

regions and sectors of the state, including tribal governments to address: the equitable distribution or redistribution of resources and power; and recognizing, reconciling, and rectifying historical and contemporary injustices.” OHA’s 10-year goal is to eliminate health inequities.

The Pendleton Cottage/OSH Division is aligned with the Oregon Health Authority’s core values of partnership, service excellence, leadership, integrity, health equity, innovation, and transparency. In our practice, these values are expressed through:

Service Excellence:

- Understanding and responding to Oregon public health needs and the people we serve
- Pursuing our commitment to innovation and science-based best practices
- Fostering a culture of continuous improvement

Leadership:

- Building agency-wide and community-wide opportunities for collaboration
- Championing public health expertise and best practices
- Creating opportunities for individual development and leadership

Integrity:

- Working honestly and ethically in our obligation to fulfill our public health mission
- Ensuring responsible stewardship in public health resources

Health Equity:

- Eliminating health disparities and working to attain the highest level of health for all people
- Ensuring the quality, affordability, and accessibility of health services for all Oregonians
- Integrating social justice, social determinants of health, diversity, and community

Partnership:

- Working with stakeholders and communities to protect and promote the health of all Oregonians
- Seeking, listening to, and respecting internal and external ideas and opinions
- Exploring and defining the roles and responsibilities of public health staff and partners

Innovation:

- We are not satisfied with the status quo if there are new and better ways to meet the needs of the people we serve. We bring creativity, experience, and openness to our search for solutions to problems. We pursue opportunities to develop new evidence to evolve our practices.

Transparency:

- We communicate honestly and openly, and our actions are upfront and visible. We provide open access to information and meaningful opportunities to provide input and participate in our decision-making.

Pendleton Cottage, within OHA, is responsible for treatment of individuals with mental illness who do not need a hospital level of care. These individuals are placed in Pendleton Cottage primarily through conditional release from the Psychiatric Security Review Board (PSRB) and remain under their jurisdiction. Other residents may be placed in Pendleton Cottage through civil commitment or guardian commitment from Oregon State Hospital. Pendleton Cottage is a Secure Residential Treatment Facility whose mission statement is: “To act with a recovery focus to increase positive life experiences, self-confidence, and community integration.” Pendleton Cottage operates with recovery in mind intended to operate as other community operated Secure Residential Treatment Facilities.

b. Describe the primary purpose of this position, and how it functions within this program. Complete this statement. The primary purpose of this position is to:

This position works within the Therap EHR system to ensure appropriate medical records are maintained for a 24/7, 16-bed for State Delivered Secure Residential Treatment Facility, serving high risk/high profile individuals under the jurisdiction of the Psychiatric Security Review Board. The position is responsible for overseeing diagnostic coding processes within the EHR, including accurate ICD-10 code assignment, verification, and compliance with coding guidelines, while supporting Medicaid billing and timely claim submission. This position ensures integrity and accessibility of medical records through auditing, demographic entry, HIPAA-compliant archiving, and coordination with clinical staff. This position also provides administrative support by coordinating meetings and schedules and maintaining organized documentation systems to ensure smooth Pendelton Cottage departmental operations.

SECTION 3. DESCRIPTION OF DUTIES

List the major duties of the position. State the percentage of time for each duty. Mark “N” for new duties, “R” for revised duties or “NC” for no change in duties. Indicate whether the duty is an “Essential” (E) or “Non-Essential” (NE) function.

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit “Enter”.

% of Time	N/R/NC	E/NE	DUTIES
35%	R	E	<p>Diagnostic Codes & Billing</p> <ul style="list-style-type: none"> • Work within the Therap EHR to batch services and documentation for Medicaid billing. • Enter demographic information for new admissions to start their medical record using diagnostic information and demographics provided by their discharging facility. • Verify and enter admission and discharge diagnoses to the state tracking system MOTS for completion of face sheet, statistical, and research purposes. • Verify assigned ICD-10-CM diagnostic codes according to coding guidelines for fee-for-service medical diagnosis in the EHR system. • Identify issues or concerns in diagnostic information. Collaborate with physicians for diagnosis clarification. • Enter and ensure prior authorizations are complete in the EHR system, and verify services are billed at appropriate levels promptly, providing additional information if necessary. • Work within Therap to ensure case notes meet facility needs as well as compliance standards for approved services. • Bill for services on a regular basis, ensuring approved services are coded and submitted before the mid-month of the month following the provided services. Submit

			<p>billing claims within Therap on a regular and routine basis to ensure timely payment.</p> <ul style="list-style-type: none"> • Document status of billing, authorizations, denials, and requests in real time/near real time. • Prepare forms, letters, memos, reports, and spreadsheets compiling data for billing, monthly progress reports, or other documentation needs identified by the Program Director.
35%	R	E	<p>Medical Records</p> <ul style="list-style-type: none"> • Run reports within the Therap EHR system for auditing purposes and ensure that all required documentation is filed according to recordkeeping, state and federal regulations. Identify and resolve issues with missing or inaccurate documentation. • Process records requests for Pendleton Cottage current and past residents in accordance with record records policies and procedures. Provide records upon confirmation of appropriate request by past residents as well as providers after receiving approved requests for records. • Monitor record completeness, submitting requested audits of documentation accuracy and completeness. Notify the program director of deficiencies in a timely manner to ensure compliance with licensing rules and Medicaid requirements. • Enter resident demographics and work with clinical staff to facilitate record completion, including the development of records for new residents. • Archive paper files for former residents maintaining for required time frame, meeting HIPPA compliance standards-currently ten years from last contact. • Collaborate with treatment staff to ensure timely availability of all required documents for PSRB hearings, medical appointments, meetings for benefits coordination, etc. • Assist Social Workers and Behavior Health Specialists with gathering and assembling required medical documentation for intake and discharge. • Communicate concerns with receipt of required documentation for records or billings immediately to the staff responsible and escalate to the Program Director if necessary.
15%	N	E	<p>General Office Support</p> <ul style="list-style-type: none"> • Provide clerical support during ISP meetings to compile documentation into the EHR connecting service plans

			<p>with documentation systems and service codes.</p> <ul style="list-style-type: none"> • Complete IDT meeting notes, team meetings, STARTs and other needed treatment services. • Develop and track the completion of assigned action items from monthly IDT meetings. • Maintain filing and organization, set meetings, and conference calls, and coordinate/update Outlook calendars and room schedules for the Treatment Services Department at Pendleton Cottage. • Work with facility administration and staff to establish, achieve, and monitor facility goals. • Maintain the Lane Activity Center schedule board and update treatment group schedules on the houses.
10%	N		<p>Program Support</p> <ul style="list-style-type: none"> • Maintain tracking systems to monitor and ensure licensing compliance of treatment services department documentation requirements. • Serves on the Quality Assurance Committee, contributing to audits and process improvements that ensure complete HIPPA compliant medical records and support licensing requirements. • Support QA committee by compiling submitted audit documentation for review prior to committee meetings. Track completions and format into ongoing program goals. • Actively participate in the Policy Development Committee to provide expertise on documentation standards, HIPPA compliance, and EHR workflows, ensuring policies align with regulatory requirements and operational needs. • Participate in all mandatory trainings.
5%	N		Other Duties as Assigned
At All Times			<p>Integrity, Health Parity, and Service Excellence</p> <ul style="list-style-type: none"> • Demonstrates understanding of Pendleton Cottage's Mission statement, Safety, and Recovery • Demonstrates understanding of OHA Core Values of Service Excellence, Leadership, Integrity, Health Equity, and Innovation • Consistently treats customers, partners, and co-workers with dignity and respect.

SECTION 4. WORKING CONDITIONS

Describe any on-going working conditions. Include any physical, sensory, and environmental demands. State the frequency of exposure to these conditions.

This position works primarily in a facility with resident contact, who may be hostile, unpredictable, or act out violently, due to their mental illness. There is a moderate/high risk of personal injury/illness due to residents with violent behavior, exposure to infectious disease, biohazards, noise, and contaminants, etc. Work hours are subject to change with little notice. May be required to work hours that exceed the regular schedule, i.e., a double shift or a different shift in addition to the regular schedule.

Potential exposure to assaultive or aggressive individuals
Possible exposure to infectious diseases

SECTION 5. GUIDELINES

a. List any established guidelines used in this position, such as state or federal laws or regulations, policies, manuals, or desk procedures:

Oregon Revised Statutes and Oregon Administrative Rules.
SRTF Policies and Procedures
OHA Policies and Procedures
Oregon Health Plan Contracts
PSRB Administrative Rules
Center for Medicare and Medicaid Services Standards (CFR Section 42)
Coding/Diagnostic Manuals: DSM-VR, ICD-10, CPT
HIPPA

b. How are these guidelines used?

These rules, guidelines, policies, and procedures are used to make sound judgments regarding medical record filing, coding and record analysis and to ensure professional ethics are maintained.

SECTION 6. WORK CONTACTS

With whom, outside of co-workers in this work unit, must the employee in this position regularly come in contact? When applicable, please identify contacts that might be virtual/ in-person, or both.

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Who Contacted	How	Purpose	How Often?
Facility administrators	Phone/Person/Email	Receive Direction/Feedback Provide the requested documentation or reports	As needed
Direct care staff	Person	Give information for needed documentation.	As needed
Medicaid and billing staff	Phone/Email/MMIS portal	Billings submitted correctly with codes matching the treatment provided and authorized.	Daily

Residents	In person	Obtain Demographic information or release of information	As needed
Other departments	In person/phone/email	Collaboration/Support	As needed

SECTION 7. POSITION-RELATED DECISION MAKING

Describe the typical decisions of this position. Explain the direct effect of these decisions:

Make decisions related to :

Assignment of correct diagnostic codes to assure accurate billing, statistics, research, and compliance with CMS regulations and HIPAA. Determine documentation required for prior authorizations, compile and send data and documents in accordance with regulations, OAR's, and OSH policies and procedures.

Makes decisions on release of information and documentation required to meet authorization needs.

Understands and applies OHA and PC policies for confidentiality, amendments to medical records, release of information, residents' rights, medical records as legal evidence, informed consent, and risk management.

Determine compliance with record completion standards- Facility Policy, Oregon Administrative Rule, Oregon Revised Statute, and Federal and State guidelines. Makes decisions on health information data to compile and release as requested by Comagine.

Failure to make correct decisions may result in improper billing for resident treatment services and authorization denials resulting in either overpayments or underpayments and direct impact on patient treatment. Payment for services is considered in the overall development of the facility budget.

SECTION 8. REVIEW OF WORK

Who reviews the work of the position?

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Classification Title	Position Number	How	How Often	Purpose of Review
Business Operations Manager 3	000000015103	Review, observation.	Monthly As needed Quarterly	Quarterly check-in Provide performance feedback and accountability. Ensure medical coding and billing are completed accurately and according to applicable rules and regulations.

SECTION 9. OVERSIGHT FUNCTIONS

- a. How many employees are directly supervised by this position? _____
 How many employees are supervised through a subordinate supervisor? _____
- b. Which of the following activities does this position do?

- Plan work
- Assigns work
- Approves work
- Responds to grievances
- Disciplines and rewards

- Coordinates schedules
- Hires and discharges
- Recommends hiring
- Gives input for performance evaluations
- Prepares and signs performance evaluations

SECTION 10. ADDITIONAL POSITION-RELATED INFORMATION

ADDITIONAL REQUIREMENTS: List any knowledge and skills needed at time of hire that are not already required in the classification specification.

All positions in OHA require a Criminal Background Check and an Abuse/Neglect Check. Fingerprints may be required. These checks are required pre-hire and every two years following.

Background checks are required at hire and every two years.

BUDGET AUTHORITY: If this position has authority to commit agency operating money, indicate the following:

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Operating Area	Biennial Amount (\$00,000.00)	Fund Type

SECTION 11. ORGANIZATIONAL CHART

Attach a current organizational chart. Be sure the following information is shown on the chart for each position: classification title, classification number, salary range, employee name and position number.

SECTION 12. SIGNATURES

Employee Signature

Date

Supervisor Signature

Date

Appointing Authority Signature

Date