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|  |  | |  |  | | --- | --- | | |  | | --- | | 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-JACKSON CENTRAL REGION | | **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 | Regional Health Care | | **5. Working Title (What the agency calls the position)** | **11. Section** | | Medical Record Examiner 10 | Regional | | **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** | | PAQUETTE, LISA L; MEDICAL RECORD EXAM SPV-3 | Regional | | **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** | | PAQUETTE, LISA L; STATE ADMINISTRATIVE MANAGER-1 | 3857 Cooper St., Jackson MI 49201 / Mon-Fri 7:00 am to 3:30 pm | | |  | | |  |
|  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | |  | | --- | | **14. General Summary of Function/Purpose of Position** | |  |  | |  |  |  |  | | |  | | --- | | This position serves as the Release of Information Specialist for the Bureau of Health Care Services/Michigan Department of Corrections. Monitors the Release of Information process for quality and ethical practices. Responsible for completing Release of Information requests received for Paroled, Discharged and Expired Prisoners. Assists in Special Projects and provides coverage for MDOC facilities as requested. Research current legal standards in correctional and community settings providing guidance as necessary. Participates in the development of Health Information Services policies and procedures on Confidentiality, Information Security, Information Storage, Retrieval and Record Retention. Monitors and provides updates for review of Release of Information policies as needed. Serves as a member of the Health Information Advisory Committee | | | |  | |  |  |  |  | | | |  |

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|  |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **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** | | Receives and reviews requests for Health Information. Determines if fees are to be charged. Composes and sends response to requester regarding the process including total fees due and any additional information needed. | | | | **Individual tasks related to the duty:** |  |  | | * Sort, open and date stamp mail. * Review email for Electronic Requests. * Utilize databases to search for, identify/verify patient name, prisoner number, DOB and medical record location. * Enter request into ROI database. * Review request for properly executed authorization. * Interprets guidelines to determine if request is approved or denied.   Composes initial response, including fees due and any additional information needed from the requester, within policy time frame. | | | | **Duty 2** | | | | **General Summary:** | **Percentage:** | **30** | | Receives payment when applicable. Reviews EHR and hard copy files, selecting information to complete requests. Downloads, copies, etc. and assembles requested records. Composes response letters and sends copies via requested format. | | | | **Individual tasks related to the duty:** |  |  | | * Receives payment and sends to Regional Business Office for processing. * Log’s payment received in ROI log. * Reviews pertinent medical files. * Selects specific information based upon request. * Downloads, copies, etc. and assembles. * Compose the response letter to accompany completed request. * Log’s request completed in ROI log.   Prepares and sends requested information via, US mail, email, etc. per request. | | | | **Duty 3** | | | | **General Summary:** | **Percentage:** | **10** | | Request’s paper medical files when applicable | | | | **Individual tasks related to the duty:** |  |  | | * Prepares record request and sends to Record Retention. * Contact facilities when needed to obtain paper medical files. * Notifies requester when records cannot be located or are beyond retention and have been destroyed.   Returns to Record Retention when ROI is complete. | | | | **Duty 4** | | | | **General Summary:** | **Percentage:** | **20** | | Completes research to maintain compliance with the latest up to date Laws, Statutes, Acts, etc. Update’s policy and procedure to reflect changes. | | | | **Individual tasks related to the duty:** |  |  | | * Conducts research of current laws, statues, community practices related to the Release of Protected Health Information. * Makes recommended changes to Department Health Information policies and submits to HIAC for review. * Communicates with Office of Legal Affairs and the Attorney General when necessary, to clarify information. * Functions as the expert and provides direction to facility Health Information Managers when needed.   Updates and distributes Release of Information Guidelines as needed. | | | | **Duty 5** | | | | **General Summary:** | **Percentage:** | **20** | | Responds to data, other requests and other duties as assigned. | | | | **Individual tasks related to the duty:** |  |  | | * Prepares and submits 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 time sheet through Sigma by end of the workday Wednesday of pay week or sooner as requested. * Performs other Health Information duties as assigned. * Serves as a member of the Health Information Advisory Committee (HIAC) and other committees as assigned. * Develops, organizes, and conducts educational programs as needed.   Completes yearly training within designated time frames as assigned. | | | | | | | | | | |  |
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|  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **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.  Decisions regarding whether copies can be provided to requesters, IE: prisoners, outside organizations, individuals, etc. | | | | | | | | |  |
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|  |  |  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **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 on the department | | | | | | |  |
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|  |  |  | |  |  |  | | --- | --- | --- | |  | |  | | --- | | **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 requires periods of prolonged standing and sitting. Stooping, bending, lifting of records, boxes of records, copies, paper, etc. is required daily. This position can be stressful at times due to processing deadlines. This position works 100% of the time within the secure perimeter of a Correctional Facility and is subject to random drug and alcohol screening | | | | | | | | | |  |
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|  |  |  |  |  | |  |  |  |  | | --- | --- | --- | --- | | |  | | --- | | **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** | | |  | |  |  |  | |  | |  | | --- | |  | |  | |  |  |  | | | | | |  |
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|  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **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. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | | | | | | | | |  |
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|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?** | | | |  |  | |  | |  | | --- | | Yes | | | | | | | | | | |  |
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|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **23. What are the essential functions of this position?** | | | |  |  | |  | |  | | --- | | Ensures Release of Information requests are completed timely and following policy and procedure. Researching and applying knowledge to maintain up to date information regarding the lawful Release of Health Information. | | | | | | | | | | |  |
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|  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** | | | |  |  | |  | |  | | --- | | This position was updated to reflect the current duties of the position as the old PD had never been updated.  This positions focus is on Release of Information and being the lead in release of information research, policy and procedure.  This position processes release of information request, works with OLA to ensure any ROI questions are answered and is a member of HIAC. | | | | | | | | |  |
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|  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **25. What is the function of the work area and how does this position fit into that function?** | | | |  |  | |  | |  | | --- | | The function of the work area is to respond to and complete requests for copies of Health Information. To maintain records and databases of work completed. Complete research and update policy and procedure to reflect the latest laws, statues, etc | | | | | | | | | |  |
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|  |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **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 Release of Protected Health Information.  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.*** | | | | |  |  | |  |  |  |  |  |  |  | | | | | | | | |  |
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|  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***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** | |  | |  |  |  |  |  | | | | | | | | |  |
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|  |  |  |  |  |  |  |  | |  | | --- | | **TO BE FILLED OUT BY APPOINTING AUTHORITY** | |  |  |
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|  |  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  |  |  | |  | |  | | --- | | **Indicate any exceptions or additions to the statements of employee or supervisors.** | |  | |  |  |  | |  | |  | | --- | | Supervisor notes multiple changes in position description. Verification of position before recruitment begins. Liz Solomon updated #24 | |  | |  |  |  | | | |  |
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