

## **Charge Master Coordinator Apex Medical Center**

**Job Description:** With limited supervisions formulates and maintains the hospital's Charge Master in order to optimize revenue generation, maintain compliance with third party payer requirements, and to generation management reports relative to resource utilization and associated topics. Associated functions in related such as cost management, cost accounting, cost reporting, and decision support are performed as assigned.

### **Typical Activities:**

Coordinates, monitors and approves all changes made to the Charge Master.

Reviews and studies all information from third party payers relative to claims filing, coding, and the adjudication process.

Studies, reports and makes recommendations relative to compliance concerns.

Participates as appropriate in cost accounting activities.

Participates as appropriate in cost management and development of management reports relative to costs, charges and pricing.

Develops and applies various charge development algorithms.

Directs the Charge Master Review Team in its periodic comprehensive reviews and on-going refinement of the Charge Master.

Works with various departments in maintaining and review special portions of the Charge Master.

Meets and works with personnel involved in setting up or reengineering departments, service areas or service lines relative to development and/or changes to the Charge Master.

Works with all personnel involved in the service-documentation-charge-claims-reimbursement cycle relative to Charge Master interfaces and optimization of the process.

Attends workshops and seminars to maintain a high level of knowledge and capabilities.

Recommends and coordinates the use of consultants for specialized activities relative to the Charge Master and related areas.

Works with coding personnel to ensure that the codes on the Charge Master are accurate and current.

Works with information system personnel to make certain the Charge Master information is faithfully being placed on claim forms.

Works with upper management in the formulation of pricing strategies for negotiated contracts and capitation.

Monitors reimbursement problem areas and works with staff to resolve problems and optimize reimbursement and/or profitability.

Manages special projects relative to the Charge Master such as the merging of Charge Masters and/or special development of Charge Masters for newly acquired service providers.

### **Knowledge, Skills, Abilities and Personal Characteristics:**

Knowledge of team dynamics and the process of building consensus.

An overall understanding of financial management and reporting in health care.

Basic knowledge of various coding systems used in health care.

An overall knowledge of the functions and activities of hospitals and medical clinics.

Ability to participate with upper management in a decision support mode through the development of appropriate management information.

Understanding of compliance issues and their importance and consequences.

Detailed knowledge of various payment systems.

Knowledge of the charge development process and the interrelationship of cost accounting, cost management and related functions.

Ability to effectively work with and coordinate the activities of outside consultants.

Ability and skill to influence personnel through a matrix organization as opposed to line management authority.

Ability to develop and lead teams toward stated objectives and goals.

Skill in using personal computers for financial analysis (spreadsheets), data base development and report generation.

Knowledge and skill in using personal computers for electronic mail communications and Internet access along with internal intranet utilization.

Knowledge of hospital financial computer systems, the A/R system and the Charge Master role within such systems.

Knowledge of reference resources for information relevant to Charge Masters.

Skill in performing research with bibliographic data bases and Internet access to associated information resources.

Skill in networking both directly through colleagues and professional organizations along with the ability to utilize networking capabilities through Internet news groups and list servers.

### **Educational Background and Certifications:**

Masters Degree in Healthcare Administration or Business Administration is highly desirable.

Five to ten years progressive experience in financial management, information systems and/or health information management is required.

All applicable certifications provided by the ACHE, HFMA, AHIMA, AGPAM and/or associated organizations is highly desirable.

**Reports To:**

Director of Revenue Enhancement or Chief Financial Officer or Director Of Finance.

**Subordinate Personnel:**

This is a staff position which typically does not have subordinate personnel other than administrative support staff. Subordinate staff may be provided on a special project basis.

**Notes:** This is a highly responsible position that requires both quantitative and interpersonal skills.