UW HEALTH JOB DESCRIPTION

Senior Charge Integrity Analyst

Job Code: 440098	**FLSA Status: Exempt**	**Mgt. Approval: B. Gebhard**	**Date: January 2022**
Department: Revenue Cycle – Charge Capture & Revenue Integrity	**HR Approval: B. Haak**	**Date: January 2022**	

JOB SUMMARY

Under the general direction of the Manager of Charge Capture, the Senior Charge Integrity Analyst is responsible for the management of various operational charge capture functions.

The Senior Analyst will serve as the primary liaison between the revenue cycle and clinical leaders throughout UW Health. Responsibilities of this position will include peer training and mentoring, assisting clinical leadership and staff with charge reconciliation, identifying denial, and missed charge trends, identifying, and eliminating revenue leakage, charge reporting, and charge troubleshooting. The incumbent will need a thorough understanding of charge capture processes and procedures, project management, charging processes, and the business needs being addressed.

The Senior Charge Integrity Analyst is responsible for peer mentoring and leadership, educating revenue center departments on best practices to review and reconcile their daily charge capture processes, as well as improvement of timely charging and eliminating revenue leakage. This includes process design/documentation, reporting, training, and implementation of proposed charge practices or changes consistent with policy and established change management practices, making certain that all stakeholders and team members understand and are adequately prepared to move forward with those processes and changes. In addition, this individual will develop, produce, validate, and distribute standard charge-related reports and ad-hoc reports as needed.

The individual must work closely with a vast array of clinical, financial, and IT leadership and staff of UW Health to ensure that coding, charging, charge reporting, and reconciliation processes function smoothly. Proper charge capture is critical to achieving fair billing practices, meeting third party billing requirements, receiving appropriate reimbursement for services rendered, reaching revenue targets, and enhancing reporting capabilities.

MAJOR RESPONSIBILITIES

- Identify, coordinate, prioritize and implement changes to charging, reconciliation and reporting and oversee the development, testing, implementation, and maintenance of UW Health charging practices
- Develop, produce, validate, and distribute standard charge-related reports and ad-hoc reports as needed.
- Monitor charge capture work queues and email requests to ensure accounts are worked/corrected in a timely manner
- Communicate charge related procedure changes to clinical users, the revenue cycle, and other affected groups
- Identify any inaccurate patterns in charging and work with either the departments or technical team to resolve
- Identify and eliminate revenue leakage
- Provide direction and suggestions for process improvement and efficiency
- Team training, education, and mentoring
- Charge Integrity project management
- Participate/schedule discussions related to work-flow concerns with department managers, business office users, coding, information systems, and cost accounting teams as needed
- Work with Clinical Systems Analysts to coordinate the review of all charge requests or changes with coding, billing, and cost accounting to ensure codes follow internal and national compliance standards
- Implement new policies and procedures as needed to maximize reimbursement for all services rendered in compliance with established commercial and government payer guidelines.

ALL DUTIES AND REQUIREMENTS MUST BE PERFORMED CONSISTENT WITH THE UW HEALTH PERFORMANCE STANDARDS.

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JOB REQUIREMENTS

Education	Minimum	Associate degree in Health Care, Business, or a related field. Two (2) years of experience in charge capture, coding or a hospital business office may be considered in lieu of the Associate degree in addition to the experience below.
	Preferred	Bachelor's degree in Health Care, Business, or a related field.
Work Experience	Minimum	Five (5) years of coding or charge capture experience in a hospital business office for a large, complex health care environment including experience in an academic medical center. Experience and/or Certification with Medical Coding
	Preferred	
Licenses & Certifications	Minimum	
	Preferred	Certification with Epic Revenue Cycle Modules Certification as a Medical Coder

Required Skills, Knowledge, and Abilities		• Demonstrates a clear understanding of charging practices in an academic medical center.
		• Ability to proactively dissect large volumes of data for effective decision making
		• Ability to make good judgments in demanding situations
		• Ability to react to frequent changes in duties and volume of work and manage multiple concurrent activities
		• Ability to logically organize details
		• Responsible for leading large scale, cross-functional projects involving multiple resources, stakeholders, and spanning many months from start to finish, that educate individuals on best practices
		• Effective organizational, planning, scheduling, and project management abilities
		• Effective leadership skills.
		    o Ability to mentor and train peers
		    o Ability to implement change in a positive, sensitive, and forward-thinking manner
		    o Planning and problem solving
		    o Developing goals and objectives, and establishing priorities
		    o Inspires confidence, Good judgment, and ability to act decisively at the right time
		    o Self-starter with a willingness to try new ideas
		    o Positive, can-do attitude coupled with a sense of urgency
		• Effective communication skills both in written and verbal presentation with a communication style that is open and fosters trust, credibility and understanding.
		• Ability to analyze workflows to develop and analyze options, recommend solutions, and solve complex problems and issues
		• Strong customer service and human relations abilities
		    o Ability to effect collaborative alliances and promote teamwork
		    o Ability to ensure a high level of customer satisfaction including employees, patients, visitors, faculty, referring physicians and external stakeholders
		• Ability to use various computer applications is preferred including EPIC and Microsoft Office
		Broad knowledge of health care, coding and/or hospital business office practices and principles: general accounting principles and Coding, CPT and HCPCS

AGE SPECIFIC COMPETENCY (Clinical jobs only)

Identify age-specific competencies for direct and indirect patient care providers who regularly assess, manage, and treat patients.

Instructions: Indicate the age groups of patients served either by direct or indirect patient care by checking the appropriate boxes below. Next,

Infants (Birth – 11 months)	Adolescent (13 – 19 years)
Toddlers (1 – 3 years)	Young Adult (20 – 40 years)
Preschool (4 – 5 years)	Middle Adult (41 – 65 years)
School Age (6 – 12 years)	Older Adult (Over 65 years)

JOB FUNCTIONS

Review the employee's job description and identify each essential function that is performed differently based on the age group of the patient.

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PHYSICAL REQUIREMENTS			
Indicate the appropriate physical requirements of this job during a shift. *Note: reasonable accommodations may be made available for individuals with disabilities to perform the essential functions of this position.*			
Physical Demand Level	**Occasional** Up to 33% of the time	**Frequent** 34%-66% of the time	**Constant** 67%-100% of the time
X **Sedentary:** Ability to lift up to 10 pounds maximum and occasionally lifting and/or carrying such articles as dockets, ledgers, and small tools. Although a sedentary job is defined as one, which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required only occasionally and other sedentary criteria are met.	**Up to 10#**	**Negligible**	**Negligible**
Light: Ability to lift up to 20 pounds maximum with frequent lifting and/or carrying of objects weighing up to 10 pounds. Even though the weight lifted may only be a negligible amount, a job is in this category when it requires walking or standing to a significant degree.	**Up to 20#**	**Up to 10#** or requires significant walking or standing, or requires pushing/pulling of arm/leg controls	**Negligible** or constant push/pull of items of negligible weight
Medium: Ability to lift up to 50 pounds maximum with frequent lifting/and or carrying objects weighing up to 25 pounds.	**20-50#**	**10-25#**	**Negligible-10#**
Heavy: Ability to lift up to 100 pounds maximum with frequent lifting and/or carrying objects weighing up to 50 pounds.	**50-100#**	**25-50#**	**10-20#**
Very Heavy: Ability to lift over 100 pounds with frequent lifting and/or carrying objects weighing over 50 pounds.	**Over 100#**	**Over 50#**	**Over 20#**
List any other physical requirements or bona fide occupational qualifications:			

Note: The purpose of this document is to describe the general nature and level of work performed by personnel so classified; it is not intended to serve as an inclusive list of all responsibilities associated with this position.