



## Inpatient Coding / CDI Consultant Job Description

**Job Title:** Inpatient Coding / CDI Consultant  
**Department:** Inpatient  
**Reports to:** VP of Inpatient Services  
**FLSA Status:** Exempt

**Position Summary:** The Inpatient Coding / CDI Consultant completes independent record review and provides education and consultative guidance for inpatient coding and inpatient clinical documentation integrity staff. This consultant may be assigned responsibility for management of client contracts specific to inpatient coding / CDI for small to medium-sized facilities.

**Essential Duties and Responsibilities: Bolded items represent added responsibilities for the Inpatient Coding / CDI Consultant in comparison to the Associate Inpatient Coding Consultant.**

1. Complete inpatient acute care record reviews in accordance with ACS procedures (as outlined in the ACS Inpatient Reference) to verify accuracy of coding, adequacy of documentation and query compliance to support optimal DRG assignment. Coding and documentation is also evaluated for appropriate credit for risk adjustment across Medicare, Medicaid and commercial discharges.
2. Complete inpatient acute care record reviews to evaluate the impact of coding and documentation on quality metrics, Patient Safety Indicators (PSI), and mortality under Value-Based Purchasing.
3. Complete inpatient acute care regulatory compliance audits according to the audit plan for the client hospital, OIG work plan, or other areas identified as high-risk by ACS.
4. **Conduct remote or onsite concurrent CDI 1:1 review to provide real-time guidance to hospital CDI staff.**
5. Maintain review productivity commensurate with the assigned project.
6. Conduct query audits in accordance with professional practice guidance.
7. Develop and deliver client education and leadership summary conference presentations.
8. **Provide one-on-one or group education for physicians regarding documentation requirements for complete and accurate coding as needed using an ACS prepared curriculum.**
9. Manage clients with **coding / CDI contracts**, based on assignment instructions provided by the Vice President of Inpatient Services. Refer to the ACS Inpatient Reference for further detail.
  - Assure reviews are completed timely.
  - Complete client data analysis (data synopsis elements **including CDI KPI**), with identification of need for data-driven review and education.
  - Evaluate client coding **and CDI policies** for compliance and effectiveness.
  - Prepare for the consultation in advance by assuring key personnel are aware of the dates of the visit (onsite or remote), request and obtain any reports that will be needed from the client.
  - Develop and present client education and leadership summary conferences.
  - Develop client action plans based on identified needs and opportunities.
  - Prepare complete and accurate client reports within 7 days of project completion.
10. Notify the Vice President of Inpatient Services immediately if there are compliance concerns or major changes in coding policy or practice by the client, or significant fluctuations in workload that may influence ongoing consultation (too few or too many records for review).
11. In coordination with the ACS Denials Specialist, prepare appeal/agreement letters for DRG coding or clinical validation denials from various payors by detailing adherence to Official Coding Guidelines, Coding Clinics, AHIMA practice briefs, and current clinical literature.



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12. Provide advice that is consistent with Official Coding Guidelines, AHIMA Standards for Ethical Coding, ethical standards for **CDI (AHIMA and ACDIS)**, related AHIMA / **ACDIS** practice briefs and ACS coding policies.
13. Maintain subject matter expertise in clinical validation criteria and practices, ICD-10-CM/PCS code sets, coding guidelines, inpatient payment methodologies, **CDI best practice** and query compliance.
14. Attend continuing education workshops, webinars, etc., for coding and documentation integrity and compliance.
15. Participate in all ACS staff meetings and training sessions (two staff meetings per year with weekly remote Team meetings, interim inpatient team web conferences, monthly ACS webinars, and Shawnee office onsite meetings as needed).
16. Maintain consultant calendar (SharePoint) with daily updates to reflect work completed and posting of entries as soon as project work dates are proposed or confirmed.
17. Other responsibilities as assigned. Duties may be subject to change at any time at the discretion of management, formally or informally, verbally or in writing.

### **Skills and Qualifications:**

- Extensive Inpatient Coding Skills: ICD-10-CM/PCS with subject matter expertise in MS/APR DRG payment methodologies. Understanding of the impact of code assignment to quality measures and risk adjustment.
- Clinical Validation Skills: Apply current industry standard clinical indicators, risk factors and treatment protocols used in clinical validation of payment impacting code assignment. Solid command of anatomy, physiology, pathology, laboratory, imaging, pharmacology, disease assessment, management and treatment is required.
- Data Analysis Skills: Evaluate Case Mix Data or other pertinent hospital data to determine opportunities for improvement and quantify the potential financial impact and risk improvement opportunities. Explain the impact of CMI improvement strategies to client hospitals as needed.
- **Clinical Documentation Integrity Skills:** Apply knowledge of CDI best practice and key performance indicators to guide consultation.
- Computer Skills: Proficiency in Microsoft Office (Word, Excel, PowerPoint, Outlook), encoder / grouper software, and navigating various EHRs.
- Excellent written and verbal communication skills
- Interpersonal Skills:
  - Critical thinking
  - Initiative - proactive and self-directed
  - Curious and detailed oriented
  - Commitment to life-long learning

### **Experience:**

- Inpatient coding, auditing and/or education: 5 years
- Inpatient clinical documentation integrity (preferred)

### **Certification and Licensure:**

- Certified Coding Specialist (required)
- **Clinical Documentation Integrity (CCDS or CDIP required)**



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- RHIA or RHIT or RN (preferred)

Other licensure or certifications – such as CDEI, CRC, CIC, or CHDA – advanced degrees, and Fellow standings (FAHIMA, FHFMA) are also relevant to the position.

**Work Environment:** Because the majority of our work can be provided remotely, consultants are able to work from a home office, or the Shawnee office (local employees) when not required to be onsite with a client. When travel is required, we make every effort to limit the number of days away from home to two or three days in a week and provide an opportunity for consultant input into the schedule before finalizing with the client.

**Physical Demands:** Prolonged periods of sitting at a desk and working on a computer.

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Acknowledged: Supervisor Date: \_\_\_\_\_

\_\_\_\_\_  
Acknowledged: Employee Date: \_\_\_\_\_

\_\_\_\_\_  
Print: Employee Name

**ACS Career Ladder:**

