

TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH DATE: April 28, 2016

RE: Approval of classification specifications to establish a Disease Data Collection Specialist/Interviewer II, Schedule 16 (\$41,870 – \$58,427), and a Billing Specialist Schedule 21(\$54,080 - \$75,421)

PETITION # 13-16

That the Southern Nevada District Board of Health approves the amendment of the Disease Data Collection Specialist/Interviewer I classification specification to include and provide distinguishing characteristics for the new classification of Disease Data Collection Specialist/Interviewer II, and approves the Billing Specialist classification specification.

PETITIONERS:

Shandra Hudson, SPHR, SHRM-SCP, Human Resources Administrator

Andrew J. Glass, FACHE, MS, Director of Administration

Joseph P. Iser, MD, DrPH, MSc, Chief Health Officer

DISCUSSION:

Creating a Disease Data Collection Specialist/Interviewer II classification in the Community Health Division will satisfy certain grant requirements. In addition, the existing Disease Data Collection Specialist/Interviewer I classification is an entry-level position, typically providing training for this series. The Disease Data Collection Specialist/Interviewer II classification establishes a journey level position that bridges a gap and allows current employees a greater opportunity for career advancement.

Financial Services is in need of personnel responsible for assuring compliant charge capture and minimizing delays in the billing process, as well as having responsibility for all aspects of the credentialing and recredentialing processes for all medical providers who provide patient care at the District.

FUNDING:

There are no current vacancies or pending promotions for a Disease Data Collection Specialist/ Interviewer II. No additional funding is a part of this request. Financial Services is eliminating one vacant Accounting Technician II position and replacing it with a Billing Specialist. There is a difference of \$12,619 in total salaries and benefits between the two positions, with no increase to FTEs.

BILLING SPECIALIST

DEFINITION

To ensure accurate, critical information to expedite charge capture, coding and compliance. Review and assign appropriate ICD-9/10 and CPT codes and recommend processes to ensure accurate and efficient coding practices applicable public health services, and clinician documentation to ensure that the Health District is compliant with all regulatory guidelines and internal controls. Responsible for coordinating and maintaining all aspects of the credentialing process. Ensures compliance with the appropriate accrediting guidelines and regulatory agencies. Perform related duties as assigned.

SUPERVISION RECEIVED AND EXERCISED

- Receives direction from the Financial Services Manager
- Receives general supervision from higher-level employees, supervisory and management staff

<u>EXAMPLES OF ESSENTIAL RESPONSIBILITIES AND DUTIES</u> – This class specification lists the major duties and requirements of the job and is not all-inclusive. Incumbent(s) may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills.

- Identify, compile and code patient data, using ICD-9/10 and CPT and other standard classification coding systems
- Review records for completeness, accuracy and compliance with regulations
- Identify, analyze and resolve discrepancies in information that is not clear or in error; update databases and forms as needed
- Assist in resolving all coding associated payer denials by pulling charts, missing operative reports and gathering information requested by insurance company and/or supervisor
- Assist with medical billing; ensure compliance with Medicaid, Medicare and insurance carriers; develop guidelines and train medical staff on coding issues and changes relating to regulatory compliance; and resolve billing problems
- Organize and verify patient records, bills, and payments; sort and file paperwork
- Facilitate all aspects of credentialing, including initial appointment, reappointment, expirables, and enrollments in accordance with policies and procedures
- Ensure quality assurance and compliance with the appropriate accrediting and regulatory agencies, while developing and maintaining a working knowledge of the statutes and laws relating to credentialing
- Maintain confidentiality of information.
- May perform special projects and assignments for accountants and management of the Finance Department

QUALIFICATIONS

Knowledge of:

- District policies, procedures and past practices; Finance Department rules, regulations and operating procedures
- Medical terminology, pharmacology, body systems/anatomy, physiology and concepts of disease processes
- Utilization of electronic medical records systems
- Modern office procedures, methods and computer equipment
- Business letter writing and report preparation techniques and methods
- English usage, spelling, grammar and punctuation
- Basic arithmetic

SOUTHERN NEVADA HEALTH DISTRICT Billing Specialist (Continued)

Ability to:

- Maintain confidential information and records
- Learn and apply departmental or divisional policies, procedures and rules
- Learn and apply Federal, State, and local laws, codes and regulations pertaining to medical coding
- Understand and communicate complex issues and changes relating to regulatory compliance and third-party reimbursements
- Provide essential coding quality reviews and subsequent medical staff training
- Compile and maintain records
- Review data to verify accuracy and completeness of patient records; identify and resolve errors and discrepancies
- Proficiently use personal computer and related software applications
- Respond effectively to requests and inquiries from the general public and employees
- Work independently in the absence of supervision
- Communicate clearly and concisely, both orally and in writing
- Establish and maintain co-operative working relationships with those contacted in the course of work

Training and Experience Guidelines

Training:

Two-year associate degree program in medical billing and coding

Equivalent to the completion of the twelfth grade supplemented by specialized training in Microsoft Office, including Word, Excel, Access, or specialized coursework; post high school course work in accounting or bookkeeping,

Experience:

Three to five years of previous work experience using a personal computer and various billing/coding software applications OR an equivalent combination of closely related education, training and work experience. Prior medical staff credentialing experience is desirable.

SPECIAL NOTES AND REQUIREMENTS:

This position requires RHIT or RHIA certification or Equivalent or other comparable coding certification which will be determined by the hiring authority at the time of recruitment.

Conditions:

All required licenses must be maintained in an active status without suspension or revocation throughout employment. Any employee may be required to stay at or return to work during public health incidents and/or emergencies to perform duties specific to this classification or to perform other duties as requested in an assigned response position. This may require working a non-traditional work schedule or working outside normal assigned duties during the incident and/or emergency.

New employees must complete Incident Command System training, ICS 100, ICS 200 and NIMS as a condition of continuing employment, prior to the completion of the probationary period.

FLSA Non-Exempt Bargaining Unit Eligible Schedule 21	
Approved on	2016

DISEASE DATA COLLECTION SPECIALIST/INTERVIEWER I/II

DEFINITION

To conduct standardized interviews and partner notification which may be done in person in a clinic, community setting or by phone; completing necessary paperwork; and entering data into database

SUPERVISION RECEIVED AND EXERCISED

Supervision provided by the Supervisor responsible for the program

DISTINGUISHING CHARACTERISTICS

<u>Disease Data Collections Specialist I</u>— This is the entry-level class in the series. This class in distinguished from the II by the performance of the more routine tasks and duties assigned to positions within the series. Since this class is typically used as a training class, employees may have only limited or no directly related work experience. Training and work experience for a DDCS I position is a minimum of 3 years and advancement to a DDCS II is considered once minimum time, core comps and trainings are completed. A complete understanding of the surveillance systems is necessary if advancement is to be considered. Advancement to a DDCS II position is not automatic and is based on position availability; funding, minimum requirements met, and interview outcomes.

Disease Data Collections Specialist II – This is the full journey level class within the series. Employees within this class are distinguished from a DDCS I by the performance of more complex surveillance and low level investigations and may be involved in the training of level I staff and the community. Employees at this level receive only occasional instruction or assistance as new or unusual situations arise, and are fully aware of the operating procedures and policies of the work unit. Positions in this class are flexibly staffed, Field focused, and is normally filled by advancement from a DDCS level I, or when filled from the outside, have prior experience. Training and work experience for a DDCS II position is at a minimum of 2 years. Those considering applying for a DIIS I position after the minimum work experience is achieved as a DDCS II, must complete all SNHD-ODS and State recommended trainings related to communicable diseases. DDCS II must demonstrate their understanding of NRS 441a, as well as their ability to case manage, interview and link to clients to treatment services. Advancement to a DIS I position is not automatic and is based on position availability; funding, and interview outcomes. Additionally, DDCS II positions are required to be FIT tested for a N95.

EXAMPLES OF ESSENTIAL RESPONSIBILITIES AND DUTIES — This class specification lists the major duties and requirements of the job and is not all-inclusive. Incumbent(s) may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills. All incumbents will start as a Disease Data Collections Specialist I and may progress to a Disease Data Collections Specialist II based on availability and interview outcomes after three years as a Disease Data Collections Specialist I.

- Provides courteous, respectful, efficient customer service to all Health District clients and with medical stakeholders.
- Enters client information into an automated database systems
- Creates and maintains case files; maintains accurate documentation regarding all information received and actions taken
- Maintains accurate logs and compiles records of work performed

SOUTHERN NEVADA HEALTH DISTRICT

Disease Data Collection Specialist/Interviewer (continued)

- Contributes to the efficiency and effectiveness of the unit's service to its customers by offering suggestions and directing or participating as an active member of a work team
- Has a full understanding of NRS 441A and the laws relevant to confidentiality both at a state and federal level.
- Conducts low level investigations to include but not limited to CT/GC
- Interviews clients to include contact tracing and surveillance for communicable or chronic diseases; and partner notification for sexually transmitted diseases
- May make home visits to obtain and verify case information; prepares case notes of home visits
- May be required to speak with support staff at clinics or physician's offices to obtain demographic information on patients
- Medical chart review
- Perform related duties and responsibilities as assigned

QUALIFICATIONS

Knowledge of

- Standard office practices and procedures, including filing and the operation of standard office equipment
- Business letter writing and standard format for typed materials, including spelling, grammar and punctuation
- Record keeping principles and practices
- Basic computer applications related to work in addition to Microsoft Word and Excel
- Excellent telephone practices

Ability to

- Deal with a variety of individuals from various socioeconomic, ethnic and cultural backgrounds
- Communicate with clients in an effective manner, in person and on the telephone
- Interview and provide customer service effectively
- Enter data into a database using a computer or PDA while interviewing over the telephone or in person
- Learn medical terminology and medical record documentation
- Interpret and apply standard regulations and procedures
- Maintain accurate records and files
- Understand and follow oral and written directions
- Work without close supervision in standard work situations
- Contribute effectively to the accomplishment of team or work unit goals, objectives and activities
- Establish and maintain effective working relationships with those contacted in the course of the work

Training and Experience Guidelines

Disease Data Collections Specialist I

Training

• Equivalent to graduation from high school

Experience

 Two years of experience in secretarial, data entry, general office support work, and customer service OR one year of experience in interviewing clients, providing information and determining eligibility for a social service, medical or related program. Certification/Licensure as a medical assistant from an accredited institution can be substituted for one year of experience.

SOUTHERN NEVADA HEALTH DISTRICT Disease Data Collection Specialist/Interviewer (continued)

Disease Data Collections Specialist II

Training

Equivalent to graduation from high school

Experience

• Three years of experience as a DDCS I and the ability to conduct low level investigations and surveillance activities regarding CT/GC independently. Must have a complete understanding of how to navigate TriSano (The Surveillance System) for investigations. Must be flexible with hours and be willing to work in the field, and in non-traditional venues.

Working Conditions

- May be required to be bilingual in Spanish/English
- May be required to visit individual client residences
- May work with individuals having infectious or communicable disease
- May be required to travel to site own personal vehicle
- Work hours may occasionally include weekends and evenings

License/Certification

- Possession or ability to obtain and maintain a valid Nevada Driver's License as a condition of employment.
- Ability to successfully complete both internal and external background verifications
- Ability to successfully pass a pre-employment toxicology screening

Conditions:

All required licenses must be maintained in an active status without suspension or revocation throughout employment. Any employee may be required to stay at or return to work during public health incidents and/or emergencies to perform duties specific to this classification or to perform other duties as requested in an assigned response position. This may require working a non-traditional work schedule or working outside normal assigned duties during the incident and/or emergency.

New employees must complete Incident Command System training, ICS 100, ICS 200 and NIMS as a condition of continuing employment, prior to the completion of the probationary period.

Bargaining Unit Eligible FLSA Non-Exempt Disease Data Collections Specialist I Schedule 14 Disease Data Collections Specialist II Schedule 16