|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |

|  |
| --- |
| **State of MichiganCivil Service Commission** |

 |  |  |  |

|  |  |  |
| --- | --- | --- |
|

|  |
| --- |
| **Position Code** |

 |  |
|  |  |
|

|  |
| --- |
| 1. MDRCEXMEA40R |

 |

 |
|  |

|  |
| --- |
| Capitol Commons Center, P.O. Box 30002Lansing, MI 48909 |

 |  |
|  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |

|  |
| --- |
| **POSITION DESCRIPTION** |

 |  |  |  |
|  |  |  |  |  |  |  |  |

 |  |
|  |  |  |  |  |
|  |  |

|  |  |
| --- | --- |
|

|  |
| --- |
| This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position. |

 |
|  |
|

|  |  |
| --- | --- |
| **2. Employee's Name (Last, First, M.I.)** | **8. Department/Agency** |
|  | DOC-EGELER FACILITY |
| **3. Employee Identification Number** | **9. Bureau (Institution, Board, or Commission)** |
|  | Bureau of Health Care Services |
| **4. Civil Service Position Code Description** | **10. Division** |
| MEDICAL RECORDS EXAMINER-E | RGC/DWH Complex |
| **5. Working Title (What the agency calls the position)** | **11. Section** |
| Medical Records Examiner | Health Services |
| **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** |
| ; MEDICAL RECORD EXAM SPV-2 | Healthcare Records |
| **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** |
| PAQUETTE, LISA L; MEDICAL RECORD EXAM SPV-3 | 3855 Cooper Street, Jackson, Michigan 49201 / Monday thru Friday, 8:00 AM - 4:30 PM |

 |
|  |

 |  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |

|  |
| --- |
| **14. General Summary of Function/Purpose of Position** |

 |  |  |
|  |  |  |  |
|

|  |
| --- |
| The Health Information Manager independently manages the health information (medical record) services for the Health Care Unit. This position is responsible for managing and securing patient records. This position is responsible for compliance with federal mandates for electronic storage of patient information. This position is responsible for creation, maintenance, storage and release of all health records within their facility. This position also assists with Quality Improvement audits, data entry and training and assisting employees in the Electronic Health Record (EHR). Direct supervision is provided by the Health Information Manager Supervisor. Programmatic direction is provided by the Health Information Compliance Coordinator from the Bureau of Health Care Services. |

 |  |
|  |  |  |  |

 |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.** |

 |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |
| --- |
| **Duty 1** |
| **General Summary:** | **Percentage:** | **20** |
| Maintains the integrity of a state-wide information system. Ensures the organization and maintenance of the medical record system based on acceptable health record practices while maintaining the confidentiality of the information. Performs quality reviews. Assists in research. |
| **Individual tasks related to the duty:** |  |  |
| • Evaluates the content and quality of documentation within the health record system.• Assesses recorded health information to ensure conformance with MDOC policy, procedures, national accreditation standards,state and federal laws and other accepted regulations.• Keeps health care staff informed of the rules, regulations, policies, and procedures to ensure compliance with health recordrequirements.• Assist in the development of policies to support the delivery of high-quality health care by ensuring the availability of qualityinformation for accurate health care decision making.• Organizes and maintains the assigned record room and files. Evaluates and solves record storage issues.• Monitors the retrieval, packaging, and preparation for transport of all charts. Monitors the retrieval of records forappointments and chart reviews.• Maintains professional credentials by providing proof of continuing education credits earned. Provides confirmation ofcredentials every two years in conjunction with CE cycle. |
| **Duty 2** |
| **General Summary:** | **Percentage:** | **25** |
| On-site expert for the Electronic HealthRecord (EHR) and other data systems i.e., OMNI, OMS. Prepares statistical reports by collecting and summarizing medical care. |
| **Individual tasks related to the duty:** |  |  |
| • Enters HCC, diagnosis codes, immunization, acuity, and other required data.• Monitors reports, investigates discrepancies, and corrects data as necessary.• Maintains historical reference by abstracting and coding clinical data, such as diseases, procedures and therapies usingstandard classification systems.• Analyze health record for completeness and accuracy.• Track patient outcomes for quality assessment.• Identify opportunity for improvement.• Trains new staff in the EHR.• Provides ongoing trouble-shooting support for users of the EHR.• Prepares statistical reports as required |
| **Duty 3** |
| **General Summary:** | **Percentage:** | **25** |
| Release of Information Coordinator |
| **Individual tasks related to the duty:** |  |  |
| • Processes all record requests for information from prisoners.• Submits all requests timely for obtaining outside records.• Responds to all requests in a timely manner per operating procedure• Records all requests, answers kite requests in EHR, prepares receipts, makes copies.• Makes arrangements with custody for prisoners to come to health care if the request needs clarification.• Processes all requests from outside sources i.e., Attorney General, aftercare providers, other health care facilities, MPRI, etc.• Maintains time frames for processing of requests to avoid time related grievances. |
| **Duty 4** |
| **General Summary:** | **Percentage:** | **5** |
| Process Death Charts according to guidelines in Death Reporting Manual. |
| **Individual tasks related to the duty:** |  |  |
| • Ensures the death chart is secured.• Completes required mortality check list.• Locates and files all loose filing.• Copies records as requested.• Purge’s folders, appropriately label, and repair if necessary.• Notify County Clerk and Medical Examiner of the need for death certificate and autopsy reports.• Maintain a tickler file to follow up on these requests and forward documents to the Health Informatics Coordinator as soon asavailable.• Send Closed Records to Storage once death review is complete. |
| **Duty 5** |
| **General Summary:** | **Percentage:** | **5** |
| Provides oversight to the Lead worker Word Processing Assistant and clerical staff as a medical records resource, if applicable. |
| **Individual tasks related to the duty:** |  |  |
| • Oversees the work of the WPA retrieving charts for callouts, chart reviews, appointments. Monitors the packaging andtransfer of charts and x-rays for appointments and parole charts being sent to Storage.• Monitors the routine maintenance and repair of the medical records folders and files.• Monitors timely filing of loose documents• Oversees large copying projects to insure timely completion.• Other related duties as directed |
| **Duty 6** |
| **General Summary:** | **Percentage:** | **20** |
| Responds to da ta and other requests and other duties as assigned |
| **Individual tasks related to the duty:** |  |  |
| • Prepare and submit by due date monthly statistics and special information requests.• Responds to emails within 1-2 working days unless a response is requested sooner.• Enters personal leave requests within one working day in Sigma and payroll through Sigma by end of last working day in thepay period or sooner as requested.• Performs other health information and administrative duties as assigned• Serves on committees as assigned or elected.• Order’s health information supplies i.e.; charts and supplies as needed.• Develops, organizes, and conducts educational programs as needed. |

 |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
|  |  |
|  |

|  |
| --- |
| **16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.**  |

 |
|  |  |
|

|  |
| --- |
| Decisions based on prior experiences of knowledge of issues, policies and procedures.  Whether or not copies can be provided to requestors, ie: prisoners, outside organizations and individuals.  Information to be purged from records. |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |
| --- | --- |
|  |  |
|  |

|  |
| --- |
| **17. Describe the types of decisions that require the supervisor's review.**  |

 |
|  |  |
|

|  |
| --- |
| Decisions that involve unfamiliar circumstances or may have a legal or financial impact. |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |

|  |
| --- |
| **18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.** |

 |
|  |  |
|

|  |
| --- |
| This position is located inside the secure perimeter of a correctional facility and has daily contact with convicted felons in a maximum-security setting. Involves sitting at a computer coding, entering data into OMNI, OMS or utilizing the EHR. Other activities will include pulling and filing of health records, transporting records, processing information requests, and making copies. Physical activities involve standing, stopping, crouching, reaching, lifting, carrying, and bending. This is a drug tested position. |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.** |

 |
|  |  |  |
|

|  |
| --- |
| **Additional Subordinates** |

 |  |
|  |  |  |
|  |

|  |
| --- |
|  |

 |  |
|  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):** |

 |
|  |  |  |  |  |  |  |  |  |
|  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Complete and sign service ratings. |

 |  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Assign work. |

 |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Provide formal written counseling. |

 |  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Approve work. |

 |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| N |

 |  |  |  |
|  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Approve leave requests. |

 |  |  |

|  |
| --- |
| Review work. |

 |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Approve time and attendance. |

 |  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Provide guidance on work methods. |

 |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Orally reprimand. |

 |  |

|  |
| --- |
| N |

 |  |

|  |
| --- |
| Train employees in the work. |

 |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?** |

 |
|  |  |
|  |

|  |
| --- |
| Yes |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **23. What are the essential functions of this position?** |

 |
|  |  |
|  |

|  |
| --- |
| Ensures records are orga nized a nd confidentia lly ma inta ined in a ccorda nce with PD/OP’s. Review’s documentation in themedical record, paper, and electronic form, for completeness ensuring it meets documentation guidelines. Applies diagnosiscodes and inputs data for HCC codes, special accommodations and details, allergies, and chronic care clinics. Responsiblefor release of information, certifying all information released for legal copies. Obtains needed medical information fromother agencies as needed. |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** |

 |
|  |  |
|  |

|  |
| --- |
| Updating PD and putting on file with Civil Service. |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |

|  |  |
| --- | --- |
|

|  |
| --- |
| **25. What is the function of the work area and how does this position fit into that function?** |

 |
|  |  |
|  |

|  |
| --- |
| The function of the work is to maintain and monitor medical records and to enter information into Health Care Databases. |

 |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |

|  |  |  |
| --- | --- | --- |
|

|  |
| --- |
| **26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.** |

 |  |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| **EDUCATION:** |

 |  |  |  |  |  |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| Possession of an associate's degree in health information or medical record technology. |

 |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| **EXPERIENCE:** |

 |  |  |  |  |  |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| **Medical Record Examiner 8**No specific type or amount is required.**Medical Record Examiner 9**One year of experience equivalent to a Medical Record Examiner 8.**Medical Record Examiner E10**Two years of experience equivalent to a Medical Record Examiner, including one year equivalent to a Medical Record Examiner 9. |

 |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| **KNOWLEDGE, SKILLS, AND ABILITIES:** |

 |  |  |  |  |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| Knowledge of federal and state statues related to the health ca re field and thorough knowledge of health information management practices/techniques.Ability to understand and carry out complex assignments.Ability to provide clear and concise instruction and guidance to others. |

 |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| **CERTIFICATES, LICENSES, REGISTRATIONS:** |

 |  |  |  |
|  |  |  |  |  |  |  |
|

|  |
| --- |
| Certification by the American Health Information Management Association as a Registered Health Information Technician or Registered Health Information Administrator. |

 |
|  |  |  |  |  |  |  |
|  |

|  |
| --- |
| ***NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.*** |

 |  |  |
|  |  |  |  |  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |

|  |
| --- |
| ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** |

 |  |
|  |

|  |
| --- |
|  |

 |  |

|  |
| --- |
|  |

 |  |
|  |  |  |  |  |
|  |

|  |
| --- |
| **Supervisor** |

 |  |

|  |
| --- |
| **Date** |

 |  |
|  |  |  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |
| --- |
| **TO BE FILLED OUT BY APPOINTING AUTHORITY** |

 |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |

|  |
| --- |
| **Indicate any exceptions or additions to the statements of employee or supervisors.** |

 |  |
|  |  |  |
|  |

|  |
| --- |
| Updating PD and putting on file with Civil Service. Unsure of when PD was last updated. tlb 5177806057 |

 |  |
|  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |

|  |
| --- |
| ***I certify that the entries on these pages are accurate and complete.*** |

 |  |
|  |  |  |  |  |
|  |

|  |
| --- |
| TAMMY BROWN |

 |  |

|  |
| --- |
| 12/6/2021 |

 |  |
|  |  |  |  |  |
|  |

|  |
| --- |
| **Appointing Authority** |

 |  |

|  |
| --- |
| **Date** |

 |  |
|  |  |  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |

|  |
| --- |
| ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** |

 |  |
|  |

|  |
| --- |
|  |

 |  |  |  |
|  |  |

|  |
| --- |
|  |

 |  |
|  |  |  |  |
|  |  |  |  |  |
|  |

|  |
| --- |
| **Employee** |

 |  |  |  |
|  |  |

|  |
| --- |
| **Date** |

 |  |
|  |  |  |  |
|  |  |  |  |  |

 |  |
|  |  |  |  |  |  |  |  |  |  |  |