NAIHS GENERIC STANDARD POSITION DESCRIPTION

Medical Records Technician GS-675-05

INTRODUCTION

This position is located in the Medical Records Department of an Indian Health facility within the Navajo Area. The facilities provide a wide variety of health care services which may include, but not limited to: General Surgery, Orthopedic, Pediatrics, OB/GYN, Intensive Care, Newborn Nursery, Emergency Medicine, Internal Medicine, Family Medicine, Ears, Nose and Throat (ENT), Optometry, Dentistry, Walk-In/Urgent Care, Public Health Nurse (PHN), Podiatry, Rehabilitative Services: (Physical/Speech/Occupational Therapy), Audiology, Behavioral Health/Social Services, Nursing Home, Community Based School Health Clinics, and a variety of specialty clinics, such as Plastic Surgery, Genetics, Cardiology, Dermatology, Nephrology, and Neurology.

The purpose of this position is to perform release of information duties which include the complete and accurate process and maintenance of records within a hybrid (paper/electronic) environment.

MAJOR DUTIES

75% Release of Information (ROI)

Receives and reviews all incoming requests from hospitals, attorneys, medical audits/reviews, Social Security Administration, private physicians, insurance companies, individual requests and others including subpoenas and medical statements. Processes request for release of medical information by utilizing the Resource Patient Management System (RPMS) or Master Patient Index (MPI) to research patient data to obtain the medical record number. Discloses requested information following regulation and policies to ensure all guidelines are met.

Reviews and initiates Federal Medical Care Recovery Act (FMCRA) activities by screening third party cases for possible tort liability and reporting any such cases to the Office of Regional Counsel.

Abstracts medical information from paper/Electronic Health Record (EHR) and copy/print documents.

Rejects requests with discrepancies, returns to originating source for correction. Initiates ROI cover letter to the requestor explaining regulatory requirements necessary for request to be honored.

Researches historical patient information to request medical records from the Federal Records Centers (FRC) as a permanent or temporary withdrawal. Temporary files are returned to the FRC upon completion of ROI request.

Records into the RPMS ROI all requests for information and disclosures for accounting purposes.

Analyze the record by performing:

Quantitative Analysis – A comprehensive review to assure the presence of all component parts of the record, including correct identification and validation of each part by name, record number, dates, signatures where required, and the presence of all reports which are indicated by the nature of the case.

Qualitative Analysis – Evaluation of the record for internal consistency and completeness. Prepares copies of records for law enforcement and attorney requests to be certified by the Custodian of Records before disclosure.

Medico-Legal Requirements – The review includes making the final determination that the record is complete, accurate, and reflects sufficient data to justify the diagnosis and warrant the treatment and end results without infringing on the decisions concerning a physician's clinical judgment. Abides by specific state, federal, Indian Health Service (IHS), Privacy Act (PA), Health Insurance Portability and Accountability Act (HIPAA), Freedom of Information Act (FOIA), Medical legal, service unit and department policies and procedures, regulations regarding specific types of records, i.e., Title 42 CFR Part 2 Confidentiality of Alcohol and Drug Abuse Patient Records, Sexually Transmitted Diseases, HIV/AIDS and Mental Health related records.

Receives patient information from external organizations. Analyzes and processes as appropriate.

25% Other Medical Record Duties

Receives and completes Vital Records by obtaining physician signature and medical diagnosis following the State Vital Statistics rules and regulations.

Interprets for non-English speaking Native patients in order to ascertain their needs and assist them appropriately.

Retrieves departmental mail from the mailroom, sorts, stamps and delivers to the recipient. Prepares and disseminates outgoing mail.

Provides a productivity report to the Supervisor.

Factor 1 – Knowledge Required by the Position: Knowledge of quantitative and qualitative analysis of medical records.

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Knowledge of anatomy and physiology, disease processes and medical terminology.

Thorough knowledge of medical-legal requirements governing medical records and medical record references to include but not limited: IHS rules and regulations, Risk Management (Tort, Subpoena), FMCRA FOIA, Joint Commission, Centers Medicare and Medicaid Services (CMS), Privacy Act of 1974, and HIPAA Privacy of 1996.

Knowledge of medical record forms and EHR formats and correlation of laboratory tests, surgical procedures, consents, and treatments with diagnosis in order to assemble medical records in proper sequence ensuring all necessary forms and documents are present, accurate and complete.

Ability to communicate with internal and external customers to promote work efforts.

Factor 2 - Supervisory Control:

Under the supervision of the Supervisor or designee, who relies on judgment of employee to plan the work, resolve problems, carry out successive steps of assignments, and make adjustments using accepted standard operating procedures or practices; handle problems and/or deviations that arise in accordance with established policies, regulatory and administrative guidelines, directives, instructions, and accepted practices in the occupation. The employee consults the supervisor only on more difficult or unusual disclosures and requests. Work is reviewed for results achieved, technical soundness and conformity to medical records policy and procedures.

Factor 3 - Guidelines:

IHS Manual, References related to Privacy Act of 1974, HIPAA, Medical Record Department Policy and Procedure Manual. There are well established procedures for doing the work and other specific guidelines are available Employee refers situations to which existing guidelines are not applicable to the supervisor.

Factor 4 – Complexity:

The work entails decision making about what needs to be done which requires the technician to determine the relevance of many facts and conditions such as, information within the record, legal regulatory requirements, and other variables. The chosen course of action may have to be selected from many alternatives, for example, when standardized procedures do not address a particular issue. The work involves analyzing and interpreting laws, conditions and elements to correct complicated inconsistencies or discrepancies in the record.

Factor 5 -Scope and Effect:

The purpose of this position is to process incoming/outgoing medical data that involves and has a direct effect on medical recordkeeping, risk management, resource allocation, third party reimbursements and direct impact on the accuracy, timeliness and reliability of some medical services. The employee and Service Unit can be held liable for violation of state or federal laws for improper disclosure and release of patient's medical information.

Factor 6 -Personal Contacts and Purpose of Contacts:

Contacts are with patients, internal facility employees, legal representatives, Health Care Providers, Schools, Funeral Homes, Attorneys/Office of General Counsel, Insurance Companies, Tribal, State and Federal agencies and Law Enforcement personnel.

Factor 7 - Purpose of Contacts:

To obtain, exchange medical or personal information and to complete records; to coordinate work efforts.

Factor 8 -Physical Demands:

The work is primarily sedentary. There is some standing, walking, bending and carrying of light items.

Factor 9 -Work Environment:

Work is performed in an office setting with adequate light, heat and ventilation. There are everyday risks and/or discomforts, which require normal safety precautions typical of medical facility offices. Working in a medical facility involves exposure to communicable disease.

OTHER SIGNIFICANT FACTORS:

The employee is required to work on a rotational basis shifts (day, evening, night), weekends and holidays for those health care facilities providing after-hour services and/or extended clinic hours to support patient care services.

Patient privacy and confidentiality is required. Patient's information are to be discussed only in the context of assuring professional care. The Privacy Act of 1974 and HIPAA mandates that the employee shall maintain complete confidentiality of all administrative, medical and personnel records and all other pertinent information that comes to his/her attention or knowledge. The Privacy Act and HIPAA carry both civil and criminal penalties for unlawful disclosure of records. Violations of such confidentiality shall be cause for adverse action.