I. INTRODUCTION:

The position is located in the Medical Records Branch, Division of Administrative Services, Northern Navajo Medical Center (NNMC), Shiprock Service Unit, Shiprock, New Mexico.

The purpose of this position is the incumbent performs data key-entry and verification of all Patient Care Component data elements into the Patient Care Component (PCC) of the Resource and Patient Management System (RPMS). This includes a wide range of health care data resulting from inpatient, outpatient, home, school and field visits at all facilities within the Shiprock Service Unit.

II. MAJOR DUTIES AND RESPONSIBILITIES:

DATA ENTRY: 90%

The incumbent transcribes from numerous data items, diverse formats, data that is not in sequence, as well some from unedited and un-coded source documents or from complex documents that are not controlled by format, reporting instructions, or source. Code and/or verifies the data as necessary to complete the patient medical record.

The incumbent operates the RPMS peripheral (CRT) and office automated equipment for the purpose of key entering extensive and complex medical and billing data. This includes the following:

1. Key entry of components of the inpatient, outpatient, and all other medical forms by utilizing a wide variety of extensive and specific data entry mnemonics to facilitate entry of data items such as: diagnoses, procedures, treatments, physical exams, measurements, medications, laboratory tests ordered/results, immunizations, skin test readings, patient educations, problem list updates, treatment notes, historical data items, and provider and location of services. Source documents frequently contain variations that must be recognized and/or corrected or referred to the proper source for correction in a timely manner, as current and accurate data may be critical to patient care services.

2. Validates and merges all complex ancillary service data, using PCC coding queue report, to identify orphan visits for laboratory, radiology and pharmacy, which requires intensive research to validate data to be completed with the correct patient visit encounter, prior to final medical coding, which requires substantial judgement in interpreting the data to appropriately connect and merge with the patient’s visit to complete the health information.

3. Enters other specific data components related to the patient encounter such as Patient Education, Health Factors, Government Performance Result Act (GPRA), and other miscellaneous data that may be needed for agency regulatory requirements or compliance for accreditation.
4. Enters Transcodes from electronic or paper charge tickets for each patient encounter for facility and professional services. Validates Transcode to ensure appropriate code correlates with correct clinical or nursing service/department for treatment and medical supplies/equipment.

5. Key entry of descriptive medical and billing codes accurately from pre-coded forms or electronic notes consisting of International Classification of Diseases (ICD), Clinical Modifications (CM), Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), American Dental Association (ADA), and Evaluation of Management codes into the PCC module.

6. Selects and applies variations when standardized forms and procedures have not been developed for the assignment.

OTHER FUNCTIONS: 10%

Identifies sources of error based on discrepancies or error messages. Determines actions needed to find and correct errors or discrepancies. Verifying assignments involve final responsibility for correcting the data before they are entered into the automated systems which requires working with up to three (3) different software systems. Interprets substantive data in the record in order to determine the specific changes required. Reviews each PCC form, EHR (Electronic Health Record) note and charge ticket encounter form for completeness. Retrieves and changes records that are already in the system. Inconsistencies identified will be addressed with appropriate department staff member.

Provides guidance and procedural instructions to other employees on complicated assignments. Orientates new department employees to data entry function.

Coordinates completion of patient data in the RPMS system with Patient Registration for school-based, community health and mobile dental encounters.

Maintains a file of all PCC Group Services forms and charge ticket forms received that are processed by batching and assigning appropriate batch numbers. Maintains other related records and file as required.

Responsible for the appropriate disposition of processed forms periodically in accordance to the IHS General Records Schedule.

Communicates with the Shiprock Service Unit RPMS Application Coordinator and Site Manager in resolving software problems. Participates in testing and debugging new data transcribing programs and keying unrefined programs. Based on limited knowledge of the programming language, makes less difficult changes in the program as they are keyed. Assists individuals in carrying out alternate procedures in case of extended system malfunction.

Participates in performance improvement activities involving data entry and data quality.

Other duties assigned:

Some duties not specifically described or included may be assigned from time to time to meet the department or facility’s objectives and obligations.
III. FES FACTORS:

Knowledge Required by the Position:

Skill in the operating features and use of video display terminals (personal computer workstations) and electronic keyboard for key-entering medical data. Skill to interact efficiently and effectively with the RPMS PCC Data Entry and Admission Discharge Transfer (ADT) modules and other standard RPMS applications. A qualified typist is required. Ability to maintain accuracy in performing work where speed and accuracy are of primary importance, which involves good hand eye coordination and finger dexterity.

Extensive knowledge on various RPMS software packages: PCC, ADT, Laboratory, Radiology, Pharmacy, Patient Registration, scheduling, Emergency, EHR, Immunization, etc., and other peripheral computer software, such as Dentrix and VISTA Imaging, to determine the data locality and interpretation of medical data, to appropriately merge with the correct patient encounter, and to recognize errors and determine what medical data to enter or merge into the patient medical record.

Thorough knowledge of various descriptive coding systems used and ability to assign codes to numerous data items. Ability to locate and identify data on diverse formats, sequence, coding, and format controls. Ability to determine and apply transcribing procedures for data entry.

Thorough knowledge of medical terminology, anatomical system, pharmacology and disease process in order to appropriately validate and merge medical results, exams and medications to correct patient encounter.

Knowledge of style, format, grammar, punctuation, spelling, sentence structure, general English usage and vocabulary to transcribe data accurately into the patient medical record.

Knowledge of data collection methods for basic health care, research information and statistical reporting. Ability to recognize the source documents used and to associate those documents with the appropriate program controls and processing and transcribing procedures.

Knowledge of the Privacy Act of 1974 and Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule of 1996, and IHS related regulations in regard to confidentiality and safeguarding of patient medical information.

Demonstrate the ability to communicate and teach data entry procedures to other data entry personnel.

Supervisory Controls:

Works under the general supervision of the Coding Unit Supervisor. The supervisor defines the objectives, priorities, deadlines, and informs the staff about changing priorities and unusual deadlines.

The incumbent carries out assigned responsibilities independently by utilizing available procedures and references. Incumbent is responsible for the timeliness of assignments. The deadlines for entry of data
must be met each month to ensure accurate statistical information for use in planning, performance improvement research and budgeting. Incumbent only refers unusual situations to the supervisor.

The work is reviewed for data entry accuracy by utilizing the PCC error listing. Conformity to schedule will be reviewed on the basis of productions workload reports, monthly logs and comments from data users on quality on output work products. Incumbent will be involved with performance improvement activity regarding data entry and data quality.

Guidelines:

The guidelines are generally verbal, and supplemented by well-established (specific and detailed) manuals, which include the RPMS PCC Data Transmission Data Entry and Mnemonics Manual, the Privacy Act, HIPAA Privacy, accrediting organizations, IHS and Service Unit manuals, IHS Internal Control Policy and Medical Records guidelines. Written and oral policies and procedures and other reference guides are available covering all aspects of the work. Due to some variables encountered, specific instructions are not always available. Similar assignments require the application of precedents and established practices.

Complexity:

The work consists of related steps or methods that involve a variety of transcribing assignments. Data is key entered accurately for efficient statistical data retrieval. The source documents, themselves, may be unformatted, come from many sources, not in proper sequence, un-coded, contain errors, and are on multi-purpose forms or embedded in electronic notes.

The employee ensures all patient health information is readily available and accessible to the health care practitioners and health care team to ensure continuity of patient care. This is also necessary for retrieval of statistical data to be used by the health care and management teams for use in planning, performance improvement, research and budgeting.

The incumbent is responsible for recognizing data quality and management of the patient’s computerized health record. The incumbent must detect and ensure correct data, visualize the form in which output is needed, retrieve and correct records already in the system, etc. Must be alert to data items that require variations in the transcribing procedures. Incumbent will be required to decipher illegible handwriting and ensure mandatory data elements are accurately key entered into the visit file.

Deadlines for completion of data must be routinely met. Accurate statistical data is dependent on the timely entry of completed data. The incumbent must be able to intermittently change from one assignment to another and retain speed and accuracy. This requires the employee to quickly shift from one computer system to another to complete and validate work performed in a hybrid environment.

Scope and Effect:

Patient data entries extracted from the PCC form and EHR note, provide extensive health information utilized by all health care practitioners and respective staff of organization that directly impact the care and treatment of the patient within the health care system. Accurate and timely data entry is imperative
as the results could directly impact the decision making of the health care provider. The PCC form and EHR note accounts for the maintenance activities needed in the care of treatment of patients. Overall scope of work directly affects the accuracy, timeliness, reliability and acceptability of information the PCC system that in turn, impacts hospital-wide management decisions and reimbursement cost maximization.

The PCC statistical information generated is essential for budgeting, program planning, research, and evaluation of the Service Unit, Area Office, and IHS Headquarters level. The timeliness and accuracy of the data is crucial in establishing the acceptability and reliability of the information and its use.

**Personal Contacts/Purpose of Contacts:**

Contacts are primarily with medical records staff peers, and other higher-level employees within the Medical Records Department. Contacts are also made with support offices or units as the business office, management information systems personnel and as needed, with health care practitioners, nursing staff, and other professions.

The purpose of the contacts is to acquire, obtain, exchange, rectify or clarify general and medical information. The information may range from general admission to highly specialized medical information. Contacts are made to coordinate work efforts and solve or resolve recurring technical problems pertaining to key entry.

**Physical Demands:**

The work is sedentary; however, there may be some walking, standing, carry of light items such as manuals or bundles of forms within the work area with the majority of time spent at the computer terminal entering medical and coding data. The visual demands is intense and the usage of video display terminals (CRT) have been known to have adverse health effects and discomforts such as eye strain, headaches, poor concentration and irritability. The extensive use of the keyboard can cause shoulder, arms, and wrist strain.

**Work Environment:**

Work is performed in an office setting with adequate lighting, heating, and ventilation. Work environment involves some discomfort due to long hours sitting while performing repetitious data key entry of medical information with limits walking within the hospital.

**IV. OTHER SIGNIFICANT FACTORS:**

The employee will be required to work on a rotational shift.

Patient privacy and confidentiality is required. The Privacy Act of 1974, HIPAA Privacy of 1996, mandates that the employee shall maintain complete confidentiality of all administrative, medical and personnel records and all other pertinent information that come to his/her attention or knowledge. The Privacy Act and HIPAA Privacy carry both civil and criminal penalties for unlawful disclose of records. Violations of such confidentiality shall be cause for adverse action.