Medical Billing and Coding Career Guide

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Medical Billing and Coding Career Reference Guide

Considering a medical billing and coding job? A career in medical billing or coding offers an opportunity in a field that will always need employees. This is a brief introductory guide to what a medical billing specialist and medical coder does, what kind of training is needed, expected salary range, and what the career options are. You've probably have seen the ads promising at home medical billing and coding jobs. I'll discuss the reality of medical billing and coding jobs from home based on my experiences.

For more detailed information, checkout our website All-Things-Medical-Billing.com

Career Options

Not only is there a need for medical billing and coding specialists for doctors and hospitals, there's also opportunities for medical billing and coding careers as:

- Consultants for practices advising on billing and coding practices and compliance issues.
- Specialists who work for medical billing and coding services and serve multiple practices and specialties.
- Insurance and coding specialists for commercial and private insurance and local, state, and federal government agencies.
- Advisers for liability and malpractice.
- Consumer billing advocates.

What is Medical Billing?

So what does a Medical Biller do? Basically everything involved to get a doctor or other health care professional paid for their services. This is both payment from the insurance carrier and the patient. A medical billing specialist should be detailed oriented, have good math and data entry skills, understand insurance claims procedures, medical billing terms, medical diagnosis codes, and become familiar with medical billing guidelines.

What is Medical Coding?

A medical billing coder analyzes patient charts and assigns the appropriate diagnosis and treatment codes. These codes are derived from ICD-10 diagnosis codes and corresponding CPT treatment codes and any related CPT modifiers. Some medical billing and coding specialists obtain some type of certification from a recognized professional organization. In general the more certifications the greater the income potential. Proper coding is very important to getting fairly reimbursed.

Good coding complements the billing process and insures the provider is getting fairly compensated. Even if you want to stick strictly to medical billing, having a basic understanding of what the medical coding specialist does is important. If you are a biller, the more you can learn about coding, the more valuable you are to a practice or billing company. Most small practices don't have dedicated coders or billers - they multi-task and may perform limited coding functions in addition to billing.

The medical billing specialist really needs to know enough about coding to see when the CPT medical billing coding are not compatible with the ICD codes. For smaller practices the provider may do their own coding and the medical billing specialist acts more to identify out of date codes so the provider can correct them. Most practices use a lot of the same diagnosis and treatment codes so once you become familiar with the codes and medical billing modifiers, you've conquered the most difficult part. The most commonly used ones may be listed on the practice superbill.

For family or internal medicine practices, you may see a wider variety of codes and modifiers than for specialty providers. My medical billing company serves smaller practices that may need coding services, so we offer medical coding services to complement our billing services. Many medical billers prefer to stay strictly with medical billing services and that's great. But if you can become proficient in coding - even if you are not an expert - you're much more valuable to a provider.

The Medical Billing Claim Process

When a patient visits a physician, the doctor writes down the observed conditions and treatment. This information is then given to a medical coder who assigns the appropriate ICD-10 diagnosis and CPT medical billing codes (and CPT modifiers if necessary). The coder may get a written or voice audio dictation file from the doctor that contains the details of the diagnosis and procedures performed on each patient.

The coder may use reference coding books to look up the correct diagnosis codes (like

the ICD-10-CM Expert for Physicians) and the corresponding CPT treatment codes and modifiers (CPC-Current Procedural Coding Expert). There are also online coding references such as Find-A-Code.com that have the latest treatment and diagnosis codes. These services require a subscription for access but can be a real time saver.

It's very important that the ICD-10 and CPT codes be correct so the claim doesn't get rejected. Depending on how thorough a doctor is, coding from the providers dictation or handwriting can be very time consuming. However once you get to know the doctor's preferences and habits the process goes much more efficiently.

This is where the medical billing specialist gets involved. The codes are then typically entered or checked on a superbill or patient encounter form. You've probably seen one of these when visiting the doctor. Some practices now do this electronically. They take the superbill and input the information into the electronic medical billing software. Paper claims are printed out on a CMS-1500 insurance form and mailed to the insurance carrier.

Electronic claims are sent as an electronic file either directly to the insurance company or to a clearinghouse. The clearinghouse takes the claim information, checks the claim for errors, and sends the claim information electronically to insurance companies. Most clearinghouses have a large payer list and can send claims to mostly all of the major insurance companies. This can be a real time saver as each insurer can have different submittal requirements and interfaces. Claims sent electronically are paid much faster than paper claims. Depending on the practice this could be just a few claims or over 40 claims a day.

If the claim is rejected, the medical billing specialist follows up to find out why it was rejected, correct the claim, and resubmit. An appeal may also need to be written and submitted with supporting information to the insurance company.

When a payment is received from the insurance carrier, it is accompanied by an EOB (Explanation of Benefits). This information is then entered into the medical billing software. If there is any patient responsibility such as co-pays and co-insurance, a patient statement is printed and mailed. This is usually done in batches on a monthly basis. Some patients also have secondary insurance which requires a second claim be submitted with the EOB to the secondary insurer.

Sometimes a patient has questions about their bill. This requires the medical billing specialist to look up their account information and explain the charges and why they

were not covered. Many patients don't understand the limits of their insurance coverage and must be referred to their insurer to explain.

Medical Billing and Coding Training

Medical billing training is typically not as involved as the training needs for medical coding. If you're goal is a corporate job, generally the more training and credentials the better. Even if you're planning to stay strictly in medical billing, having some coding knowledge is very useful in understanding coding errors. A good knowledge of coding also makes you more valuable to an employer and justifies asking for a higher salary.

The amount of training you need depends on your goals – getting a good job at a hospital, large practice, or insurance company - or starting a medical billing business. Smaller practices will usually not be as stringent for certification or training. The downside is they probably aren't going to pay as well or have the benefits of a larger employer. One of the nice things about a smaller practice is they tend to be more informal.

Medical Billing Training

Training for medical billing can be obtained from a variety of sources such as local vocational schools, community colleges, or distance learning (or online). A good medical billing training program establishes a basic foundation in medical billing necessary for an entry level job. A good certificate program can can take anywhere from 6 to 9 months to complete. Topics typically covered:

- Keyboarding skills
- Medical terminology
- Medical office procedures
- Billing and insurance reimbursement
- Basic coding
- Medical law (HIPAA) and ethics

There are also reasonably priced (less than $1000) reputable medical billing courses online which can be completed at your own pace. If you are considering an online medical billing school, the material should be written by someone with extensive experience in the field. You should also receive a certificate upon successfully completion.

If you are really eager to learn but don't have a lot of money to invest, free medical billing training is possible if you are willing to work for a while for little or no pay. This can be a great way to get your foot in the door and establish yourself in the field. That's how I got started. Fortunately the billing service I worked for paid me well so I saw it as basically getting paid to learn medical billing.

Medical Coding Training

Medical coding training can run the whole spectrum from associate's degree to a diploma or certificate program. On the longer end is an associate's degree in Healthcare Reimbursement. Some schools may describe this degree slightly differently. This is the most comprehensive medical coding training and can typically take 18 months to 2 years to complete. The curricula would typically cover:

- Basic keyboard skills
- Human anatomy
- Career planning
- CPT, ICD, & HCPCS coding
- Billing and insurance reimbursement
- Medical terminology
- Advanced billing and reimbursement
- Office procedures
- Medical ethics and law
- Communications
- Fine arts or humanities
- Mathematics
- Social Sciences

The associates program would prepare a student to take a certification exam by either American Academy of Professional Coders (AAPC) or American Health Information Management Association (AHIMA).

A diploma program is a more abbreviated medical coding training compared to an associate program. This type of program would include more detailed training in procedures and the nuances of healthcare billing. Approximately twice as many courses as the shorter certificate program typicall taking 9 months to 1 year to complete.The curricula would typically cover:

- Basic keyboard skills
- Human anatomy
- CPT, ICD, & HCPCS coding

- Billing and insurance reimbursement
- Medical terminology
- Office procedures
- Medical ethics and law

Medical Billing and Coding Certification

Professional medical billing and coding certification is a designation earned by an individual as proof that a minimum level of competency. Certification typically follows graduation from a formal training program and requires passing a certification exam. The certification is usually earned from a professional society and valid for a defined time, such as 1 year. These certifications must be renewed on a periodic basis and require evidence of completion of continuing education units (CEU's) and maintaining membership in the granting professional society.

Certification is different from being licensed. Licensing is typically required by state government agencies to demonstrate a minimum level of knowledge or ability as required by law.

Benefits of Certification

- Distinguishes you from others - gives you an advantage when applying for job over those not certified.
- Shows your commitment to the profession - Shows management that you are improving.
- Improves income potential.
- Demonstrates a basic level of knowledge about the profession.
- Commitment to ethical responsibilities of the profession.
- Improved opportunities for advancement.

There's not a combined medical billing and coding certification, but there are separate certifications for medical billing and medical coding. Medical coding certifications are more diverse and involved due to the complexity of coding. Independent home based medical coders and billers benefit from certification for marketing your credentials to potential clients.

Medical Billing Certification

The American Medical Billing Association (AMBA) is probably one of the most recognized organizations offering a medical billing certificate through examination and

education. The Certified Medical Reimbursement Specialist (CMRS) is an exam based certification that demonstrates a knowledge in insurance reimbursement, medical terms, coding (ICD9, CPT4 and HCPCS), claim appeals, and compliance (HIPAA and OIG).

The CMRS exam has 16 sections with 700 questions. A score of 85% is required to pass and recieve the CMRS credential designation.

The CMRS Exam is divided into 16 Sections:

- Medical Terminology
- Anatomy and Physiology
- Information Technology
- Web and Information Technology
- ICD-9-CM Coding
- CPT-4 Coding
- Clearinghouses
- CMS 1500
- Insurance
- Insurance Carriers
- Acronyms
- Compliance
- Fraud and Abuse
- Managed Care
- General
- Case Study

Maintaining certification requires obtaining 15 continuing education units (CEU's) from an approved listing every year. Cost is $325 plus membership in AMBA. AMBA recognizes the CEU's from courses offered by the AAPC (American Academy of Professional Coders) and many other reputable organizations.

Healthcare Billing and Management Association

The Healthcare Billing and Management Association offers the Certified Healthcare Billing & Management Executive (CHBME) and Certified Medical Billing Associate (CMBA). However these tend to be designed more for executives, managers, and supervisors. Probably the highest level of credentialing offered for medical billing and reimbursement is the RHIA and RHIT certifications offered by the AHIMA (American Health Information Management Association).

RHIA is Registered Health Information Administrator. They are mostly involved with the

management of patient health information, medical records, and computer information systems.RHIT is Registered Health Information Technician. They are health information technicians associated with medical records and computer applications and systems.

Medical Coding Certification

Coding credentials are administered by two different organizations - AAPC (American Academy of Professional Coders) and the AHIMA (American Health Information Management Association). Employers may have differing preferences when hiring. If you are considering becoming credentialed talk with an experienced professional already in the coding field and get their opinion. Here's a summary of their certifications:

AAPC Certifications:

- CPC - Certified Professional Coder
- CPC-H - Certified Coding Specialist - Hospital
- CPC-P - Certified Coding Specialist - Payer
- AAPC also offers several other specialty credentials

AHIMA Certifications:

- CCA - Certified Coding Associate. This is an entry-level certification.
- CCS - Certified Coding Specialist. More proficient coders.
- CCS-P - Certified Coding Specialist - More proficient Physician Based coder.
- CHDA - Certified Health Data Analyst

Outlook for Medical Billing and Coding Employment

Medical Billing Employment

The U. S. Department of Labor - Bureau of Labor Statistics projects an annual increase of 14.4% in health care office and administrative support occupations. Although the Department of Labor does not specifically categorize the medical billing specialist, they do project a 20.9% increase in those performing bookkeeping and accounting functions and a 21.5% increase in general office clerical functions - which is where the medical billing employment functions best fit.

This corresponds to a projected increase of 21.3% for professional and related

occupations - or health care providers which will need billing services. Especially considering the increasing complexity of the billing process brought on by changes in health care reimbursement (like HIPAA).

In summary the outlook is very good for medical billing employment. And this is based on the most credible source available - the U.S. Department of Labor. Reference the Bureau of Labor Statistics Career Guide to Industries - Health Care.

Medical Coding Job Opportunities

The DOL projects a faster than average growth for medical coding jobs with those having a good background being in especially high demand. Through the year 2016, medical coding positions are estimated to increase by 18%.

This higher than average demand is due to the increased need for medical treatments, procedures, and tests due to an aging population. Also driving the demand is greater scrutiny placed on health care services by insurance companies, consumers and their employers, and regulatory agencies.

Medical coding jobs will also be abundant for those with good computer skills. There is an increasing movement by the health care industry to electronic medical records. DOL projects opportunities in physician offices, outpatient and home health services, and nursing facilities. Not only will new positions be created but many opportunities will be created by retirements.

Experienced medical coders with credentials will be in particularly high demand. Health care providers and facilities are challenged to attract and retain good coders. The Occupational Outlook anticipates job prospects to be especially good for medical coders through temporary job agencies and professional services firms.

The U. S. Department of Labor (DOL) creates the Occupational Information Handbook which gives the outlook for various professions in the United States. The medical coder job falls under the classification of Medical Records and Health Information Technicians. According to their latest report, approximately 2 out of 5 jobs (or 40%) of jobs are in hospitals. The remaining 60% are in provider offices, nursing facilities, outpatient centers, and home health services.

Work Schedule

Most medical coding positions work a typical 40 hour work week with occasional

overtime. Hospitals which are open 24/7 may require coverage during evening, night, and weekend times. Because of the increased demand of medical billing coding jobs, employers may be more accommodating of flexible work schedules. In their attempts to attract good employees, employers will probably be more accommodating by offering more flexible work hours and work-at-home options.

Finding Medical Coding and Billing Jobs

A good place to start is the local classified listings - online classified is probably the easiest. Although local newspapers aren't the only source in searching for medical billing and coding jobs like there used to be, they are a good starting point when looking locally. Don't forget CraigsList - many employers are discovering this is a great way to advertise medical coding and billing jobs because it's free, quick, and easy.

According to a recent CNNMoney article, most people looking for a job look in a variety of different sites. The average web sites used in most job searches is 5. For larger employers such as hospitals, large practices, and medical research facilities, you'll do better going directly to the web site for job listings. But it really helps to have someone you know on the inside pulling for you (and looking out for your resume) at these larger employers.

Most Popular Web Sites

There's two types of online job sites - general purpose job boards catering to a wide variety of professions, industries and locations. General purpose sites are CareerBuilder, Monster, or Yahoo! HotJobs. In the latest survey by Weddle's which prints a guide to internet job hunting, the most popular job sites are:

- CareerBuilder
- CareerJournal
- Indeed.com
- Job.com
- Monster
- SimplyHired
- HotJobs (Yahoo!)
- SnagAJob

After trying several of these sites to search for a medical billing and coding job, I really

liked the Indeed Jobs site the best. It's one of the best sites to search for online medical billing jobs. Indeed compiles job listings from thousands of different job website sources from large and small local companies. The job results are relevant, unlike other job sites who send you jobs in a completely different field when you sign up for email alerts. Indeed allows you to save your searches and sign up for email alerts.

Online sites also have a lot of tools to help in the job search like advice, example resume's, and preparing for the interview. They allow you to set up a profile and receive email notification when there's there's an opening that matches your criteria. Monster even offers resume writing and interview coaching services for a fee.

I notice there's a lot of jobs listed in both the local and online boards for temp and hiring agencies. What an employer will do sometimes is have the employment agency screen potential applicants and present the most qualified candidates as they don't want to dedicate the time for this.

Network

A lot of job openings don't even get posted online. That's why its so important to network and speak with as many people as possible. Every year, a number of job openings are filled even before they can be advertised. Your friends, relatives, ex-coworkers, and neighbors may have inside information about a vacancy for the right job. If there is a certain hospital or physicians office you want to work for, try to get to know someone who works there.

Most of the people that I have hired for my Medical Billing business have not been through ads or postings, but from friends and referrals. Knowing that an employee is trustworthy counts for a lot even if they don't have a lot of experience.

Medical Billing and Coding Salaries

Medical Billing Salary

Medical billing salaries range anywhere from the low $20k ($10/hour) per year starting up to the mid $40k per year ($21/hour) range. These numbers were derived from different sources and depend on location, type of employer (such as hospital, nursing care, physician office, or outpatient facility), size, experience, etc. More detailed information on medical billing salaries is available here and can give you a better idea of

salary to expect.

Medical Coding Salaries

The medical coding salary range is anywhere from the low $20k ($10+/hour) per year starting up to above $50k per year ($24/hour) range. These numbers were derived different sources and depend on location, type of employer (such as hospital, nursing care, physician office, or outpatient facility), size, experience, etc. [More detailed information on medical coding salaries is available here](#) and can give you a better idea of salary to expect. The medical coder salary tends to be a little higher than the medical billing specialist salary as coders typically have more training and are more likely to be certified.

When considering a job it's important to not only look at salary, but to factor in benefits. This would include time off – holidays/vacation/sick, medical/dental, and 401(k) matching, etc. Be sure to factor these in when making a decision. The larger employers are more likely to offer better benefits.

If you are changing jobs, this kind of information is helpful to get an idea of your market value before negotiating. You like to try to get at least 10% more than your current salary when changing jobs. Of course if you're miserable in your current job or can't stand the working conditions, money may not be as big of a factor.

Working From Home

You've probably seen the ads for at home medical billing jobs. Can you really sit at home and make a good living as a medical biller or coder? The short answer is yes you can but it's not as simple as some of those ads make it sound. The only way this is possible is if you have a very flexible and accommodating employer or have your own billing or coding business. If you are really good at what you do and have proven yourself trustworthy, your boss may not care where you work – as long as you can be as productive at home as you are in the office.

In order to succeed at medical coding jobs from home, you should be results oriented and self-disciplined, able to work independently, and manage your time. You also should have the required work space or office at home, be OK with little or no social interaction, and be able to separate family and work.

Due to the nature of the work, medical billing and coding jobs from home are more feasible now than ever. Most practices billing systems are server based and accessible remotely from any PC – either via web or remote desktop. You do have to be in touch with insurance companies, patients, and healthcare providers. However most of this can be done by phone, fax, and email.

A lot of the medical coding and billing work I do at home can be done on any schedule as long as it's done promptly. A medical biller bears a lot of responsibility as the financial health of a practice is dependent on our performance.

Benefits

The benefits of medical billing from home and medical coding from home are the flexibility to set your own hours and the tax advantages of having a home office (consult with your accountant). It's also nice not to have to deal with the daily commute. When working from home it's very important to make sure your office complies with HIPAA privacy practices and all patient information is handled as such.

Disadvantages

The drawbacks are that you have to be disciplined not to let it interfere with your home life. If you don't set boundaries, work can really interfere with your home life.

If you have employees they need to have access to your home. Depending on how your home is laid out this can be intrusive to your privacy. I employ other stay at home moms who work from their home part time as contractors. I just give them an assignment and they can perform on their own schedule. Our medical billing software allows access to our server via Remote Desktop from any other PC.

Demand may Create Flexible Work Options

According to the U. S. Department of Labor's latest Occupational Outlook, the prospects for medical records and health information technicians (under which medical coders fall), employment is expected to increase by 18% through 2016. This means there will be a strong demand for medical coders.

For employers having difficulty attracting qualified coders, they are more likely to offer more flexibility to accommodate productive employees. One of the best benefits is remote medical coding. Larger more progressive employers typically have the

information technology systems and HIPAA procedures in place to allow remote medical coding jobs.

For motivated employees, working from home results in improved morale and productivity. Offering such a benefit makes it easier to attract and retain good employees. Especially in large cities, municipalities may offer incentives for telecommuting to business to ease traffic congestion.

Start Your Own Business

My experience starting a medical billing business has been very rewarding. I won't mislead you and tell you it's easy. I don't think starting any business is easy. If you have the drive and perseverance, your income potential is much greater.

You can build it as a large as you want or as small as you want. I've found the right balance in working from home and generating a comfortable income for our family. And I have no formal education. Here's detailed information on my experience with a [medical billing home business](#).

Summary

As you can see there's a lot of options when considering a Medical Billing Coding Career. From my own experience it can be a very rewarding and fulfilling career option. The demand for billers and coders will present many opportunities and options for the experienced biller and coder for many years. For more information on Medical Billing or Coding as a career or business, check out [All-Things-Medical-Billing](#).

[For more information check out these good references on Medical Billing.](#)