**JOB DESCRIPTION**

**TITLE:**  Clinical Documentation Improvement Specialist  
**DEPARTMENT:**  Clinical Improvement Department  
**REPORTS TO:**  Director – Clinical Improvement  
**FLSA:**  Non-Exempt

**SUMMARY OF JOB:**
To conduct clinically based concurrent and retrospective reviews of inpatient medical records to evaluate the clinical documentation of acute care services. This position will work closely with physicians and medical staff to facilitate and obtain appropriate physician documentation of patient care. Will play a key role in reporting quality of care outcomes and in obtaining accurate and compliant reimbursement for acute care services. This position will identify potential DRG (diagnosis related groups) assignment based on documentation and clinical indicators to improve the quality of documentation ensuring compliance with State and Federal regulations. The data obtained from health record review and analysis is utilized for reimbursement purposes, in the assessment of clinical care, and to support the ongoing education of the health care team, including physicians, allied health professionals, nursing and case management. This position supports timely, accurate and complete documentation of clinical information used for measuring and reporting physician and facility outcomes.

**RESPONSIBILITIES:**
Colorado West Healthcare System expects job performance to be consistent with its mission and believes that each Employee contributes to improve performance by continuously searching for ways to increase efficiencies and enhance fiscal performance and viability.

**ESSENTIAL DUTIES AND RESPONSIBILITIES:**
(The following statements are illustrative of the essential functions of the job and do not include other non-essential or marginal duties that may be required. Community Hospital reserves the right to modify or change the duties or essential functions of this job at any time. All responsibilities may not be performed by all incumbents.)

- Review and analysis of health records to identify relevant diagnoses.
- Able to collaborate extensively with physicians, nurses, other care givers and medical records coding staff to improve quality and completeness of documentation of care provided and coded concurrently. Queries physicians to clarify ambiguous, conflicting or incomplete documentation.
- Provides direction for concurrent modification to clinical documentation to ensure appropriate coding for reimbursement for clinical severity and services provided to patients with a DRG-based payer (Medicare/Medicaid).
- Maintains accurate and complete documentation of clinical information used to measure and report physician and facility outcomes.
Provides ongoing education to all staff members of the patient care team.

Facilitates modifications to clinical documentation to ensure that the medical record presents an accurate patient clinical picture and intent of the provider.

Ensures the accuracy and completeness of clinical information used for measuring and reporting physician and hospital outcomes.

Conducts concurrent review of the medical records to increase the accuracy, clarity and specificity of provider documentation.

Designs and develops documentation monitoring forms and measures the progress and quality of documentation improvements through the use of monitoring tools.

Develops profiling reports by service, physician, diagnosis and DRG.

Utilizes statistical data in preparation for presenting reports for administration and medical staff on program effectiveness and issues from concurrent documentation improvement to show how the facility can improve severity of illness and risk of mortality reporting and capture reimbursement that otherwise would have been lost.

Assists with communication between coders and physicians for retrospective querying.

Other duties as assigned.

QUALIFICATIONS:
To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

EDUCATION and/or EXPERIENCE:
Bachelor’s Degree in Nursing or Health information Management with at least five (5) years of clinical experience in a hospital setting with an understanding of ICD-10 coding and a thorough knowledge of CMS and private payer regulations related to the inpatient and outpatient Prospective Payment System OR equivalent combination of education and experience.

CERTIFICATES/LICENSES:
Current BLS
Must have a current and unrestricted Registered Nurse license with the State of Colorado RHIT/RHIA, CCS, CCDS or CDIP through the American Health Information Management Association (preferred)

LANGUAGE SKILLS:
Must be able to speak, read and write English. Ability to read and interpret documents such as physician orders, medical charts, safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to effectively present information in one-
on-one and small group situations to supervisors, patients, patient’s family and other employees of organization. Able to work in a team-oriented environment.

MATHEMATICAL SKILLS:
Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent.

REASONING ABILITY:
Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

INTERPERSONAL SKILLS:
Demonstrates exceptional customer service skills using the “Whatever It Takes” philosophy; builds relationships and proactively respects others. Requires adaptability with regular interpersonal contact.

DECISION MAKING ABILITY:
Work limited by standards and procedures. Adapts to recurring operational situations using formal and informal channels. Unusual situations are reviewed with a manager.

ANALYTICAL ABILITY:
Apply basic business or technical principles to routine and moderately complex problems. Concentrates and pays close attention to detail.

COMPUTER SKILLS:
To perform this job successfully, an individual should be computer-literate and have working knowledge of Microsoft Office applications.

PHYSICAL DEMANDS:
The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to sit; have manual dexterity; handle or feel; talk and hear. The employee is occasionally required to stand; walk; reach with hands and arms; climb or balance; and stoop, kneel, crouch, or crawl. The employee must regularly lift and/or move up to 20 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and ability to adjust focus.

WORK ENVIRONMENT:
The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is occasionally exposed to moving mechanical parts, risk of electrical shock, exposure to infectious diseases, and transmission of airborne disease. The noise level in the work environment is usually moderate.
GENERAL COMPLIANCE REQUIREMENTS FOR ALL EMPLOYEES:
Attends annual compliance and privacy training.
Responsible for complying with all federal, state and local rules and regulations.
Must comply with the Code of Conduct Guide.
Reports any observation of fraud, waste, abuse, and/or privacy violations to HR or CCO.
Reports any conflict of interest or relationship immediately.

HIPAA:
Ensures and adheres to strict confidentiality when handling patient information, according to the HIPAA Privacy Act and hospital policy and procedure regarding confidentiality. Complies with all hospital information security practices.

Has knowledge of and adheres to all compliance regulations, policies and procedures.

Final Section I understand that my employment is for an indefinite period of time and that this facility can change wages, benefits, and conditions of employment at any time.

___________________________________________________  _________________________
Employee Name & Signature  Date

___________________________________________________  _________________________
Supervisor Name & Signature  Date