

MEDICAL RECORDS ADMINISTRATION SPECIALIST

GS-669-11
PX3032

INTRODUCTION

This position serves as Medical Records Administration Specialist, Health Records Department at the Phoenix Indian Medical Center, a 127-bed acute care medical center and its active, affiliated outpatient clinics. The incumbent provides a wide range of advanced duties a significant portion thereof representing exceptionally difficult and complex professional, technical, and administrative tasks. Incumbent is responsible for establishing and monitoring complex automated and manual systems, necessary for the delivery of an effective Health Information Management/Health Records Department. The incumbent is expected to be the expert in the delivery of a comprehensive Health Information Management/Health Records Department for the Phoenix Indian Medical Center. In addition, the incumbent must coordinate the delivery of complex multi-disciplinary, multi-user, professional consultative services pertaining to all related health information services under departmental control for hospital committees, medical staff, allied health personnel, and various administrative personnel.

MAJOR DUTIES AND RESPONSIBILITIES

Supervisory (20%) Supervises the activities of the Inpatient Coding section, which includes at least 6 employees. Various duties include, but are not limited to the following:

Develops major goals and objectives for section activities, establishes and maintains automated and manual systems, organizes effective and efficient processes and production efforts, recruits, develops and motivates staff, as well as implements changes necessary for effective Health Information Management/Health Records operations.

Develops individual performance goals and objectives, sets priorities, delegates authority and provides direction to subordinates. Assigns work to be accomplished, sets priorities and prepares schedules. Evaluates employees' performance and initiates personnel actions.

Establishes appropriate organizational structure, defines functions and assigns responsibilities and authorities; assures Individual Development Plans, staff competencies, Privacy Act/HIPAA and other mandatory trainings are completed as required.

Identifies developmental and training needs of employees and makes provisions for such development and training. Develops and maintains mentoring plan for department to encourage and promote upward mobility.

Initiates workgroups and teams to accomplish projects and objectives, assuring open communications between staff by use of routine staff meetings, interactions and interventions.

Medical Records Administration Specialist (80%)

Provides advanced technical advice in ICD-9-CM and CPT coding practices, specialized coding tasks, as well as, the processes and procedures of Health Information Management/Health Records services related to billing and compliance. As the coding expert, consults and provides formal presentations regarding intra and extra-organizational operations and procedures related to coding/billing compliance.

Establishes and maintains varied contacts both within and outside the immediate organization related to these activities.

Provides expertise in Health Information Management electronic systems or technologies including, but not limited to Admission, Discharge, and Transfer (ADT); Patient Information Management System (PIMS); etc. Provides training as necessary.

Conceptualizes, develops, implements, and/or maintains health information management program performance improvement initiatives collaboratively with clinical and non-clinical staff that meets the needs of the PSU (e.g. Electronic Health Record project; patient scheduling project; etc.).

Screens incoming legal requests for medical records, i.e. subpoenas, tort claims, lawyer request, etc. Determines the release of these records notifying the Area, Health Records Consultant. Prepares the requested records per requirements of PHS, IHS, and PIMC regulations.

Participates in Data Quality Management/Assurance activities, performs inpatient reviews. Accordingly, assists with accreditation and/or compliance activities, such as those related to the Joint Commission on Accreditation Activities for Healthcare Organizations within the department and/or they affect the organizational-wide activities.

Conducts in-service training, and coordinates directed practice of Health Information Technology students from various schooling entities.

Maintains customer and/or staff satisfaction through routine assessments, follows process for dealing with established patient complaints, taking corrective action within established timeframes and documenting steps taken.

Works with the Compliance Officer regarding patient confidentiality. As such, assist in directing the Phoenix Indian Medical Center initiatives regarding privacy of Health Information related to Health Insurance Portability and Accountability Act (HIPAA) of 1996 regulation.

Performs other duties as assigned.

FACTOR 1, KNOWLEDGE REQUIRED BY THE POSITION

Level 1-7

Thorough knowledge of agency and governmental policies, procedures, applicable Federal statutes, and legislation governing medical records programs.

Knowledge of regulatory, licensing, and accrediting agency requirements, and medico-legal responsibilities sufficient to: solve problems covering diverse medical records situations; direct and supervise medical records staff in the various functional areas; direct or supervise planning and management of medical records programs and operations; develop management plans; design programs, including estimates of personnel, equipment, and materials; and deal with diverse technical and administrative problems and concerns.

Management, administrative, or coordination knowledge and skill sufficient to provide advisory, education and training, or problem-solving services on complex problems, projects, programs, or functions in the area of medical records.

Knowledge and skill sufficient to solve complex problems involving different aspects of medical records administration, by changing or adapting established methods, making significant departures from previous approaches to solve similar problems, revising procedures to improve or extend information gathering, and testing, changing, or adapting new methods to meet regulatory requirements. Comprehensive knowledge of the interrelationships between the medical records management program and other medical care services is used to evaluate and change or adapt new procedures to meet changing regulatory requirements and changing healthcare practices.

Knowledge of the organization of the hospital in order to coordinate and integrate the efforts of the health records department with that of other departments.

Knowledge of the Privacy Act of 1974, HIPAA rules and regulations in regards to confidentiality of patients' records in order to properly maintain the confidentiality of the record.

Thorough skill in oral and written communication in order to provide advice and maintain a close working relationship with employees, clinical and non-clinical, and patients at the hospital, clinics, other agencies and the Area Office.

Ability to oversee medical record/quality assurance activities for a complex hospital/medical center, which includes the skill in coding and analyzing medical records and ability to understand Coding/DRG system.

Ability to understand medical terminology as it relates to the Coding/DRG system.

Ability to utilize automated coding systems like the 3M encoder.

Skill in performing medical record/quality assurance hospital work which included coding and analyses of medical records.

FACTOR 2, SUPERVISORY CONTROLS

Level 2-4

The supervisor sets the overall goals and resources available for the assignment. The employee and supervisor consult and reach mutual agreement on deadlines, new projects, and management approaches to the work. The employee, having gained expertise in medical records administration, operations, and systems, is responsible for independently planning the medical records program, resolving most of the conflicts which arise, coordinating the work with others as necessary, and interpreting policy. The employee keeps the supervisor informed of potentially controversial matters or decisions, which may have far-reaching implications. The supervisor assesses performance by evaluating the effectiveness of the medical records program in meeting statutory, regulatory, and agency requirements or expected results. The supervisor reviews completed projects, reports, or recommendations for compatibility with organizational goals, guidelines, and effectiveness in achieving intended objectives.

FACTOR 3, GUIDELINES

Level 3-3

General guidelines are available including established procedures and hospital regulations although they are not completely applicable to every situation encountered.

The employee uses judgment to: interpret, select, and adapt guidelines and precedents to specific problems; apply established policies and accepted practice in setting up new procedures; and recommend changes to procedures to improve the reliability of data, enhance services, and correct deficiencies.

FACTOR 4, COMPLEXITY

Level 4-4

The work involves full responsibility for the technical aspects of a medical records department for a complex medical center, which includes a wide variety of duties involving diverse and complex technical or administrative problems and considerations: for example, testing, refining, and implementing new methods in records processing, quality assurance, and medical care cost recovery; developing procedural manuals for processing of data and release of information; or establishing standards of acceptable performance that meet internal and external requirements and regulations.

Assignments involve a recurring need for program changes as a result of changing technology, revised documentation requirements, or improvements in control systems or validation methods. Assignments are further complicated by inadequate information about the effect of new procedures (for example, prototype methodologies for which only a minimum of guidance is available); or special studies to meet research requirements.

The work typically requires determining ways to extend the capabilities of the medical records systems, changing the medical records system or program to produce acceptable results, developing new or revised procedures and protocols using standard medical records techniques, or refining existing criteria for administering or evaluation medical records programs. Assignments require independent action involving the full range of services offered in a medical records department. The work requires actions by the employee such as determining the nature and extent of problem areas and developing recommendations for solutions.

FACTOR 5, SCOPE AND EFFECT

Level 5-3

The Health Records Department is a fundamental component to the PSU. The purpose of the work is to perform a full range of medical records administration tasks to resolve problems, questions, or situations; and to plan, administer, and oversee the implementation of standardized management and use of medical records. It involves review and analysis of issues and operational processes and the formulation of recommendations on program improvements or changed operational procedures to meet medical records management goals, organization and agency objectives.

The services provided directly, or significantly impact other functions and activities throughout the organization. Additionally, the work affects the efficient development and use of medical records which provide medical information necessary to defend against legal claims, help research efforts, support patient treatment, and assure the efficient operation of the medical records system and programs.

FACTOR 6, PERSONAL CONTACTS AND

Level 6-2

FACTOR 7, PURPOSE OF CONTACTS

Level 7-b

Personal contacts are with employees, supervisors, and high-ranking managers in the same agency but outside the immediate department. External contacts include the general public, Area Office staff, state officials, attorneys, and others in a moderately structured setting. Contacts may require special preparation.

The purpose of contacts is to coordinate work efforts and solve technical problems, as well as, to influence, motivate, negotiate and resolve issues with various individuals and groups to accept and comply with established policies and regulations. Contacts with attorneys are generally to satisfy subpoenas for medical information. Persons contacted may be skeptical or uncooperative.

FACTOR 8, PHYSICAL DEMANDS

Level 8-1

The work is primarily sedentary. The employee sits comfortably to do the work. However, there may be some walking, standing, or carrying of light items such as manuals or files. The work does not require special physical demands.

FACTOR 9, WORK ENVIRONMENT

Level 9-1

The work environment involves everyday risks or discomforts, which require normal safety precautions typical of such places as offices in a medical facility. There is adequate light, heat, and ventilation in the work area.

OTHER SIGNIFICANT FACTORS

Successful completion of a bachelor's degree in a medical records administration educational program accredited by the American Health Information Management Association (AHIMA) and the American Medical Association's Committee on Allied Health Education and Accreditation (CAHEA) is highly desirable.

Registered Health Information Technician or Administrator (RHIT or RHIA) required with 3 years Health Information Management experience is highly desirable.

Certification as a Certified Coding Specialist (CCS) or Certified Professional Coder (CPC) is highly desirable from the American Health Information Management Association or comparable entity.

Equal Employment Opportunity (EEO)

The incumbent is responsible for furthering the goals of EEO by taking positive steps to assure the accomplishment of affirmative action objectives and by adhering to nondiscriminatory employee practices in regard to race, color, religion, sex, national origin, age, or handicap.

Specifically, as the supervisor, the incumbent initiates nondiscriminatory practices and affirmative action for the area under his/her supervision in the following:

- Merit promotion of employees and recruitment and hiring of applicants;
- Fair treatment of all employees;
- Encouragement and recognition of employee achievements;
- Career development of employees; and
- Full utilization of their skills.

The incumbent in conjunction with his/her supervisor develops an affirmative action plan for the area supervised including appropriate objectives and goals; communicates EEO policies, plans, and programs to employees. Seeks out and utilizes available resources, including appropriate personnel generalists/specialists, EEO specialists, and training resources in conducting these responsibilities. Incumbent will be appraised on the effectiveness of his/her EEO performance.