines related to clinical scheduling are vague. The incumbent uses initiative and resourcefulness in researching and implementing techniques and technologies in order to develop new and improved methods to cope with particular projects and exercises considerable judgment in relating technical developments or requirements to the work of specific activities or projects.

**FACTOR 4 - COMPLEXITY**

The work involves providing support of software packages to automate the clinical functions of a multi-disciplinary health care deliver system and the training of health professionals to use this automation to provide clinical care to patients. It requires good teaching skills and an understanding of the dynamic relationships between clinical and administrative, non-technical and technical personnel. The incumbent must be able to understand organizations and procedures and integrate concepts that are often diametrically opposed and then be able to provide training to the end users to maximize the automation systems. The RPMS system is highly integrated and presents special requirements for organization and coordination.
FACTOR 5 - SCOPE AND EFFECT

The primary purpose of the work is to improve patient care through the use of computerized scheduling; and to achieve the maximum effectiveness of automation implementation by integrating it as much as possible with the actual process of providing patient care. The computerization of clinical environment will reduce the workload and improve the efficiency of the providers. The rapid processing of scheduling orders of patient services and increasing the efficiency of clinical information handling directly supports the goals and objectives of management of automating the clinical record that will ultimately have a direct impact on the quality of patient care provided.

FACTOR 6 - PERSONAL CONTACTS

Personal contacts are with supervisors, IT staff, health care providers and health professionals, administrative staff and other clinical personnel in the clinic. Additional contacts are with RPMS programmers, support personnel and clinical expert members at area and the national level.

FACTOR 7 - PURPOSE OF CONTACTS

The purpose of contacts is to give and receive information, provide advice, give training and coordinate, analyze and report data. Contacts with IT staff are to negotiate services and solutions, solve problems and conflicts and assist in planning and implementing computer solutions and support activities in the work area. Other contacts are made for the purpose of completing work projects and to provide technical advice to resolve a wide range of complex information requirements. The ability to work cooperatively with these groups will dramatically affect the implementation of most projects.

FACTOR 8 - PHYSICAL DEMANDS

The incumbent’s work is mostly sedentary; however walking, standing, bending and carrying light items is required. The work requires travel for training and implementation purposes. Projects may demand the incumbent to work under stress, to meet short deadlines, or cope with changing priorities and multiple projects and tasks that are varied in nature. The computer work requires long periods of time using a keyboard, a computer and CRT.

FACTOR 9 – WORK ENVIRONMENT

The work can require long hours to meet project deadlines and to devise corrective actions to unexpected technical and/or management crises resulting in stressful work situations. Work may be performed in any area of the Pine Ridge Hospital clinic setting exposing the incumbent to the same environment as the clinical staff on duty. Much of the work will be performed in an office or classroom setting.

TOTAL POINTS: 2395
POINT RANGE: 2355-2750 = GS-11