

Coder Fast Facts

Your journey to finding your path

Coder

- Perform coding audits and review of outpatient provider services to support coding optimization and compliance for the medical group.
- Support multiple specialties across the medical group with coding for evaluation, management and procedural services.
- Work side-by-side with outpatient providers providing ongoing feedback, coaching, and support with the code entry process.

Requirements:

- · High school diploma or equivalent.
- American Health Information Management Association (AHIMA) or American Academy of Professional Coders (AAPC) certified coding credential.
- 2 years of working in a medical office or physician billing office, or equivalent office experience.

2022 **Median Salary is \$47,180**

8% job demand increase estimated between 2022-2032

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Wage information from U.S. Bureau of Labor Statistics-https://www.bls.gov