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**Customer: Great Plains Regional Contracting Office, Fort Sam, Houston, TX**

The contract personnel shall be responsible for verifying and coding of the diagnosis, procedures or any other codes required for the completeness and accuracy of the record and to support the Third Party Collection office (as needed) to ensure they have the documentation to submit a claim for reimbursement. Reviews and verifies component parts of medical record to ensure completeness and accuracy of diagnosis, operations, and special therapeutic procedures that must conform to Health Care Financing Administration and Department of Defense Coding Guidelines. Codes and/or reviews principal diagnosis, comorbidities, complications, therapeutic and diagnostic procedures, supplies, materials, injections, and drugs with International Classification of Diseases 9th Revision Clinical Modification (ICD9-CM), Current Procedural Terminology (CPT), Health Care Financing Administration Common Procedure Coding System (HCPCS) – all levels, and any other coding classification systems that may be required by the Department of Defense. Inputs codes into applicable coding system available at the individual MTF. Analyzes medical records for consistency and completeness for coding purposes using PASBA and local standards. Examines all documents in the record for authorized signature and patient identification to ensure all documents contain sufficient documentation to support the diagnosis and treatment administered, and that results obtained are adequately described. Identifies Third Party Billing information per Data Quality Directives and identify lack of proper documentation to clinical and Data Quality staff.